



MEETING AGENDA

November 16, 2018

Michael J. Farrell, Chair

Jenny Allen

James Dailey

Diane Lewis

Dale Lowther

Andrew Payne

Donna Schulte

Steve Paine, Ed.D., Ex-Officio

Robert Brown, Ex-Officio

Carolyn Long, Interim Chancellor

Directions to the West Virginia **Regional Technology Park**

2000 Union Carbide Drive, South Charleston, West Virginia



Arriving from the EAST on I-64

(after leaving Charleston)

1. At I-64 exit 55, take Ramp (RIGHT) toward Kanawha Turnpike
2. Stay on Kanawha Turnpike [CR-12]
3. After about 0.5 mile, turn LEFT into the West Virginia Regional Technology Park (3300 Kanawha Turnpike)
4. Proceed to Building 2000

Arriving from the WEST on I-64

(approaching Charleston):

1. At I-64 exit 54, turn RIGHT onto Ramp towards US-60 / MacCorkle Ave / South Charleston
2. Keep RIGHT to stay on Ramp towards US-60
3. Bear RIGHT (East) onto US-60 [MacCorkle Ave SW], then immediately turn RIGHT (South-East) onto SR-601 [Jefferson Rd]
4. After 0.5 mile, bear left at the traffic light onto Kanawha Turnpike [CR-12]
5. Continue straight (0.1 mile) through the next traffic light on Kanawha Turnpike
6. After about 0.5 mile, turn RIGHT into the West Virginia Regional Technology Park (3300 Kanawha Turnpike)
7. Proceed to Building 2000

WEST VIRGINIA HIGHER EDUCATION POLICY COMMISSION MEETING

November 16, 2018 | 9:00 a.m. | West Virginia Regional Technology Park

AGENDA

I. Call to Order

II. Chairman's Report

III. Chancellor's Report

IV. Council of Presidents' Report

V. Updates from Constituent Groups

- A. Advisory Council of Classified Employees
- B. Advisory Council of Faculty
- C. Advisory Council of Students

VI. West Virginia Regional Technology Park Report

VII. Consent Agenda

- A. Approval of Minutes (**Pages 5 - 12**)
- B. Approval of Appointments to the West Virginia Regional Technology Park Board of Directors (**Page 13**)
- C. Approval of 2018 Research Trust Fund Annual Report (**Pages 14 – 39**)
- D. Approval of Master of Science in Athletic Training (**Pages 40 – 131**)

VIII. Access

- A. Approval of Degree Programs at Out-of-State Location (**Pages 132 – 136**)
- B. Approval of Revisions to Series 21, Procedural Rule, Freshman Assessment and Placement Standards (**Pages 137 – 144**)
- C. Approval of Revisions to Series 41, Procedural Rule, Health Sciences Service Program (**Pages 145 – 154**)
- D. Presentation of 2018 Financial Aid Comprehensive Report (**Pages 155 – 159**)

IX. Success

- A. Report on Fall 2018 Enrollment (**Page 160**)
- B. Report on Program Review (**Pages 161 – 167**)

X. Approval of Fiscal Year 2019 Capital Project Priorities (Pages 168 – 178**)**

XI. Fiscal Year 2018 Consolidated Audit Presentation (Pages 179 – 195**)**

XII. Approval of Sole Record-Keeper Model for West Virginia Higher Education Retirement Plan (*Pages 196 – 207*)

XIII. Approval of West Virginia Regional Technology Park Deed Conveyance (*Pages 208 – 218*)

XIV. Additional Board Action and Comment

XV. Adjournment

DRAFT MINUTES

WEST VIRGINIA HIGHER EDUCATION POLICY COMMISSION Work Session

August 15, 2018

I. Call to Order

Vice Chairman Andrew A. Payne, III, convened a work session of the Higher Education Policy Commission on August 15, 2018, at 3:30 p.m., in the 9th Floor Conference Room at 1018 Kanawha Boulevard, East, Charleston, West Virginia, and by conference call. The following Commission members participated: Jenny Allen, Diane Lewis, Dale Lowther, Steven L. Paine, and Andrew A. Payne, III (in person). Also in attendance were Interim Chancellor Carolyn Long and staff, state college and university representatives, and others.

II. Review of August 24, 2018, Agenda

Commission staff provided an overview of the items on the agenda for the August 24, 2018, meeting.

III. Adjournment

There being no further business, the meeting was adjourned.

Andrew A. Payne, III, Vice Chairman

Diane Lewis, Secretary

DRAFT MINUTES

WEST VIRGINIA HIGHER EDUCATION POLICY COMMISSION

August 24, 2018

I. Call to Order

Chairman Michael J. Farrell convened a meeting of the Higher Education Policy Commission on August 24, 2018, at 9:00 a.m. in the David K. Hendrickson Conference Center of the West Virginia Regional Technology Park, 2000 Union Carbide Drive, South Charleston, West Virginia. The following Commissioners were present: Jenny Allen (by phone); James W. Dailey (by phone); Michael J. Farrell; Diane Lewis (by phone); Dale Lowther; Andrew A. Payne; Steven L. Paine, (Ex-Officio), (by phone); and Donna L. Schulte. Absent was Commissioner Robert L. Brown (Ex-Officio). Also in attendance were Interim Chancellor Carolyn Long, institutional presidents, higher education staff, members of the faculty and classified staff councils, and others.

II. Approval of Minutes

Commissioner Payne moved to approve the minutes of the meetings held on June 13, June 22, and July 10, 2018. Commissioner Allen seconded the motion. Motion passed.

III. Chairman's Report

Chairman Farrell welcomed Commission members and the audience to the meeting. He stated that the role of higher education is alive and well in West Virginia. He clarified the purpose of the Blue Ribbon Commission, and indicated that it is exploring structural efficiencies to the higher education system but that the Legislature will make the ultimate decision regarding any proposed changes.

IV. Chancellor's Report

Ms. Carolyn Long, Interim Chancellor, thanked the Commission for her assignment as Interim Chancellor and to the staff for their willingness to work together in this new phase. She reported that she met with the presidents and some of the Board of Governors members, and appreciated their openness and candor. She attended meetings of the Jobs Investment Trust Fund Board, the WV Regional Technology Park Board, and the State Board of Education. She looks forward to partnering with the Board of Education to further collaboration between the two agencies. Ms. Long mentioned the many projects spearheaded by Commission staff and the activities in which they are participating.

V. Council of Presidents' Report

Dr. Kendra Boggess, Chair of the Council of Presidents, reported that the presidents met and discussed various issues such as the need for reduction in the workforce required to operate OASIS; the report to the Legislature on the real estate properties owned or leased by the institutions; the work of the Blue Ribbon Commission; and most importantly, the funding formula for higher education. The presidents agreed that it is imperative that all institutions be equally funded. They request that the Commission make available the original funding model and look at other funding models for guidance. Dr. Bogges asked that all presidents be allowed to be more involved in the funding dialogue.

VI. Updates from Constituent Groups

A. Advisory Council of Classified Employees

The Council did not present a report.

B. Advisory Council of Faculty

Dr. Mary Beth Beller, Chair of the Advisory Council of Faculty, reported that in response to a request from Chairman Farrell, the Council worked with faculty to develop an open source of materials they commonly use in the classrooms that can be shared by all faculty, in order to lower the cost of books and other resources for their students. Dr. Beller stated that the Council wrote a letter to the Blue Ribbon Commission asking that faculty be included in its deliberations. As the Blue Ribbon Commission's work progresses and no response has been received by the Council, it is asking the Policy Commission to advocate the faculty's participation. She added that the success of the Blue Ribbon Commission depends on the input of all constituencies. Chairman Farrell responded by encouraging constituencies to attend the Blue Ribbon Commission meetings. He asked that they identify themselves in advance of the meeting so that he can call on them when a pertinent issue arises.

C. Advisory Council of Students

The Council did not present a report.

VII. Access

A. Approval of Eligibility Requirements for the PROMISE Scholarship Program

Mr. Brian Weingart, Senior Director of Financial Aid, provided an overview of the proposed eligibility requirements for the PROMISE Scholarship Program. After discussion, a motion was offered.

Commissioner Payne moved approval of the following resolution:

Resolved, That the West Virginia Higher Education Policy Commission approves the proposed eligibility requirements for the PROMISE Scholarship Program.

Commissioner Schulte seconded the motion. Motion passed.

VIII. Success

A. Report on Master's Degree Programs

Dr. Mark Stotler, Director of Academic Programming, reported that in accordance with West Virginia Code §18B-1A-6(g), Concord University, Fairmont State University, Shepherd University, West Liberty University, and West Virginia State University have submitted reports on the viability of master's degree programs at their respective institutions. Dr. Stotler provided a summary of notable developments and achievements in the graduate offerings at each institution and a chart that lists number of program enrollees and graduates.

IX. Impact

A. Approval of System Master Plan

Dr. Zornitsa Georgieva, College Access and Success Research and Policy Analyst, presented recommendations on the proposed reauthorization of the current System Master Plan. Chairman Farrell asked Dr. Georgieva to forward the presentation to Dr. Jay Cole, who is managing the data for the Blue Ribbon Commission, so that the members are aware of the metric goals set for adoption. After discussion, a motion was offered.

Commissioner Payne moved approval of the following resolution:

Resolved, That the West Virginia Higher Education Policy Commission approves reauthorization of the current system Master Plan, "Leading the Way: Access. Success. Impact." for two additional years.

Commissioner Schulte seconded the motion. Motion passed.

B. Update on Statewide Attainment Goal Campaign

Dr. Christopher Treadway, Senior Director of Research and Policy, presented an overview of the Commission's new statewide campaign "West Virginia's Climb", aimed at increasing the educational attainment rate of working-age West Virginians from 31.4 percent to 60 percent by the year 2030. He indicated

that the campaign seeks to encourage collaboration among four-year colleges and universities, community and technical colleges, career and technical education centers, K-12, business and industry, government agencies and philanthropic organizations. It will also provide a framework for new college access and student success initiatives.

X. Report on Campus Safety Plans

Mr. James King, Director of Facilities and Sustainability, reported that under the provisions of Series 54, Procedural Rule, Campus Safety Procedures, each institution is required to review its emergency plans annually, and each president is to submit an update by June 30. He stated that the Commission has been actively engaged in promoting best practices regarding campus safety and emergency response since the inception of the rule in 2014. Efforts have been ongoing to strengthen partnerships among campuses and organizations such as the Red Cross, utility companies, law enforcement and local response agencies to prepare for a range of emergency circumstances by continuously updating procedures, designations and training scenarios.

XI. Report on West Liberty University Campus Facilities Plan

Mr. King reported that to comply with the Commission's June 22, 2018 request for West Liberty University to coordinate and submit a campus facilities plan in relation to the construction of its soccer field complex, it has hired the architectural firm, The Mills Group, specifically for this purpose. University officials, The Mills Group and Commission staff are assessing and compiling the data necessary to meet the recommendations in West Virginia Code, and will be ready to present a final draft of the campus facilities plan in the next six to eight months.

XII. Approval of West Liberty University Bond Issuance

Dr. Edward Magee, Vice Chancellor for Finance, provided an overview of the proposed bond issuance as requested by West Liberty University. After discussion, a motion was offered.

Commissioner Payne moved approval of the following resolution:

Resolved, That the West Virginia Higher Education Policy Commission approves and confirms the 2018 West Liberty University bond issuance as submitted. If the final agreement requires additional conditions, they must be presented to the Chancellor who is hereby delegated the authority to approve the final documents.

Commissioner Lowther seconded the motion. Motion passed.

XIII. Progress Report on Funding Model Research Study

Dr. Treadway provided a summary and overview of the feedback submitted during the Funding Model Research Study public comment period, from March 23 to April 27, along with recommendations for modifications to the proposal based on public feedback. Mr. Scott Boelscher, Senior Associate with HCM Strategists post-secondary policy team, with whom the Commission has contracted to assist with the project, joined by telephone to answer any questions or concerns.

XIV. Presentation of Report from the National Center for Higher Education Management Systems

Dr. Treadway gave a detailed overview of the “Sustaining Public Higher Education Services in Every Region of West Virginia” study conducted by researchers with the National Center for Higher Education Management Systems.

XV. Approval of Fiscal Year 2019 Division of Science and Research Spending Plans

Dr. Jan Taylor, Director of Science and Research, presented an overview of the proposed Science and Research spending plans for Fiscal Year 2019.

Commissioner Payne moved approval of the following resolution:

Resolved, That the West Virginia Higher Education Policy Commission approves the Fiscal Year 2019 spending plans as recommended by the West Virginia Science and Research Council.

Commissioner Lowther seconded the motion. Motion passed.

XVI. Approval of Fiscal Year 2019 WVNET Budget

Mr. Matthew Turner, Executive Vice Chancellor for Administration, presented an overview of the proposed budget for the West Virginia Network for Educational Telecomputing for Fiscal Year 2019.

Commissioner Payne moved approval of the following resolution:

Resolved, That the West Virginia Higher Education Policy Commission approves the Fiscal Year 2019 West Virginia Network for Educational Telecomputing budget.

Commissioner Schulte seconded the motion. Motion passed.

XVII. Approval of Revisions to Series 4, Procedural Rule, Rules and Administrative Procedures

Ms. Candace Kraus, Interim General Counsel, provided an overview of the proposed revisions to Series 4, Procedural Rule, Rules and Administrative Procedures.

Commissioner Payne moved approval of the following resolution:

Resolved, That the West Virginia Higher Education Policy Commission approves the revisions to Series 4, Procedural Rule, Rules and Administrative Procedures, to be filed with the Secretary of State.

Commissioner Dailey seconded the motion. Motion passed.

XVIII. Series 5, Legislative Rule, Guidelines for Governing Boards in Employing and Evaluating Presidents

Ms. Kraus provided an overview of the comments submitted during the thirty-day public comment period to the proposed revisions to Series 5, Legislative Rule, Guidelines for Governing Boards in Employing and Evaluating Presidents. The revisions are the result of House Bill 2815, passed during the 2017 Legislative Session, which removed authority of the Higher Education Policy Commission in approving the appointment and compensation of presidents at the exempted institutions. In addition, the legislation removed the requirement that the Commission approve the appointment of a president at a non-exempt institution and instead gives it the authority only to confirm an appointment. Ms. Kraus noted that these comments were not relative to the content of the rule and therefore, no additional revisions to Series 5 were made.

XIX. Series 59, Procedural Rule, Awarding Undergraduate College Credit for Prior Learning, Advanced Placement Credit, and College-Level Examination

Dr. Corley Dennison, Vice Chancellor for Academic Affairs, provided an overview of the comments submitted during the thirty-day public comment period to the proposed revisions to Series 59, Procedural Rule, Awarding Undergraduate College Credit for Prior Learning, Advanced Placement Credit, and College-Level Examination. He noted that these comments were not relative to the content of the rule and therefore, no additional revisions to Series 59 were made.

XX. Executive Session under the Authority of West Virginia Code §6-9A-4 to Discuss Property Issues and Pending and Potential Litigation

Commissioner Payne moved to convene in Executive Session under the authority of West Virginia Code §6-9A-4 to discuss property issues and pending potential litigation. Commissioner Lowther seconded the motion. Motion passed.

After deliberations, the Commissioners returned to open session.

Chairman Farrell stated that no decisions were made or actions taken during Executive Session. The following issues were discussed:

- A. Consideration of matters involving or affecting the purchase, sale or lease of property, advance construction planning, the investment of public funds or other matters involving commercial competition, which if made public, might adversely affect the financial or other interest of the State or any political subdivision.
- B. Attorney-Client privileged matter which, by express provision of federal law or State statute or rule of court are rendered confidential, or which are not considered a public record within the meaning of the Freedom of Information Act as set forth in West Virginia Code Article 1, Chapter 29B.

XXI. Additional Board Action and Comment

There were no additional actions or comments.

XXII. Adjournment

There being no further business, Commissioner Payne moved to adjourn the meeting. Commissioner Schulte seconded the motion. Motion passed.

Michael J. Farrell, Chairman

Andrew A. Payne, Secretary

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Approval of Appointments to the West Virginia Regional Technology Park Board of Directors

INSTITUTION: West Virginia Regional Technology Park

RECOMMENDED RESOLUTION: *Resolved*, That the West Virginia Higher Education Policy Commission approves the appointments to the West Virginia Regional Technology Park Board of Directors.

STAFF MEMBER: Carolyn Long

BACKGROUND:

Appointments to the West Virginia Regional Technology Park Board of Directors are to be made by the Commission when vacancies exist on the Board. Currently, the terms of four members have expired. Membership terms are staggered terms of one, two and three-year terms.

Based on current West Virginia Code and the Board of Directors by-laws, the Commission is to appoint board members at the last regularly scheduled meeting of the fiscal year or when vacancies exist. Current members may serve after the expiration of their terms or until they are replaced or reappointed by the Commission.

It is recommended that the following individuals be reappointed to a new three-year term ending June 30, 2021:

- **Georgette George**, Chief Executive Officer at Monarch Holdings
- **David Hendrickson**, founding law partner of Hendrickson & Long, PLLC
- **Steve Hedrick**, President and CEO of Mid-Atlantic Technology, Research & Innovation Center (MATRIC)
- **Kevin DiGregorio**, Director of the Chemical Alliance Zone and Manager of ChemCeption

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Approval of 2018 Research Trust Fund Annual Report

INSTITUTIONS: All

RECOMMENDED RESOLUTION: *Resolved*, That the West Virginia Higher Education Policy Commission approves the 2018 Research Trust Fund Annual Report and recommends submission to the Governor and the Legislature.

STAFF MEMBER: Jan Taylor

BACKGROUND:

As provided in West Virginia Code §18B-18A-1 et seq. and reporting requirements outlined in Series 48, Legislative Rule, Research Trust Fund Program, the Commission receives annual reports from institutions and is required to submit a combined annual report on the Research Trust Fund to the Governor and the Legislative Oversight Commission on Education Accountability (LOCEA) by January 1 of each year.

In compliance with this statutory requirement, the Commission is provided the annual report for 2018 activities within the Research Trust Fund for review, comment, and approval. Marshall University and West Virginia University are using the proceeds from investments of private gifts and state matching to fund scholarships and fellowships to undergraduates and graduate students, support faculty research, support for endowed chairs in the College of Engineering and Mineral Resources at WVU and in the College of Information Technology and Engineering at MU.

The market value of investments at WVU as of June 30, 2018 was \$83,330,630 which provided \$4,250,034 in earnings available to spend on the approved research plan. In Fiscal Year (FY) 2018, \$8,755,080 of Research Trust Fund dollars, both that from private accounts and matching state accounts, was spent on research for scholarships, fellowships, prominent scholars, and in support of ongoing research initiatives.

The market value of endowments at the MU Foundation as of June 30, 2018 was \$34.5 million. Earnings to date are \$7,720,934 which are available to spend on MU's approved research plan. FY18 expenditures totaled \$672,000 and total expenditures over the life of the program are \$1.89 million.

The 2018 report is the tenth in a series of annual reports provided by staff since the program's inception in 2008. Contents of the report are provided on the following pages. The full, printed report, titled, "Report to the Legislative Oversight Commission on Education Accountability – West Virginia Research Trust Fund," will be provided to the Governor and the Legislature pending Commission approval.

2018 Report on the Research Trust Fund (RTF)

Background

Outlined in Series 48, Research Trust Fund Program, the Commission receives annual reports from institutions and is required to submit a combined annual report on the Research Trust Fund to the Governor and the Legislative Oversight Commission on Education Accountability (LOCEA) by January 1 of each year.

In compliance with this statutory requirement, the LOCEA is provided the annual report for 2017-2018 activities within the Research Trust Fund for review, and approval. The 2018 report is the tenth in a series of annual reports provided by staff since the program's inception in 2008.

RTF Activities through August 2018

The Commission completed its initial implementation plan during the fall of 2008 which resulted in Title 133 Legislative Rules Series 48, subsequently approved by the legislature during the 2009 regular session. The rule establishes guidelines, procedures and documentation standards for the distribution of funds in the West Virginia Research Trust Fund. The rule designates the Vice Chancellor for Science and Research as the administrator of the program, under the general direction of the Chancellor and the Commission. The final rules are available at https://www.wvhpc.org/resources/rulesandpolicies_files/Series%2048%20%284-16-09%29.pdf. .

Commission staff created an electronic "Match Request System" (MRS) in 2008 that allowed secure transactions for RTF requests made by the universities. All requests, documentation and invoicing are permanently recorded in files that allow sorting, analysis and up-to-date balance information. The MRS was cross referenced with university records annually to ensure accuracy in drawdown reporting for previous reports.

Required "Research Plans" specified by the legislation and approved by institutional Boards of Governors' were received from both West Virginia University and Marshall University. Both institutional plans are on file at the Commission and are found to be generally compliant with legislative requirements.

The RTF financial account was established in late June 2008 by the State Auditor and made accessible to Commission staff for distribution. All transactions from this fund were completed in 2013.

Interest funds generated by the RTF account have been separately tracked for distribution to State Colleges as defined by the Legislature. On May 15, 2009, the Commission released the first competitive request for proposals for RTF interest funds collected on the account specifically for state colleges and the WV School of Osteopathic Medicine in accordance with provisions of §18B-18A-10 of the code. A second request for proposals was issued on March 9, 2010 a third on June 2, 2011, a fourth on May 30, 2012 and a fifth on September 21, 2012. Proposals for up to \$100,000 each were received from eligible institutions and subsequently reviewed by external peers for program merit. Two awards were issued in 2009, two in 2010 and one in 2011 as a result. No applications were received in response to the May 2012 request for proposals. A request for proposals was issued on September 7, 2012 – one institution was awarded. A final award was made on May 6, 2013

The institutions who received awards from the RTF for State Colleges and Universities were Shepherd University, Fairmont State University, West Liberty University, West Virginia State University and West Virginia University Institute of Technology.

The Research Trust Fund has been fully matched and no additional funds are available for distribution.

Marshall University and West Virginia University reports for 2018 are attached.



Marshall University
Research Endowment Plan Annual Report
2017-2018

Submitted to the Division of Science and Research at the
West Virginia Higher Education Policy Commission

I. Summary

The West Virginia Research Trust Fund program has created sixteen endowments at Marshall University to fund allowed research-related activity. Over fifteen million dollars of private donations and the fifteen million dollars of state match have been invested in the Marshall University Foundation and Marshall University Research Corporation, respectively. These endowments span research areas from Engineering to Clinical and Translational Research and specify uses from direct research support to student research stipends. In FY 2013, the full \$15MM in gifts and pledges was raised, along with an excess of over \$800,000.

As of June 30, 2018, the Marshall University Bucks for Brains Endowments totaled \$34.5MM, with \$1.89 MM of endowment proceeds expended over the life of the program. FY 18 expenditures totaled \$672,000. Earnings to date have amounted to \$7.72MM.

II. Review of the Marshall University Research Endowment Plan

Marshall's original Research Endowment Plan approved by the University's Board of Governors in 2008, directed donations to:

- Endowment of the Marshall Institute for Interdisciplinary Research (MIIR), continuing with the plan laid out in Marshall's application to the Eminent Scholars Recruitment and Enhancement (ESRE) initiative; and
- Advancement of Intelligent Transportation Systems research at the Rahall Transportation Institute (RTI).

In November 2010, the Marshall University Board of Governors approved a Research Trust Fund Addendum (Appendix One) that broadened the recognition of Biomedicine/ Biotechnology as a focus for donor activity across the University, and further included aspects of Engineering, Environmental Science and the Physical Sciences.

III- Endowed Research Area Highlights

A brief update on highlighted activities of the endowments is included below. A comprehensive summary of the endowments is included in previous versions of this report. The current corpus balances and earnings-to-date are provided in Table One, at the end of this section.

FY 2018 activities associated with cellular sodium-potassium pump (Na/K ATPase) signaling and oxidative stress in addressing a variety of disease states have continued in the School of Medicine. Important discoveries have been made in the area of aging and muscular development.

In a preliminary rat animal study, Dahl salt-sensitive (SS) rats and relatively salt-resistant SS-13BN (on the background of SS rats) rats were given SnMP or CoPP, respectively, and then fed with high salt (4% NaCl) diet. The hypothesis is that induction of HO-1 in SS rats will reduce basal oxidative stress rendering the rats relatively salt resistant, and inhibition of HO-1 activity in SS-13BN rats will increase oxidative stress rendering the rats relatively salt sensitive. In the last year, our preliminary data showed that induction of HO-1 is able to lower blood pressure (BP), and significantly reduce a high salt diet mediated BP increase.

The Maier Institute has developed a multi-disciplinary team of researchers including faculty members in the fields of geriatrics, clinical informatics, translational science, internal medicine, psychiatry, and pharmacy.

The Maier Institute will continue to work towards the goals of its externally funded grant program Rational Benzodiazepine Avoidance and Deprescribing.

B-Current Fund Balances

The current fund balances for the Marshall University Research Trust Fund Endowments are shown in Table One, below, along with earnings since inception. Expenditures in FY 2018 amounted to \$560,000.

Table One- Fund Balances for Marshall University's Research Trust Fund Endowments at the End of FY18 (Reflecting MURC and MUF holdings as of June 2018)

#	Fund	Corpus	Total Earnings Since Inception
1	MIIR	6,614,731	1,975,462
2	RTI	350,000	122,911
3	Maier Dementia Research	2,000,150	574,577
4	Fletcher Engineering	1,693,855	443,270
56	Pew River Research	530,200	156,610
7	Brickstreet Safety Research	441,600	138,491
8	Chemistry SURF	242,395	63,126
9	Zacharias OB/GYN	796,714	227,902
10	Translational Sports Medicine Research	10,126,650	2,440,522
11	Eiselstein Scholarship	111,100	19,962
12	Tarter Scholarship	44,970	8,937
13	Beckelheimer Scholarship	105,000	21,424
14	Hanshaw Geriatric Research	1,000,000	197,499
15	Rezulin Endocrinology Research	1,782,021	402,627
16	Brickstreet Wellness Research	5,000,000	927,613
	Total	30,839,386	7,720,934

Appendix One- Marshall University's Research Trust Fund Addendum

The University's directed research endowment plan has concentrated initially in two domains of interdisciplinary research, which are strengths at Marshall: research clusters in biomedicine/biotechnology/ bionanotechnology and transportation technology/logistics. Marshall's Research Trust Fund activities are to be expanded to include the following areas:

I. Engineering

Engineering is a foundational discipline essential to the development and implementation of research in the approved areas in the Research Trust Fund legislation¹. Marshall has recently achieved ABET accreditation of its engineering program, and has experienced dramatic facilities growth with the construction and occupation of The Arthur Weisberg Family Engineering Laboratories facility and is planning for the future addition of an Advanced Engineering and Technology Center Complex. Development of robust undergraduate and graduate programs and the associated integral research opportunities are essential to developing and enhancing the capabilities and profile of the school.

Match from the Research Trust Fund was used to enhance private donations for endowed professorships and other research-related positions and initiatives in all aspects of Engineering as they relate to the allowed subject areas of the Research Trust Fund Program and the associated uses allowed in the legislation.

Two examples of gifts that have been received in support of engineering endowments are included, and a third solicitation is discussed:

A. Applied Research- Safety Engineering Program

Risk management is a highly specialized field that involves applying the principles of safety engineering and industrial hygiene and integrating them with economic and financial analysis. Marshall University will expand its Research Trust Fund Plan in this area important to transportation and logistics and energy to support an endowment in risk management research. The proposed endowment will support the development of research expertise in

¹

4.3.1. Energy and environmental sciences;

4.3.2. Nanotechnology and materials sciences;

4.3.3. Biological, biotechnical and biomedical sciences;

4.3.4. Transportation technology and logistics;

4.3.5. Biometrics, security, sensing, and related identification technologies; and

4.3.6. Gerontology.

the school of engineering in the area of risk management, a highly interdisciplinary pursuit at the interface of management, engineering and applied mathematics.

The proposed applied research employs advanced risk management concepts and research to identify, trend, estimate and reduce workplace hazards in industry based in WV. The area will be supported by a \$100,000 endowment received from BrickStreet and the corresponding state match.

Risk management is of particular interest to the energy industry in our state because of the safety and economic risks associated with the extraction process. In energy, risk management research is essential to find new ways to:

- deal with its high element of monetary risk due to the uncertainty of the economic and regulatory outlook
- reduce the physical risk associated with extraction and development activities, and improve the safety of individual employee

In transportation and logistics research, risk management has become central to understanding many critical elements such as:

- the robustness and resilience of our transportation systems to interruptions due to system load, natural phenomena, and man-made disruptions
- the risks associated with transport of hazardous materials and the potential benefits of mitigation of those risks
- the robustness of logistics networks
- the risks associated with logistics and supply chain outsourcing

These benefits are of particular relevance to the state given current events, and are particular interests of the donor.

B. Mechanical Engineering

Mechanical engineering applies the principles of physics and materials science for analysis, design, manufacturing, and maintenance of mechanical systems. Mechanical engineers use the core principles of mechanics, kinematics, thermodynamics, materials science, and structural analysis along with tools like computer-aided engineering and product lifecycle management to design and analyze items as diverse as manufacturing plants, industrial equipment and machinery, heating and cooling systems, motorized vehicles, aircraft, watercraft, robotics, medical devices and more.

The field has continually evolved to incorporate advancements in technology, and mechanical engineers today are pursuing developments in such fields as composites, mechatronics, and nanotechnology. Mechanical engineering overlaps with aerospace engineering, civil engineering, electrical engineering, and petroleum engineering to varying amounts.

A gift from the Fletcher family will endow a founding Chair of Mechanical Engineering. Mechanical Engineering is an important discipline in Bioengineering and energy sectors. This endowment is essential to developing a Department of Mechanical Engineering, by attracting a senior-level professor to Marshall, with his/her associated research programs.

Another area that is endorsed by the Board of Governors for planning and an active source of solicitation is:

C. Bioengineering

In the translation of biomedical and biotechnology advances, bioengineering is a lynchpin in bridging the transition from academe to commercialization. Marshall University is planning to develop a Bioengineering Department contemporaneously with the construction of the Applied Technology and Engineering Complex. The development of the Department would follow a trajectory very similar to that of Mechanical Engineering, with the attraction of a founding research scientist/bioengineer.

“Biological engineering, biotechnological engineering or bioengineering (including biological systems engineering) is the application of engineering principles to address challenges in the life sciences, which include the fields of biology, ecology, and medicine. Biological engineering is a science based discipline founded upon the biological sciences in the same way that chemical engineering, electrical engineering, and mechanical engineering are based upon chemistry, electricity and magnetism, and statics, respectively”².

“Biological Engineering can be differentiated from its roots of pure biology or classical engineering in the following way. Biological studies often follow a reductionist approach in viewing a system on its smallest possible scale, which naturally leads toward the development of tools such as functional genomics. Engineering approaches using classical design perspectives are constructionist, involving the building and research of new devices, approaches, and technologies from component concepts. Biological engineering utilizes both of these methods in concert relying on reductionist approaches to define the fundamental units, which are then commingled to generate something new”.³ “Although engineered biological systems have been used to manipulate information, construct materials, process chemicals, produce energy, provide food, and help maintain or enhance human health and our environment, our ability to quickly and reliably engineer biological systems that behave as expected remains less well developed than our mastery over mechanical and electrical systems”.⁴

² Cuello J.C., “Engineering to biology and biology to engineering, The bi-directional connection between engineering and biology in biological engineering design”, *Int. J. Eng. Ed.*, **21**,1-7 (2005).

³ Riley MR, “Introducing Journal of Biological Engineering”, *Journal of Biological Engineering* **1**, 1 (2007).

⁴ Endy D, “Foundations for Engineering Biology”, *Nature*, **438**, 449-4 (2005).

Given Marshall's research strengths in the biological and biomedical sciences and the emphasis of initiatives, like the Marshall Institute for Interdisciplinary Research (MIIR), on translating key research findings into commercialization, the discipline of bioengineering sits at a nexus of opportunity for the University. It will be a critical element in fully developing the potential of Marshall's applied research enterprise and its translation to economic development.

II. Mathematics and the Physical Sciences

Mathematics and the Physical Sciences are basic sciences that have relevance to all aspects of the allowed areas of the Research Trust Fund legislation. Research Trust Fund match was sought to enhance private donations supporting endowed professorships and other research-related positions and initiatives focusing on research in the allowed areas in these disciplines.

The first application was for an endowed rotating professorship to promote an undergraduate summer research experience in Chemistry.

This match for the undergraduate research endowment under the Research Trust Fund was used because undergraduate summer research in Chemistry is relevant to so many of the legislatively enabled areas:

- Chemistry is one of the fundamental underpinnings of nanoscience because of the molecular nature of the discipline
- The Department of Chemistry at Marshall University has core groups in biochemistry/biotechnology and materials science
- Faculty members also work on energy research and molecular energetics.

WV Research Trust Fund

Annual Report

from

West Virginia University⁵

August 15, 2018

⁵ Address questions and requests for additional information regarding WVU's Strategic Research Plan and the Research Trust Fund initiative to Provost Joyce McConnell, West Virginia University (joyce.mcconnell@mail.wvu.edu) or Vice President for Research, Dr. Fred King, West Virginia University (fred.king@mail.wvu.edu).

Introduction

This tenth annual report describes the history of the Research Trust Fund, responds directly to the reporting requirements outlined in Series 48 (§ 133-48-14), and lays out the proposed spending plan for the earned interest and carry over funds from each endowment for FY 2019.

History of the Research Trust Fund (2008-2009)

In March 2008, the West Virginia Legislature enacted Senate Bill 287, commonly referred to as the Research Trust Fund, as an effort to build a critical mass in selected areas of research and thus lay the groundwork for future economic development. The initial Bill provided a five-year window for the deposit of qualified donations into research endowments. Senate Bill 239 (Passed March 12, 2011) amended §18B-18A-9 of the Code of West Virginia to provide a seven year window. Senate Bill 287 committed \$35 million to West Virginia University as a basis for a 1:1 match with private dollars to create endowments that would provide a sustainable source of funds for research and development. West Virginia University's approved Strategic Research Plan identified four areas for investment:

- Energy and environmental sciences;
- Nanotechnology and material science;
- Biological, biotechnological, and biomedical sciences; and
- Biometrics, security, sensing and related identification technologies.

A brief description of each research area is available at http://research.wvu.edu/home/research_trust_of_west_virginia_university. These areas were selected because they complemented the expertise of WVU's faculty, were critical issues of importance to the public, and were at the core of WVU's land-grant mission.

An Addendum to WVU's Strategic Research Plan for the Research Trust Fund was approved by the WVU Board of Governors in December 2010 and incorporated therein. Three modifications were made:

1. Adding forensic sciences as an area of emphasis under the biometrics, security, sensing, and related identification technologies, providing the opportunity for private investment into this area of research.
2. Adding a Library endowment to support the acquisition of materials in the four research areas, clarifying the importance that library resources provide to a vibrant research agenda.
3. Removing the language "no research area may receive more than \$17.5 million in private donations within the first two years," allowing WVU to maximize private investment regardless of focus area.

Achieving the Goal: \$70 million in Private and State Endowments

During the first four years after the inception of the Research Trust Fund, West Virginia University received gifts and pledges totaling \$35 million, the total amount allocated to the University through the Research Trust Fund initiative. Each endowment was qualified by the West Virginia University Board of Governors and thus eligible for state matching funds. **Thus the University's goal was achieved.**

The seven-year pledge period has officially concluded. The 85 endowments in Appendix A represent the final portfolio established under the Research Trust Fund initiative. These endowments include five generic types of gifts: 12 chairs and professorships, 12 undergraduate scholarships, 14 graduate fellowships, 2 graduate or undergraduate fellowships, 43 broad-based research support funds, and 2 library endowments.

Compliance with Legislative Rule for Research Trust Fund

Three specific reporting requirements are identified in Series 48 (§ 133-48-14), the Research Trust Fund Program.

1. *14.1. By August 15, 2009, and annually thereafter, each participating institution shall provide an annual report to the Commission that includes a full accounting of the trust funds, endowment proceeds, and adherence to the objectives established by the research plan.*
2. *14.2. Each participating institution shall detail in its annual report to the Commission the total amount of qualified donations received, the investment earnings realized and any anticipated expenditures of the research endowment proceeds in its annual operating budget.*

The data in APPENIDX A summarize much of the information requested by the Legislative Rule.

Through June 30, 2018 the following results have been achieved:

- **FY18 Market Value for all the Private RTF Endowments**
The market value of Directed Research Endowments established with private gifts invested in the Research Trust Fund Program of the WVU Foundation Endowment for fiscal year ending June 30, 2018 is \$43,492,179.
- **FY19 Spend Available for the Private RTF Endowments**
The available proceeds from Directed Research Endowments established with private gifts invested in the Research Trust Fund Program of the WVU Foundation Endowment for FY19 are \$1,787,830.

- **FY18 Market Value for all the State RTF Endowments**
The market value of Directed Research Endowments established with trust distributions (state funds) to the Research Trust Fund Program of the WVU Foundation Endowment for fiscal year ending June 30, 2018 is \$39,838,451.
- **FY19 Spend Available for the State RTF Endowments**
The available proceeds from Directed Research Endowments established with trust distributions to the Research Trust Fund Program of the WVU Foundation Endowment for FY19 is \$2,462,204.
- **NOTE:** During the period from March 08, 2008 to June 30, 2012, the WVU Foundation received 19 distributions from the Research Trust Fund totaling \$35,000,000; these dollars provided the matching funds for 1210 qualified gifts (donations and pledges) to Directed Research Endowments established under the Research Trust Fund.

3. *14.4. Each participating institution's research corporation and/or foundation shall provide the Commission with an audited financial statement annually. These statements shall be treated as confidential.*

A copy of the audited financial statements for years ending June 30, 2017 and 2016 for the WVU Foundation has been forwarded, under separate cover, to the Policy Commission through Director Jan Taylor. Because of timing of submission of this report relative to the receipt of the audited financial statement, the audited financial statement of the WVU Foundation, Inc. will always be a year in arrears.

Impact of the Research Trust Fund

Vice President for Research Fred King remarked previously that: “The Research Trust Fund is not only an investment in our University, it is an investment in the future of our state. We know that research and innovation are the key economic drivers as we move forward in the 21st Century and compete in a global economy. The ideas generated and the students educated through the endowments establish under the Research Trust Fund initiative provide a basis for West Virginia’s future prosperity. We are thankful to the donors and the West Virginia legislature for their confidence in our ability to deliver the innovation and education essential to the state’s economic future.”

To place Vice President King’s remarks in a more specific context, WVU learned on February 1, 2016, that it was classified as an R1 or highest research activity, university by the Carnegie Classification of Institutions of Higher Learning, a ranking is shared by only 114 other universities in the United States. This ranking authenticates the quality of WVU’s research on the global stage. In FY 2018, WVU faculty secured \$140 million in externally sponsored grants and contracts.

President Gordon Gee continues to make the critical point that WVU must help West Virginia reshape its economy for a brighter future. Three critical pillars undergird the reshaping of the state: education, healthcare, and broad-based prosperity. The institution's research investments, the research funds generated by our faculty, and the support provided by the Research Trust fund set the foundation on which these pillars rest.

WVU is committed to using its RTF resources to help shape the state's future and improve the quality of life for all West Virginians. A few examples follow that illustrate the impact of West Virginia University's research on the State of West Virginia's health and prosperity:

The University was recently selected for the initial clinical trial of an innovative treatment for Alzheimer's disease. The director of the University's Rockefeller Neuroscience Institute, Dr. Ali Rezai, established a collaboration with INSIGHTEC, a medical technology company based in Israel, to begin a clinical trial of focused ultrasound to treat Alzheimer's disease. In a Phase II clinical trial, Dr. Rezai's team will evaluate the safety and benefits of focused ultrasound to disrupt the blood-brain barrier to treat regions of the brain impacted by Alzheimer's. The ability of focused ultrasound to reduce cognitive decline arising from this devastating disease will also be explored. In announcing this collaborative effort, Dr. Rezai, who also holds the John D. Rockefeller IV Chair of Neuroscience note that "Today's news is a major step forward for the WVU Rockefeller Neuroscience Institute, the State of West Virginia, and the nation in the struggle to combat Alzheimer's - one of the most dreaded neurological diseases."

The West Virginia University Energy Institute, led by Professor Brian Anderson, partnered with the US Department of Energy and Rockwell Automation, as well as other private partners, to undertake a \$3.4M project to explore the feasibility of technology to separate and extract rare earth elements from acid mine drainage and sludge. These rare earth elements are essential to modern technologies ranging from consumer goods to defense systems. They are in limited supply in the United States and command a high price in the global market. In his remarks at the commissioning of WVU's Rare Earth Extraction Facility, President Gee pointed out that "research on rare-earth extraction is one way that our University is fulfilling its most important mission—which is the land grant mission—to advance the prosperity of the people of this state."

On November 9, 2017, West Virginia University and the State of West Virginia gained international attention as the China Energy Investment Corporation, Ltd., announced that it would invest \$83.7 billion in the state. The agreement arose from a long-standing research partnership between WVU and China's largest energy supplier, the Shenhua Group. Much of the funding would focus on the development of an Appalachia Storage and Trading Hub for liquid hydrocarbons derived from shale gas. This is a project on which WVU is working closely with the WV Department of Commerce. As Brian Anderson stated at the time, "This is a game changer for the State of West Virginia". President Gee noted that "This investment by China Energy is the culmination of years of relationship building, both by West Virginia University and the state. It is also an excellent example of the possibilities that we have been discussing within the West

Virginia Forward initiative with our partners at the state Department of Commerce and Marshall University.”

It should be pointed out, that much of this is also interwoven within the statewide West Virginia Forward effort that Marshall University, West Virginia University, and the Department of Commerce are engaged in to diversify and grow the economy of the State of West Virginia. Such diversification and growth is dependent on the continued development of a strong ecosystem for research and innovation to convert ideas and talent into products and jobs.

Business Plan

In addition to the legislatively mandated reporting requirements, the Higher Education Policy Commission requires a business plan for each research area. APPENDIX A reflects the anticipated use of the money available to spend in FY19.

In FY18, \$8,755,080 of Research Trust Fund dollars, both that from private accounts and matching state accounts, was spent on research – for scholarships, fellowships, prominent scholars, and in support of ongoing research initiatives.

For FY19, \$13,724,061 will be available. This number includes the proceeds from each private endowment and its equivalent state matching endowment plus any unspent money from the preceding year. Of this amount, \$4,250,034 will come from interest earned on both the private endowments and that from the matching state endowments established from the Research Trust Fund; \$9,474,027 will come from unspent funds from the previous year. The significant amount of interest dollars reflects the positive impact of the stock market and the fact that all endowments are fully funded. All funds for each endowment are distributed according to the intent of the respective endowment.

WVU looks forward to the significant and sustained impact that programs supported by the Research Trust Fund will have on addressing some of the state’s and the nation’s most important issues in education, energy, health care and security.

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Fund ID	Fund Description	Budget Division	Unit	Budget through FY18 Spend	Expenses through CLS-2018	Balance through FY18	FY19 Spend	Balance Forward
R085	Frederick P. Jr. & Joan C. Stamp Cancer Research	Cancer Center(CAN)	Cancer Center (CAN)	\$ 102,487.06	\$ 87,142.18	\$ 15,344.88	\$ 17,528.34	\$ 32,873.22
R095	Norma Mae Huggins Cancer Research Endowment	Cancer Center(CAN)	Cancer Center (CAN)	\$ 261,621.97	\$ 243,996.82	\$ 17,625.15	\$ 79,492.32	\$ 97,117.47
R100	Walter H. Moran Jr. General Surgery Resident Research	Medicine(MED)	Medicine (MED)	\$ 135,755.59	\$ 498.50	\$ 135,257.09	\$ 19,512.90	\$ 154,769.99
R103	Schoepp Neuroscience Research Student Support	Medicine(MED)	Medicine (MED)	\$ 30,800.15	\$ 19,310.73	\$ 11,489.42	\$ 6,247.01	\$ 17,736.43
R106	Verizon WV for Biometrics	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 164,544.23	\$ 166,490.79	\$ (1,946.56)	\$ 29,534.79	\$ 27,588.23
R107	Raymond Brooks Vanscoy Cancer Research Endowment	Cancer Center(CAN)	Cancer Center (CAN)	\$ 69,630.85	\$ 54,251.24	\$ 15,379.61	\$ 18,677.19	\$ 34,056.80
R108	Allen S. Pack Endowment for Mining Engineering	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 27,547.92	\$ -	\$ 27,547.92	\$ 5,945.27	\$ 33,493.19
R109	L. Zane Shuck Laboratory Endowment in Nanobiotechnology	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 62,582.26	\$ 38,688.81	\$ 23,893.45	\$ 11,774.61	\$ 35,668.06
R110	Alpha Natural Resources Endowment for Energy Research	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 134,400.07	\$ 52,479.27	\$ 81,920.80	\$ 35,011.11	\$ 116,931.91
R113	Alan Susman Cortico-Basal Ganglionic Degeneration Research	Medicine(MED)	Medicine (MED)	\$ 66,918.04	\$ -	\$ 66,918.04	\$ 12,257.91	\$ 79,175.95
R114	Blaine S. West Endowment for Civil and Environmental Engineering	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 75,253.62	\$ 48,313.36	\$ 26,940.26	\$ 12,343.36	\$ 39,283.62
R115	William J. Maier, Jr. Chair of Research	Health Sciences - Charleston Division(MCC)	Health Sciences - Charleston Division (MCC)	\$ 487,148.66	\$ 39,189.92	\$ 447,958.74	\$ 116,396.16	\$ 564,354.90
R116	Branson-Maddrell Endowed Professorship in Orthodontics	Dentistry(DEN)	Dentistry (DEN)	\$ 226,406.49	\$ 137,426.88	\$ 88,979.61	\$ 52,614.42	\$ 141,594.03

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Fund ID	Fund Description	Budget Division	Unit	Budget through FY18 Spend	Expenses through CLS-2018	Balance through FY18	FY19 Spend	Balance Forward
R117	George B. Bennett Dean's Research Opportunity Endowment	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 612,859.12	\$ 400,329.18	\$ 212,529.94	\$ 118,743.74	\$ 331,273.68
R118	E. Elizabeth Morgan Cancer Research	Cancer Center(CAN)	Cancer Center (CAN)	\$ 16,119.49	\$ 11,408.28	\$ 4,711.21	\$ 3,129.08	\$ 7,840.29
R119	Badzek Family Endowment for Nursing Research	Nursing(NSG)	Nursing (NSG)	\$ 13,202.70	\$ 10,000.00	\$ 3,202.70	\$ 2,998.27	\$ 6,200.97
R120	Ruth and Robert Kuhn Nursing Faculty Research	Nursing(NSG)	Nursing (NSG)	\$ 14,800.34	\$ 2,348.08	\$ 12,452.26	\$ 2,939.66	\$ 15,391.92
R121	Hall - de Graaf Endowment for Women in Science & Engineering	Arts & Sciences(A&S)	Arts & Sciences (A&S)	\$ 14,545.98	\$ 4,739.44	\$ 9,806.54	\$ 2,912.23	\$ 12,718.77
R122	Fithian Family Foundation #2/Behavioral Medicine- Psychiatry	Medicine(MED)	Medicine (MED)	\$ 50,479.75	\$ 49,256.60	\$ 1,223.15	\$ 11,636.76	\$ 12,859.91
R123	WVUH Evidence Based Practice Research Professorship/Nursing	Nursing(NSG)	Nursing (NSG)	\$ 188,629.61	\$ 36,533.17	\$ 152,096.44	\$ 40,985.52	\$ 193,081.96
R124	Grace C. Clements Speech Pathology and Audiology Research	Human Resources & Education(HRE)	Human Resources & Education (HRE)	\$ 25,498.06	\$ 16,437.85	\$ 9,060.21	\$ 5,538.51	\$ 14,598.72
R125	Virginia Oil and Gas Research Endowment for PNGE	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 31,235.81	\$ 20,416.81	\$ 10,819.00	\$ 6,904.59	\$ 17,723.59
R126	Michael Baker Corporation Endowment/CEE	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 35,698.01	\$ 19,267.78	\$ 16,430.23	\$ 8,797.11	\$ 25,227.34
R127	Darrell & Diane Williams Research for PNGE	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 26,213.63	\$ 14,513.11	\$ 11,700.52	\$ 5,732.41	\$ 17,432.93
R128	Preservati Cancer Research	Cancer Center(CAN)	Cancer Center (CAN)	\$ 73,277.60	\$ 47,632.37	\$ 25,645.23	\$ 17,080.54	\$ 42,725.77
R129	Martha Gaines & Russell Wehrle Pediatric Research Endowment	Qualifying - Biological, Biotech & Biomedical	Health Sciences - Charleston Division (MCC)	\$ 24,066.13	\$ 8,300.82	\$ 15,765.31	\$ 5,817.66	\$ 21,582.97

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Fund ID	Fund Description	Budget Division	Unit	Budget through FY18 Spend	Expenses through CLS-2018	Balance through FY18	FY19 Spend	Balance Forward
R130	E. Jane Martin Research Doctoral Fund	Nursing(NSG)	Nursing (NSG)	\$ 12,936.85	\$ 1,000.00	\$ 11,936.85	\$ 2,946.42	\$ 14,883.27
R131	John T. & June R. Chambers Chair of Oncology Research	Cancer Center(CAN)	Cancer Center (CAN)	\$ 347,866.13	\$ 242,498.45	\$ 105,367.68	\$ 85,803.93	\$ 191,171.61
R132	Christopher Cline Chair in Orthopedic Surgery	Medicine(MED)	Medicine (MED)	\$ 1,018,516.74	\$ 677,971.33	\$ 340,545.41	\$ 233,836.22	\$ 574,381.63
R133	Mabel C. Phares Leukemia Research Endowment	Cancer Center(CAN)	Cancer Center (CAN)	\$ 242,274.89	\$ 190,019.77	\$ 52,255.12	\$ 40,651.33	\$ 92,906.45
R134	Gary and Lisa Christopher Graduate Fellowship	Qualifying - Interdisciplinary	Engineering & Mineral Resources (EMR)	\$ 49,637.72	\$ 27,339.70	\$ 22,298.02	\$ 14,268.69	\$ 36,566.71
R135	WV United Health System Evidence-Based Nursing Practice Res.	Nursing(NSG)	Nursing (NSG)	\$ 19,888.84	\$ 15,102.16	\$ 4,786.68	\$ 4,908.00	\$ 9,694.68
R136	Mike Ross Family Pediatric Diabetes Research Endowment	Qualifying - Biological, Biotech & Biomedical	Medicine (MED)	\$ 197,963.69	\$ 10,434.24	\$ 187,529.45	\$ 47,145.86	\$ 234,675.31
R137	Van Wyk Cancer Research Endowment	Cancer Center(CAN)	Cancer Center (CAN)	\$ 11,389.18	\$ 8,234.21	\$ 3,154.97	\$ 2,914.76	\$ 6,069.73
R138	Robert T. Bruhn Physics Research Endowment	Arts & Sciences(A&S)	Arts & Sciences (A&S)	\$ 29,355.40	\$ -	\$ 29,355.40	\$ 6,093.51	\$ 35,448.91
R139	Women in Science and Engineering Giving Circle Endowment	Qualifying - Interdisciplinary	Arts & Sciences (A&S)	\$ 12,696.43	\$ 3,364.67	\$ 9,331.76	\$ 2,934.86	\$ 12,266.62
R140	Jarrett Family Research Endowment for Dentistry	Dentistry (DEN)	Dentistry (DEN)	\$ 50,893.01	\$ 16,042.29	\$ 34,850.72	\$ 11,628.97	\$ 46,479.69
R141	Donald R. & Linda E. Holcomb Research Endowment Dentistry	Qualifying - Biological, Biotech & Biomedical	Dentistry (DEN)	\$ 40,658.61	\$ -	\$ 40,658.61	\$ 11,458.77	\$ 52,117.38
R142	Arch Coal Inc. Endowment for Mine Health & Safety Research	Engineering & Mineral Resources (EMR)	Engineering & Mineral Resources (EMR)	\$ 118,912.07	\$ 37,553.35	\$ 81,358.72	\$ 31,003.45	\$ 112,362.17

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Fund ID	Fund Description	Budget Division	Unit	Budget through FY18 Spend	Expenses through CLS-2018	Balance through FY18	FY19 Spend	Balance Forward
R143	Shaw Pathology Research	Qualifying - Biological, Biotech & Biomedical	Medicine (MED)	\$ 26,310.31	\$ 2,430.00	\$ 23,880.31	\$ 5,901.62	\$ 29,781.93
R144	Dr. Mohindar S. Seehra Research Award	Arts & Sciences (A&S)	Arts & Sciences (A&S)	\$ 15,392.97	\$ 1,264.00	\$ 14,128.97	\$ 2,927.72	\$ 17,056.69
R145	Oleg D. & Valentina P. Jefimenko Library Resources #2	Library (LIB)	Library (LIB)	\$ 96,392.32	\$ 96,392.30	\$ 0.02	\$ 15,906.99	\$ 15,907.01
R146	Frank and Susan Klatskin Cerminara Endowment	Qualifying - Interdisciplinary	Engineering & Mineral Resources (EMR)	\$ 19,639.29	\$ 10,533.40	\$ 9,105.89	\$ 5,849.18	\$ 14,955.07
R147	Nesselroad Family Glaucoma Research	Qualifying - Biological, Biotech & Biomedical	Medicine (MED)	\$ 31,058.81	\$ 10,442.38	\$ 20,616.43	\$ 8,195.76	\$ 28,812.19
R148	Salvatore and Josephine Cilento Research Enhancement	Qualifying - Interdisciplinary	Engineering & Mineral Resources (EMR)	\$ 14,493.76	\$ 11,212.00	\$ 3,281.76	\$ 4,461.26	\$ 7,743.02
R149	Statler Research Endowment	Engineering & Mineral Resources (EMR)	Engineering & Mineral Resources (EMR)	\$ 4,128,043.61	\$ 1,164,519.79	\$ 2,963,523.82	\$ 1,153,700.17	\$ 4,117,223.99
R150	WVU School of Medicine Research Endowment	Qualifying - Biological, Biotech & Biomedical	Medicine (MED)	\$ 182,185.99	\$ -	\$ 182,185.99	\$ 43,167.98	\$ 225,353.97
V813	Quad/Graphics Chair in Internal Medicine, Eastern Division	Health Science East(HSE)	Health Science East (HSE)	\$ 575,411.21	\$ 130,630.77	\$ 444,780.44	\$ 115,566.29	\$ 560,346.73
V815	James H. Walker Chair of Pediatric Cardiology	Medicine(MED)	Medicine (MED)	\$ 237,492.99	\$ 172,606.72	\$ 64,886.27	\$ 39,414.36	\$ 104,300.63
V824	James A. Kent Endowment for Biomedical Engineering	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 105,247.07	\$ 95,328.94	\$ 9,918.13	\$ 20,634.35	\$ 30,552.48
V828	Osborn Professorship in Hematological Malignancies Research	Cancer Center(CAN)	Cancer Center (CAN)	\$ 413,482.62	\$ 322,432.03	\$ 91,050.59	\$ 74,708.84	\$ 165,759.43
V829	BrickStreet Neurology Fellowship	Medicine(MED)	Medicine (MED)	\$ 57,001.80	\$ -	\$ 57,001.80	\$ 11,703.83	\$ 68,705.63

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Fund ID	Fund Description	Budget Division	Unit	Budget through FY18 Spend	Expenses through CLS-2018	Balance through FY18	FY19 Spend	Balance Forward
V830	Robert E. Murray Chairmanship Mining Engineering Department	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 609,193.62	\$ 405,228.90	\$ 203,964.72	\$ 117,600.19	\$ 321,564.91
V833	Rita Radcliff-Deppe & Brian Deppe Fellowship Award	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 22,663.33	\$ 3,179.97	\$ 19,483.36	\$ 4,920.67	\$ 24,404.03
V835	Energy Materials Science & Engineering Facilities Support	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 760.00	\$ -	\$ 760.00	\$ -	\$ 760.00
V841	Oleg D. and Valentina P. Jefimenko Library Resources	Library(LIB)	Library (LIB)	\$ 116,044.44	\$ 116,044.43	\$ 0.01	\$ 23,464.03	\$ 23,464.04
V842	Oleg D. and Valentina P. Jefimenko Physics Fellowship	Arts & Sciences(A&S)	Arts & Sciences (A&S)	\$ 27,269.37	\$ 6,986.95	\$ 20,282.42	\$ 4,396.64	\$ 24,679.06
V844	Bowlby Wood Science Graduate Research Fellowship	Agriculture & Forestry(AGR)	Agriculture & Forestry (AGR)	\$ 253,574.79	\$ 200,082.18	\$ 53,492.61	\$ 62,243.42	\$ 115,736.03
V850	James P. Boland, M.D. Department of Surgery Endowed Research	Qualifying - Biological, Biotech & Biomedical	Health Sciences - Charleston Division (MCC)	\$ 150,695.71	\$ -	\$ 150,695.71	\$ 32,716.65	\$ 183,412.36
V854	WVU Ruby Scholars Graduate Research Fellowships	Academic Affairs(AAR)	Academic Affairs (AAR)	\$ 2,972,832.79	\$ 1,496,634.61	\$ 1,476,198.18	\$ 607,423.23	\$ 2,083,621.41
V858	Robert E. Pyle Chemical Engineering Graduate Fellowship	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 30,036.64	\$ 23,711.65	\$ 6,324.99	\$ 5,917.73	\$ 12,242.72
V859	James & Ruby Romano Civil & Environmental Engineering End.	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 210,028.15	\$ 155,867.19	\$ 54,160.96	\$ 41,251.48	\$ 95,412.44
V880	Robert & Stephany Ruffolo Pharmacy Graduate Fellowship	Pharmacy(PHR)	Pharmacy (PHR)	\$ 18,777.23	\$ 8,000.00	\$ 10,777.23	\$ 5,761.12	\$ 16,538.35
V882	James and Betty Hall Fellowship	Qualifying - Interdisciplinary	Engineering & Mineral Resources (EMR)	\$ 41,315.64	\$ 17,883.38	\$ 23,432.26	\$ 11,674.29	\$ 35,106.55
V886	Stuart M. & Joyce N. Robbins Distinguished Prof/Epidemiology	Qualifying - Biological, Biotech & Biomedical	Health Sciences Center (HSC)	\$ 436,328.64	\$ 149,278.14	\$ 287,050.50	\$ 115,619.13	\$ 402,669.63

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Fund ID	Fund Description	Budget Division	Unit	Budget through FY18 Spend	Expenses through CLS-2018	Balance through FY18	FY19 Spend	Balance Forward
V887	Academy of Chemical Engineers Graduate Fellowship	Engineering & Mineral Resources(EMR)	Engineering & Mineral Resources (EMR)	\$ 67,285.28	\$ 22,637.38	\$ 44,647.90	\$ 18,477.40	\$ 63,125.30
V892	J.F. Brick Chair in Neurology	Qualifying - Biological, Biotech & Biomedical	Medicine (MED)	\$ 763,396.44	\$ 557,826.36	\$ 205,570.08	\$ 174,436.10	\$ 380,006.18
V894	Jack and Marietta Mullenger Fellowship	Qualifying - Biological, Biotech & Biomedical	Engineering & Mineral Resources (EMR)	\$ 11,321.24	\$ 3,179.97	\$ 8,141.27	\$ 3,076.47	\$ 11,217.74
V900	Research Trust Fund Jefimenko Professorship in Physics	Qualifying - Interdisciplinary	Arts & Sciences (A&S)	\$ 120,725.89	\$ 91,591.30	\$ 29,134.59	\$ 35,632.10	\$ 64,766.69
W762	Cyber Physical System Center	WVU Institute of Technology	WVU Institute of Technology	\$ 19,999.78	\$ 22,174.32	\$ (2,174.54)	\$ -	\$ (2,174.54)
			Sub-Totals	\$ 16,899,114.43	\$ 8,056,631.22	\$ 8,842,483.21	\$ 3,912,895.24	\$ 12,755,378.45
Financial Aid Accounts								
Z232	Wells Fargo Energy Group Scholarship	Financial Aid(FAD)	Engineering & Mineral Resources (EMR)	\$ 50,299.85	\$ 14,500.00	\$ 35,799.85	\$ 10,487.38	\$ 46,287.23
Z238	Benjamin James Galford Research Scholarship	Financial Aid(FAD)	Arts & Sciences (A&S)	\$ 45,113.06	\$ 38,318.00	\$ 6,795.06	\$ 11,564.01	\$ 18,359.07
Z245	Carl Del Signore Foundation Graduate Fellowship	Financial Aid(FAD)	Academic Affairs (AAR)	\$ 27,643.29	\$ 12,500.00	\$ 15,143.29	\$ 5,794.52	\$ 20,937.81
Z247	George M. & Mary Freda Vance Medical Scholarship-Fellowship	Financial Aid(FAD)	Cancer Center (CAN)	\$ 262,751.81	\$ 228,450.61	\$ 34,301.20	\$ 44,111.30	\$ 78,412.50
Z277	William S. Clapper Mechanical & Aerospace Engineering Scholarship	Financial Aid(FAD)	Engineering & Mineral Resources (EMR)	\$ 31,014.98	\$ 28,738.00	\$ 2,276.98	\$ 5,942.84	\$ 8,219.82
Z279	Everette C. Dubbe Research Scholarship	Financial Aid(FAD)	Engineering & Mineral Resources (EMR)	\$ 54,606.12	\$ 44,800.00	\$ 9,806.12	\$ 11,676.38	\$ 21,482.50

WVU Research Trust Fund

Annual Report thru Fiscal Year 2018

Fund ID	Fund Description	Budget Division	Unit	Budget through FY18 Spend	Expenses through CLS-2018	Balance through FY18	FY19 Spend	Balance Forward
Z282	Oleg D. and Valentina P. Jefimenko Physics Scholarship	Qualifying - Interdisciplinary	Financial Aid (FAD)	\$ 19,537.21	\$ 17,000.00	\$ 2,537.21	\$ 3,282.10	\$ 5,819.31
Z326	James Bergen and Randy Monteith Anderson Scholarship in MAE	Financial Aid(FAD)	Engineering & Mineral Resources (EMR)	\$ 12,482.54	\$ 10,075.00	\$ 2,407.54	\$ 2,889.42	\$ 5,296.96
Z329	Morton Scholarship	Financial Aid(FAD)	Engineering & Mineral Resources (EMR)	\$ 52,899.54	\$ 39,500.00	\$ 13,399.54	\$ 13,210.29	\$ 26,609.83
Z333	David VanDorn Sutton Scholarship	Financial Aid(FAD)	Financial Aid (FAD)	\$ 196,894.56	\$ -	\$ 196,894.56	\$ 46,198.10	\$ 243,092.66
Z337	William "Bill" Closser Memorial Electrical Engineering Sch.	Qualifying - Interdisciplinary	Financial Aid (FAD)	\$ -	\$ -	\$ -	\$ -	\$ -
Z339	Morrissey-Ropp Scholarship	Financial Aid(FAD)	Arts & Sciences (A&S)	\$ 34,647.74	\$ 35,851.00	\$ (1,203.26)	\$ 8,569.51	\$ 7,366.25
Z341	Martha Hopkins Hashinger Scholarship	Financial Aid(FAD)	Engineering & Mineral Resources (EMR)	\$ 13,443.34	\$ 10,980.00	\$ 2,463.34	\$ 3,181.70	\$ 5,645.04
Z364	Research Trust Fund Taylor Endowment	Qualifying - Interdisciplinary	Engineering & Mineral Resources (EMR)	\$ 10,693.31	\$ 1,050.00	\$ 9,643.31	\$ 3,604.62	\$ 13,247.93
Z365	Mitchell-Morey Family Endowed Scholarship	Qualifying - Interdisciplinary	Financial Aid (FAD)	\$ 9,162.45	\$ -	\$ 9,162.45	\$ 3,373.49	\$ 12,535.94
Z368	Statler Research Scholars Program	Qualifying - Interdisciplinary	Financial Aid (FAD)	\$ 282,897.52	\$ 206,686.00	\$ 76,211.52	\$ 113,972.98	\$ 190,184.50
Z372	William E. & Bonniegail Kucan Coleman Research Scholarship	To Be Determined	Financial Aid (FAD)	\$ 6,193.27	\$ 10,000.00	\$ (3,806.73)	\$ 1,144.53	\$ (2,662.20)
Z375	Bettie D. Gallaher Research Fellowship	Qualifying - Interdisciplinary	Financial Aid (FAD)	\$ 219,712.02	\$ -	\$ 219,712.02	\$ 48,135.66	\$ 267,847.68
Sub-Totals				\$ 1,329,992.61	\$ 698,448.61	\$ 631,544.00	\$ 337,138.83	\$ 968,682.83

WVU Research Trust Fund

Annual Report thru Fiscal Year 2018

Fund ID	Fund Description	Budget Division	Unit	Budget through FY18 Spend	Expenses through CLS-2018	Balance through FY18	FY19 Spend	Balance Forward
Combined Totals				\$ 18,229,107.04	\$ 8,755,079.83	\$ 9,474,027.21	\$ 4,250,034.07	\$ 13,724,061.28

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Approval of Master of Science in Athletic Training

INSTITUTION: West Liberty University

RECOMMENDED RESOLUTION: *Resolved*, That the West Virginia Higher Education Policy Commission approves the Master of Science in Athletic Training at West Liberty University for implementation in fall 2020. This approval expires two years from the date of Commission approval if the program is not fully implemented.

STAFF MEMBER: Corley Dennison

BACKGROUND:

West Liberty University has offered an undergraduate degree in Athletic Training since 2012. The Commission on Accreditation of Athletic Training Education (CAATE) has issued a ruling requiring all existing accredited undergraduate programs to transition to the master's level. Therefore, it has become necessary for West Liberty University to transition the program to the graduate level. The proposed implementation date is August 2020. All students in the program are to be prepared to sit for the Board of Certification exam.

Admission requirements include the following:

- Undergraduate GPA of 3.0
- Documentation of 50 observation hours
- Submit an essay on choosing athletic training as a profession
- Three letters of recommendation
- Appropriate vaccines and background check
- First Aid and CPR/AED certification
- Complete a formal interview

The Master of Science in Athletic Training is a 43-credit-hour program designed to be completed in two years. Clinical experience is required and includes a full clinical immersion of eight weeks. Students must maintain a 3.2 GPA, complete all coursework with a grade of "B" or higher and must also remain current in all required first aid and CPR certifications. Students are expected to have completed an undergraduate degree in Exercise Physiology or in a science or health care related field.

All faculty members for the program are already in place and have or are working on the

appropriate terminal degrees. One position is currently vacant and is in the process of being refilled. Over the first five-years of the program, West Liberty University will need to add one or two full-time clinical athletic trainers and one adjunct faculty member for added clinical oversight for both the undergraduate Exercise Physiology (pre-AT) program and this program.

This program is fully in-line with the mission of West Liberty University. The University already has facilities, equipment, and library materials in place from the existing undergraduate program. Financial tables are printed below:

OPERATING RESOURCE REQUIREMENTS

A. FTE Positions	First Year	Second Year	Third Year	Fourth Year	Fifth Year
1. Administrators	0	0	0	0	0
2. Full-time Faculty #	0	0	0	0	0
3. Adjunct Faculty	0	0	1	1	1
4. Graduate Assistants	0	0	0	0	0
5. Other Personnel	0	0	0	0	0
a. Clerical workers	0	0	0	0	0
b. Professionals	0	0	0	0	0

Current WLU Faculty Members will be moving from undergraduate to graduate instructors. Possible adjuncts will be needed to teach the Pre-AT major classes in the Exercise Physiology program. This would be paid at the standard undergraduate rate of \$750 per credit hour.

B. Operating Costs	First Year	Second Year	Third Year	Fourth Year	Fifth Year
1. Personal Services	0	0	0	0	0
a. Administrators	0	0	0	0	0
b. Full-time Faculty #	0	0	0	0	0
c. Adjunct Faculty (Possibly)	0	0	\$4,500	\$4,500	\$4,500
d. Graduate Assistants	0	0	0	0	0
e. Non-Academic Personnel					
Clerical Workers	0	0	0	0	0
Professionals	0	0	0	0	0
Total Labor	0	0	\$4,500	\$4,500	\$4,500
2. CAATE Fees	\$3,000 to \$6,000 (Substantive Change)	\$3,850	\$3,850	\$3,850	\$3,850
3. Maintenance	0	0	0	0	0
4. Equipment					
a. Educational Equipment	\$2,000	\$1,500	\$1,500	\$1,500	\$1,500
b. Research Equipment	\$1,000	\$1,500	\$1,500	\$1,500	\$1,500
5. Clinical	0	\$1,000	\$3,000	\$5,000	\$1,000
6. Faculty Travel	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000
Total Expense	\$11,000	\$9,850	\$11,850	\$13,850	\$9,850

C. Sources	First Year 2020	Second Year 2020/21	Third Year 2021/22	Fourth Year 2022/23	Fifth Year 2023/24
1. General Fund Appropriations	0	0	0	0	0
2. Federal Government	0	0	0	0	0
3. Private and Other	0	0	0	0	0
4. Tuition	\$137,500	\$141,625	\$159,135	\$246,306	\$255,755
Total All Sources	\$137,500	\$141,625	\$159,135	\$246,306	\$255,755

The following is recommended:

- The Master of Science in Athletic Training program be approved for implementation in fall 2020.
- If the program is not fully implemented by November 2020, the program will no longer be considered approved by the West Virginia Higher Education Policy Commission and must be resubmitted for review and approval.
- In the 2023-24 academic year, the Commission will conduct a post-audit review of the program to assess progress toward successful implementation.

Note, the U.S. Department of Education has placed the State of West Virginia on Heightened Cash Monitoring and on Program Participation Agreement (Provisional Approval) or PPA. West Liberty University may not add any new degree programs without specific approval from the U.S. Department of Education.

West Liberty University
October 17, 2018
Submission of New Program
Master of Science in Athletic Training
West Liberty University, West Liberty, WV 26074



West Liberty University seeks approval for the Master of Science Degree in Athletic Training (MSAT). The MSAT enables students to pursue a degree in the growing field of Athletic Training and gain the knowledge, skills, and abilities to serve as an allied healthcare provider to various patient populations and settings. Courses will include prevention, assessment, management, and rehabilitation of injuries and conditions sustained within various populations. Evidence-based practice, research projects, patient-case scenarios with clinical application will culminate into a full clinical immersion experience in the field of athletic training. The proposed implementation date is August 2020.

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6.2. Program Description

The Master of Science in Athletic Training (MSAT) degree program is designed for students who are interested in careers in Athletic Training or related fields in which this certification and title are applicable. Upon graduation students will be well versed in the field of Athletic Training, have a working knowledge and skill set based on the competencies set forth by the Commission on Accreditation of Athletic Training Education (CAATE), and be prepared to sit for the National Board of Certification (BOC) exam. The WLU MSAT Program will provide an intense and progressive curriculum guided by the competencies set forth by the CAATE. (See **EXHIBIT I** for Competencies).

6.2.a. Program Objectives: Master of Science in Athletic Training

Mission: To provide the Master of Science in Athletic Training degree student the opportunity for a high-quality graduate education in the field of Athletic Training.

Program Goals:

1. To prepare graduates with a full understanding and appreciation for the field of athletic training and equip them with the necessary skills to succeed in the profession.
2. To provide students with a solid foundation in research methods and strategies in education and the profession to assist the advancement of Athletic Training.
3. To produce graduates who can demonstrate the ability to educate the community in a variety of healthcare settings and work collaboratively with other healthcare professionals while successfully delivering quality services to patients of various populations.
4. To produce graduates who have the ability to develop a body of knowledge and seek additional information independently and efficiently in all domains of athletic training as determined by CAATE and the BOC.

Student Learning Outcomes:

Upon completion of the MSAT program, the graduate will be able to:

1. utilize effective communication skills in various athletic training and health care settings;
2. demonstrate Evidence-Based Practice in a variety of applied settings;
3. apply ethical decision-making regarding patient care and the daily management of various athletic training and healthcare settings;
4. evaluate the importance of patient-centered values and care among patient populations;
5. advocate for the profession of athletic training in various settings and display leadership, work ethic, and mentorship qualities as a healthcare provider; and
6. demonstrate mastery of all knowledge, skills, and abilities outlined by the current CAATE standards.

6.2.b. Program Identification

CIP Code 51.0913

A program that prepares individuals to work in consultation with and under the supervision of physicians to prevent and treat sports injuries and associated conditions. Includes instruction in the identification, evaluation, and treatment of athletic injuries and illnesses; first aid and emergency care; therapeutic exercise; anatomy and physiology; exercise physiology; kinesiology and biomechanics; nutrition; sports psychology; personal and community health; knowledge of various

sports and their biomechanical and physiological demands; and applicable professional standards and regulations.

<https://nces.ed.gov/ipeds/cipcode/cipdetail.aspx?v=55&cip=51.0913>

6.2.c. Program Features

The core faculty for the WLU athletic training program are in place, with one recently-vacated position in the process of being refilled. All program faculty currently have, or are working toward, appropriate doctoral degrees, and all have multiple years of teaching experience in higher education. Those currently in place have professional experience in various settings, including high school through professional sports, clinical settings, Athletic Training program education at multiple NCAA levels, military facilities, and hospitals.

Other features of the program will include:

- small student-to-faculty ratio;
- small school atmosphere with sports medicine clinical sites comparable to some Division I programs;
- 17 varsity sports on campus, providing practical exposure;
- clinical education sites at local hospitals, high schools, colleges and rehab clinics, and possibly with professional sports teams;
- surgical observation opportunities;
- direct contact and observation experiences with the Medical Director and Team Physician;
- multidisciplinary exposure to several health care professional programs; and
- Problem-Based Learning Integration.
 - One of the key points of the curriculum is a Problem-Based Learning format at the nucleus of the content, as it drives learning and the “patient-care.” For example, the case scenarios built for the PBL format classes will be complemented by the other didactic classes during that semester. The competencies become “real world” scenarios with a fictitious patient, and the classes align with the others taken in that semester.
 - The overall goal is for the students to obtain a well-rounded and comprehensive education that focuses on patient-centered healthcare and provides them with the necessary skills, knowledge, and confidence to begin a career in Athletic Training. In addition, the students will gain the awareness of treating the whole patient and understanding the value of that approach as well as the importance of continued research and education on patient care using a comprehensive Evidence-Based approach.

6.2.c.1. Admissions and Performance Standards

Catalog Description:

The Master of Science in Athletic Training at West Liberty University strives to generate a quality graduate equipped with the knowledge and expertise as set forth by the Commission on Accreditation of Athletic Training Education (CAATE), who displays the professionalism and values expected by the National Athletic Trainers’ Association (NATA) and its Code of Ethics as

a healthcare professional in today's workforce. Students will be challenged to understand and apply competencies and skills related to the field of athletic training while exploring and broadening skills in research that reflect evidence-based practice. Students will perform research, become aware of their own strengths and weaknesses, and develop a solid foundation in factual and conceptual mastery in the study of athletic training. They will also be encouraged to participate in, and learn to appreciate, the application of scientific research to real-world problems and/or provide service for the benefit of the community with consideration of relevant moral and ethical issues. The program aims to develop well-rounded individuals who have an appreciation for all patients and health care practitioners in a variety of settings.

General Admission Requirements:

Required general application materials must be submitted by January 1. Early acceptance students will be required to apply by September 1 of their senior year of college.

Applicants will be required to:

- submit official transcripts showing a minimum GPA of 3.0 and successful completion of an appropriate degree including the courses listed below;
- complete the online application form;
- Provide documentation of a minimum of 50 observation hours collected from at least 2 different AT settings;
- submit an essay describing why they are choosing AT as a profession and discussing their knowledge of Athletic Trainers in the workforce;
- submit 3 letters of recommendation (2 from individuals other than WLU employees if a WLU graduate);
- provide evidence of vaccines listed on the WLU student health form;
- submit to a Certified Background Check, which yields acceptable results;
- provide documentation of a 10-panel drug screen with acceptable results;
- provide evidence of First Aid and CPR/AED for the Healthcare Provider or equivalent certification; and
- successfully complete a formal interview.

Internal and External Requirements:

West Liberty University Graduates (Internal):

- B.S. in Exercise Physiology Pre-AT Track (Refer to University Catalog-Exercise Physiology Tracks), or
- B.S. in similar science or healthcare related field, including courses in the following pre-requisite concentration areas:
 - Biology
 - Chemistry
 - Physics
 - Psychology
 - Anatomy and Physiology

Graduates of other institutions (External):

- B.S. or B.A. in a science or healthcare related field similar to Exercise Physiology, including the following courses:
 - Human Anatomy & Physiology I and II
 - Exercise Physiology or Exercise Science
 - Kinesiology or Biomechanics
 - Nutrition
 - General Psychology
 - Personal Health/Wellness
 - Statistics
 - Medical Terminology

The previous information will be also be outlined/available in the university catalog, Athletic Training web-page and in the student handbook, which will also be available on the Athletic Training web-page.

6.2.c.2. Program Requirements:

The Master of Science in Athletic Training Program will be a rigorous 43-hour program spanning two full academic years. Clinical experience will be gained during the practicum classes, which include a full clinical immersion of at least eight weeks. The curriculum is designed to address the goals and objectives described in section 6.2.a. and to comply with accreditation requirements set forth by the CAATE. (**Exhibit H**). Students must maintain a 3.2 GPA or higher overall to remain in the program and complete all course work with a “B” or higher. In addition, First Aid and CPR/AED for the Healthcare Provider equivalent certification must be current at all times and students must satisfy all clinical requirements and be in good standing with the assigned clinical sites.

Master of Science in Athletic Training

Core Curriculum.....43 credit hours

Fall Year 1

AT 510	Athletic Training Simulation Practicum I	3 credit hours
AT 513	Advanced Concepts in Rehabilitation	3 credit hours
AT 514	Organization & Administration in AT	3 credit hours
AT 515	Concepts in Therapeutic Modalities	3 credit hours

Spring Year 1

AT 520	Supplemental Clinical Practicum II	2 credit hours
AT 521	Advanced Orthopedic Assessment I	3 credit hours
AT 522	Problem Based Learning in AT I	3 credit hours
AT 523	Theory and Practice in Rehabilitation I	2 credit hours
AT 524	Best Practices in AT	2 credit hours

Fall Year 2

AT 530	Professional AT Clinical Practicum III	2 credit hours
AT 531	Advanced Orthopedic Assessment II	3 credit hours

AT 532	Problem Based Learning in AT II	3 credit hours
AT 533	Theory and Practice in Rehabilitation II	2 credit hours

Spring Year 2

AT 540	Professional Clinical Immersion	3 credit hours
AT 544	Research Capstone	2 credit hours
AT 545	General Medical Conditions in AT	2 credit hours
AT 547	Movement Restoration	2 credit hours

Course Descriptions and Timeline:

Course descriptions are listed below. It will be possible to complete the MSAT program in four academic terms, consisting of two full academic years following successful completion of a bachelor's degree. Clinical work outside the academic year will be encouraged but not mandatory.

Fall Year 1

AT 510 Athletic Training Simulation Practicum I3 credit hours

This course involves the students' clinical education. The students apply didactic education skills with clinical preceptors during a preseason rotation. Students are required to work the schedules assigned at the sites. SIMULATION CASES

AT 513 Advanced Concepts in Rehabilitation.....3 credit hours

This course is designed to educate the students in the rehabilitative aspects of patient care. It concentrates on rehab theory and protocols current in the literature and challenges students to research current trends regarding patient rehabilitation. Therapeutic exercise, strength training, range of motion exercises, aquatic therapy and other rehab techniques. This course provides the foundational concepts and allows students to explore current trends in research and literature based on pathology. It emphasizes the entire patient-care and evidence-based approach forcing students to remain current with the literature and rehab concepts.

AT 514 Organization & Administration in AT.....3 credit hours

A basis for the foundation and introduction to the business side of the profession. This course explores topics including athletic training room facility design, medical record keeping procedures, personnel and program management, budget planning, drug testing, and legal aspects and other various topics dealing with professional issues. In addition, students research the professionalism and current issues within Athletic Training at city, state, district and national levels.

AT 515 Concepts in Therapeutic Modalities3 credit hours

This course is designed to provide theory and application to the use of therapeutic modalities and their application as a result of various musculoskeletal and pathological conditions. Students learn the injury response cycle and healing process and how to incorporate modalities to these processes. This course also discusses the physiology behind therapeutic effects and body tissue responses. The students will become proficient in application, electrode placement, patient set-up and

machine parameters in most forms of modalities currently utilized in the profession. Students are challenged to compare and contrast current literature and its application to patient care.

Spring Year 1

AT 520 Supplemental Clinical Practicum II.....2 credit hours

This course involves the students' clinical education. The student applies didactic education skills with clinical preceptors during a continuation of a preseason rotation. Students are required to work the schedules assigned at the sites. DIETICIAN, GEN MED, URGENT CARE ETC.

AT 521 Advanced Orthopedic Assessment I.....3 credit hours

This course concentrates on the evaluation techniques and special tests needed for the proper diagnosis of orthopedic injuries. The course introduces on multiple levels the importance of the evaluation process and focuses on the examination techniques of the different body systems to help the students draw conclusions and make a clinical diagnosis based on findings. It challenges the students to look at the current evidence regarding special orthopedic tests and explore statistical analysis related to them. By doing so, the students can utilize current research and apply that to the special tests learned and develop their own skill set of examination techniques. This course will require evidence-based journal articles to help assist the students in the clinical decision-making process regarding examination and evaluation of Orthopedic Injuries. The course focuses on foundational assessment skills and theories and exploring lower extremity and lumbar and sacral examination techniques.

AT 522 Problem-Based Learning Concepts in Athletic Training I.....3 credit hours

This course challenges the students to become critical thinkers and problem solvers. Using a case-based scenario, students are in small groups and identify, research and discuss relevant topics related to a specific case or topic. The students take learning into their own hands, as the instructor serves as a facilitator in discussion. A very challenging learning style and much different from the traditional styles of learning, this course aims to review all topics that students have learned over the previous semesters and to enable problem solving and apply knowledge. Research articles are expected to be generated for the sake of discussion as students are forced to apply learning skills they have with a real scenario. This challenges the students to manage a patient on their own, creating some independence while still having instructor intervention. It implies total patient care and putting the entire process together. Cases align with the orthopedic and rehabilitation classes so students are focusing on patient care with classes complementing the subject content.

AT 523 Theory and Practice in Rehabilitation I.....2 credit hours

This course is designed to build and apply on the ideas and knowledge learned in 513. The student will apply the knowledge to patient scenarios and design rehabilitation plans for many scenarios. This will complement the orthopedic class so students will integrate knowledge from the two classes and further understand the rehabilitative aspects of patient care. Therapeutic exercise, strength training, range of motion exercises, aquatic therapy and other rehab techniques are examined in this class.

AT 524 Best Practices in AT.....2 credit hours

This course discusses contemporary issues in Athletic Training including current research and implications and technological advances. Evidence-Based Medicine and research, research design is introduced and emphasized in this class. Research on relevant and timely topics to entertain current issues and topics in Athletic Training are a requirement. Exploration and utilization of research databases locally and nationally is encouraged.

Fall Year 2

AT 530 Professional Clinical Practicum III.....2 credit hours

This course involves the students' clinical education. The student applies didactic education skills with clinical preceptors during a continuation of a preseason rotation. Students are required to work the schedules assigned at the sites. It will be focused more on disease, nutrition, and general medical areas per the CAATE standards.

AT 531 Advanced Orthopedic Assessment II.....3 credit hours

This course concentrates on the evaluation techniques and special tests needed for the proper diagnosis of orthopedic injuries. The course introduces on multiple levels the importance of the evaluation process and focuses on the examination techniques of the different body systems to help the students draw conclusions and make a clinical diagnosis based on findings. It challenges the students to look at the current evidence regarding special orthopedic tests and explore statistical analysis related to them. By doing so, the students can utilize current research and apply that to the special tests learned and develop their own skill set of examination techniques. This course will require evidence-based journal articles to help assists the students in the clinical decision-making process regarding examination and evaluation of Orthopedic Injuries. The course focuses on foundational assessment skills and theories and exploring upper extremity and thoracic and cervical spine examination techniques.

AT 532 Problem-Based Learning Concepts in Athletic Training II.....3 credit hours

This course challenges the students to become critical thinkers and problem solvers. Using a case-based scenario, students are in small groups and identify, research and discuss relevant topics related to a specific case or topic. The students take learning into their own hands, as the instructor serves as a facilitator in discussion. A very challenging learning style and much different from the traditional styles of learning, this course aims to review all topics that students have learned over the previous semesters and to enable problem solving and apply knowledge. Research articles are expected to be generated for the sake of discussion as students are forced to apply learning skills they have with a real scenario. This challenges the students to manage a patient on their own, creating some independence while still having instructor intervention. It implies total patient care and putting the entire process together. Cases align with the orthopedic and rehabilitation classes, so students are focusing on patient care with classes complementing the subject content.

AT 533 Theory and Practice in Rehabilitation II.....2 credit hours

A continuation of 523 the previous semester this course continues the trends the student is learning regarding application of the knowledge to patient scenarios and the designing of rehabilitation plans for many scenarios. This too will complement the concurrent orthopedic class so students

will integrated knowledge from the two classes and further understand the rehabilitative aspects of patient care and the subject matter of that particular time in the course. Therapeutic exercise, strength training, range of motion exercises, aquatic therapy and other rehab techniques are examined in this class.

Spring Year 2

AT 540 Professional Clinical Immersion.....3 credit hours

This course is a full clinical immersion of either two four-week sessions or one eight-week session depending on the assigned clinical site. Students will be expected to work the assigned hours given by the preceptors at the site. There is no didactic coursework during the clinical immersion session(s).

AT 544 Research Capstone.....2 credit hours

This course culminates the research thesis project of the students' graduate coursework as well as discusses and reviews organizational and administrative aspects in athletic training. Students will be challenged to attend professional development and research the current issues, reporting on trends and the direction of the Athletic Training profession. They are expected to build on the learning from 514 and 524 and integrate all concepts on the organizational aspect of the profession.

AT 545 General Medical Conditions Athletic Training.....2 credit hours

This course is designed for the students to acknowledge other medical/patient issues, conditions, and pathologies different from the traditional issues Athletic Trainers deal with daily. It discusses and enables the students to research pathologies utilizing the body systems as a guide and to bring awareness of the many types of pathologies patients can acquire. In addition, this course discusses the effects of that pathology on patient care and how to modify treatments and acute care injuries. The course enables the students to research beyond the problem itself and how secondary issues can result during the emergency care of an athlete or patient. This course also reviews and discusses Emergency Skills and Acute Injury management of the injured patient.

AT 547 Movement Restoration.....2 credit hours

This course will allow students to apply all concepts learned from previous coursework dealing with patient assessment, rehabilitation, recognition, and correction of movement deficiencies. It will challenge the student to examine the patient as a whole and focus on the application of the "whole body" approach to rehab and concentrating on the developmental sequence as the foundational building block. It is a very dynamic course with the intent of providing the student with an approach to rehab focusing around proper movement patterns.

6.2.d. Program Outcomes:

Indicate the expected results of the program and, if this is a proposal for an expanded or modified program, specify how the proposed change may achieve results different from those produced by the current program.

The WLU MSAT program provides a well-rounded and comprehensive education that focuses on patient-centered healthcare and provides the necessary skills, knowledge, and confidence to begin a career in Athletic Training.

- Graduates will be prepared to integrate best practices in the field of athletic training.
- Graduates will be able to promote healthy lifestyle behaviors and effectively communicate wellness strategies to the appropriate patient population.
- Graduates will be able to properly evaluate a patient by implementing a systematic evidence-based approach to formulate a clinical diagnoses and a relevant plan of care across patient populations.
- Graduates will be able to apply immediate care procedures when applicable in various emergency situations.
- Graduates will be educated in professional responsibility and the importance of ethical practice and be able to implement culturally appropriate healthcare practices.

6.2.e. Program Content

The proposed educational programs shall be compatible with the institutional mission. The relationship shall be described in documents provided to the Commission.

The intended outcome previously listed under 6.2.d. supports the mission of the University: “To provide our students the opportunity for a high quality undergraduate, graduate, and professional education through appropriate formats and venues.” Additionally, this program will support several of the following institutional vision statements:

- Providing extensive opportunity and a positive environment for a high quality undergraduate, graduate, and professional education.
- Providing its students the academic offerings necessary to meet the professional and career needs of an evolving, contemporary society.
- Reflect the highest standards of compassionate, legal, ethical, and moral conduct regarding patient healthcare.
- Be team-oriented, culturally sensitive providers who are dedicated to their communities.
- Be critical-thinking and effective communicators with both patients and healthcare professionals.
- Identify the lack of medical care in rural and underserved regions and consider practicing their discipline or providing service in such locations.
- Have an appreciation of the greater field of knowledge beyond their discipline and recognize the importance of lifelong learning in maintaining a level of excellence in their practice.

6.2. e.1. Content and Length

The curriculum consists of 43 credit hours and is designed for completion over two full academic years. During the terms students will be challenged to provide research topics as well as begin a PBL model of learning where the content from all courses will complement that being covered in the two “Problem-Based Learning” classes. This design of fictitious patient case scenarios will allow students to explore all the competencies set forth by the CAATE in a dynamic “patient-care” format. The final semester for course work will involve a full clinical immersion as well as preparation for the BOC exam. (Refer to **TABLE 6.2.e.1.A** for curricular design.)

TABLE 6.2.e.1.A

MSAT Courses	Credit Hours	Semester
AT 510 Athletic Training Simulation Practicum I	3	Fall Year I
AT 513 Advanced Concepts in Rehabilitation	3	Fall Year I
AT 514 Organization & Administration in AT	3	Fall Year I
AT 515 Concepts in Therapeutic Modalities	3	Fall Year I
AT 520 Supplemental Clinical Practicum II	2	Spring Year 1
AT 521 Advanced Orthopedic Assessment I	3	Spring Year 1
AT 522 Problem-Based Learning Concepts in Athletic Training I	3	Spring Year 1
AT 523 Theory and Practice in Rehabilitation I	2	Spring Year 1
AT 524 Best Practices in AT	2	Spring Year 1
AT 530 Professional Clinical Practicum III	2	Fall Year 2
AT 531 Advanced Orthopedic Assessment II	3	Fall Year 2
AT 532 Problem-Based Learning Concepts in Athletic Training II	3	Fall Year 2
AT 533 Theory and Practice in Rehabilitation II	2	Fall Year 2
AT 540 Professional Clinical Immersion	3	Spring Year 2
AT 544 Research Capstone	2	Spring Year 2

AT 545 General Medical Conditions Athletic Training	2	Spring Year 2
AT 547 Movement Restoration	2	Spring Year 2

6.2.e.2. General Education Component:

All proposed undergraduate degree programs shall include a coherent general education component that is consistent with the institution's mission and appropriate to its educational programs. The undergraduate general education component shall be documented.

Not Applicable

6.2.e.3. Minimum Requirement for General Education:

The minimum requirement for general education for all undergraduate programs delivered through the traditional distributed curricula is 15 semester credits for technical associate's degrees, 24 for transfer associate's degrees, and 30 for bachelor's degrees. If the general education component is delivered through integrated, embedded, interdisciplinary, or other accepted models, institutions must demonstrate that the program meets minimum requirements equivalent to the distributed model.

Not Applicable

6.3. Program Need and Justification

The need for the program arises from the CAATE decision requiring all existing undergraduate programs to transition to the master's level if they are to continue in higher education as a program.

The justification for the program is the following: There will always be a need for the profession of Athletic Training and employees in the workforce. The Bureau of Labor Statistics reveals growth of the profession will be around 22% from 2016-2026. Given continued participation in physical activities by persons of all ages, this type of healthcare professional will continue to be needed to prevent, rehabilitate, and treat pathological and physiological conditions. The national accreditation body has mandated that Baccalaureate AT programs transition to the master's level within the next several years.

Resource: Bureau of Labor Statistics, U.S. Department of Labor, Occupational Outlook Handbook, 2016-17 Edition, Athletic Trainers, on the Internet at <https://www.bls.gov/ooh/healthcare/athletic-trainers.htm> (visited December 5, 2017).

6.3.a. Relationship to Institutional Goals/Objectives

Relate this program to the institution's goals and objectives and the statewide master plan.

The Master of Science in Athletic Training will support several strategic goals of the University to include the following:

- Expand curricular opportunities to include high demand fields, the global economy, and professional development.
- Foster a robust environment that stimulates scholars and students toward creativity, research and innovation.
- Engage increasing numbers of students in higher education through expanding access and promoting opportunities available to traditional and nontraditional students and to adults.

The Master of Science in Athletic Training Degree Program relates well to the goals and objectives of West Liberty University and to the statewide master plan. The goals listed in the “Institutional Master Plan for West Liberty University 2013-18” under Academic Plan Outline: 1. Economic Growth include three which are particularly well aligned with this program and correspond to the statewide master plan. These goals state that West Liberty University will produce:

<http://www.wvhepc.edu/master-plan-leading-the-way/>

Access

- *Goal for 2018: Increase access to postsecondary education for both traditional and non-traditional aged West Virginians.*

We are increasing access for traditional and non-traditional West Virginia students to pursue a graduate degree at a public institution in the state.

Athletic Training is a knowledge-intensive profession wherein evidence-based, current, and accurate information and diagnoses must be disseminated to an injured patient, the physician, other healthcare providers and the coach to determine the correct time for the athlete to begin practicing and competing in various activities. They also utilize their knowledge of anatomy, pathology and biomechanics to create athletic injury prevention and treatment programs. Athletic trainers have an important role in the diagnosis, assessment, management, treatment and rehabilitation of injuries and illnesses. They are recognized by the American Medical Association (www.ama-assn.org - Education & Careers) as allied healthcare professionals. Under the supervision of an approved Health Care Provider as recommended by the BOC, an athletic trainer provides emergency and follow-up care to athletes and other clients.

Success

- *Goal for 2018: Increase the number of students at system institutions completing quality academic programs.*

The program will increase the number of students at a system institution by adding a graduate opportunity.

The program will also increase the retention opportunity for WLU students as well as encourage graduates from other institutions of higher education to enroll and successfully complete a Master's degree.

Impact

- *Goal for 2018: Increase the impact public colleges and universities have on West Virginia through production of graduates ready to contribute to the workforce and the community,*

provision of needed services, and research and development activities that advance the state's economy.

The program will help serve the needs of student athletes and other patient populations in the state of West Virginia. Currently there are 141 High Schools in WV and over 50% do not have access to an athletic trainer. There are only 14 full-time athletic trainers employed in West Virginia secondary schools. This graduate program will help produce qualified athletic training professionals that can fill this workforce gap and provide needed health care access to the many student-athletes and other patient populations within the state.

West Virginia Athletic Training Location and Services (ATLAS):

<https://www.zeemaps.com/view?group=1720250&x=-83.522790&y=40.276319&z=12>

6.3.b. Existing Programs

List similar programs (and their locations) offered by other institutions (public or private) in West Virginia State why additional programs or locations are desirable.

At the time of submission, the only other public institution in the state offering a Master's in Athletic Training is Marshall University. West Liberty University would be the only four-year public university in this area to offer this degree. This will give students in the northern part of the state and tri-state area a viable option for pursuing the MSAT.

West Virginia University, and Concord University have also begun plans to transition their undergraduate programs to the Master's Degree level.

In the 2015 report (most recent data) there were 375 accredited programs (335 bachelor's and only 39 master's level programs, with one degree change program pending) in the U.S.

See EXHIBIT A *CAATE Demographics* from the CAATE 2015-2016 Analytical Report (Pages 8-9 for the most recent recorded trends)

6.3.c. Program Planning and Development

Indicate the history to date of the development and submission of this program proposal.

What resources (e.g., personnel, financial, equipment) have already been invested in this program? What planning activities have supported this proposal?

This Program has evolved from the Bachelor of Science Degree in Athletic Training with its history and inception below: (At this time, there would not be a need for any additional personnel, equipment, facilities, etc.)

The major elements of the current accredited undergraduate program, including the curriculum and individual courses, were approved by the Department of Health & Human Performance, the Curriculum Committee (meeting Oct 11, 2011), the Faculty Senate of West Liberty University (meeting Oct 18, 2011), and the West Liberty University Board of Governors for submission to the West Virginia HEPC on December 7, 2011. The Program was approved and began in Fall 2012. It gained CAATE accreditation in 2015 with zero citations. Shortly thereafter, the CAATE announced the full decision to transition all willing programs to the Master's level, prompting this action taken by West Liberty University. It was proposed to Graduate Studies Council and approved. Approval of the Intent to Plan was documented in a letter from Chancellor Paul L. Hill,

Ph.D., on July 17, 2017. Since then the Dean of the College of Education, the Program Director of the undergraduate program as well as the University Director of Institutional Research and Director of Accreditation and Academic Planning have met and discussed timelines. See **EXHIBIT C**.

6.3.d. Clientele and Need:

Describe the clientele to be served and state which of their specific needs will be met by the program. Indicate any special characteristics, such as age, vocation, or academic background. Indicate manpower needs, interest on the part of industry, research and other institutions, governmental agencies, or other indicators justifying the need for the program. Data collected as recent as 2015 reveal that 31% of athletic trainers are employed as such. Athletic trainers can serve a wide variety of patient populations in all ages and settings. Patients can be cared for in several different settings including high schools and colleges as well as hospitals and clinics, industries, fine arts, and the military. By graduating qualified professionals, the general active population will be served. In addition, athletic trainers can find employment in physicians' offices, medical and pharmaceutical companies, surgical companies, higher education, and in research.

Currently Athletic Training programs across the country are deciding whether to pursue the Master's level or voluntarily give up program accreditation. (See **EXHIBIT A** for most recent recorded trends)

6.3.e. Employment Opportunities

Present a factual assessment of the employment opportunities that are likely to be available to program graduates. Include data and references supporting this assessment. Indicate the types and number of jobs for which such a curriculum is appropriate.

Nationally, the Bureau of Labor Statistics reports a total of 16,290 current employment opportunities. Locally, Ohio and Pennsylvania rank in the top five states for employment of athletic trainers (refer to Table 6.3.e.1). Together with West Virginia, these three states account for 1,970 employment opportunities. Current listings at indeed.com show approximately 210 Athletic Training jobs available in Ohio, Pennsylvania, and West Virginia.

Table 6.3.e.1 States with the highest employment level in this occupation updated 2016:

State	Employment (1)	Employment per thousand jobs	Location quotient (9)	Hourly mean wage	Annual mean wage (2)
<u>Texas</u>	2,820	0.24	1.40	(4)	\$53,620
<u>Pennsylvania</u>	1,480	0.26	1.50	(4)	\$44,900
<u>California</u>	1,450	0.09	0.53	(4)	\$49,020
<u>New York</u>	1,250	0.14	0.80	(4)	\$47,220
<u>Ohio</u>	1,190	0.22	1.30	(4)	\$46,460

[https://www.bls.gov/oes/current/oes299091.htm#\(4\)](https://www.bls.gov/oes/current/oes299091.htm#(4))

Significant job growth will be concentrated in the healthcare industry, including hospitals and health practitioners' offices. New jobs may also be provided by fitness and recreation sports centers. The salary of athletic trainers varies by their job responsibilities, job setting and experience. In 2016 the median annual salary for athletic trainers was \$45,630. (www.bls.gov)

In cooperation with physicians and other allied health personnel, the athletic trainer, as described by CAATE, can function as an integral member of the athletic health-care team in secondary schools, colleges and universities, sports medicine clinics, professional sports programs as well as various other settings related and not related to health-care settings:

- High Schools-- athletic trainers work to prevent and treat athletic injuries, which may happen during practice or competition. Athletic trainers may also teach at the high school during the day.
- Sports medicine clinic - athletic trainers work with patient treatment and rehabilitation, provide athletic training coverage for a high schools or colleges and conduct coaches' workshops and other sports medicine educational programs for care and prevention.
- Colleges and Universities - athletic trainers support practice sessions and competitions as well as the educational experiences of athletic training students. They may teach in athletic training program curriculum as well as perform research.
- Professional level - athletic trainers work year-round with professional athletic teams at all levels.
- Other Healthcare Options - athletic trainers provide service to company employees. Employment can also be found in the armed forces, with dance companies, in sales, and in physicians' offices and general medical facilities.

6.3.f. Program Impact

Describe the impact of this program on other programs that it will support or that will be supported by it.

The addition of this program will have a positive impact on enrollment in the BS Exercise Physiology Program, which is also housed in the College of Education and Human Performance. There will be a Pre-MSAT major established in that program that is expected to attract students into Exercise Physiology and help prepare them for entrance into the professional MSAT Program. In addition, other science and healthcare related undergraduate programs may well gain additional students planning to enroll in this program. There are well-defined entrance requirements for the prospective MSAT student. In addition, athletic training students provide assistance to the athletic training staff, which positively impacts student athletes. Accreditation guidelines for the MSAT will prohibit athletic training students from working with staff athletic trainers until educated in appropriate skills and competencies. Thus, there will only be a single cohort of enrolled students annually permitted to work with the staff athletic trainers, as opposed to the current situation, in which sophomores, juniors and seniors from the current undergraduate major all serve in this capacity.

6.3.g. Cooperative Arrangements

Describe any cooperative arrangements (including clinical affiliations, internship opportunities, personnel exchanges, and equipment sharing) that have been explored.

The program requires students to complete clinical experiences in settings such as the WLU athletic training rooms, local sports medicine clinics, high schools, and possibly with professional sports teams, as well as in general medical facilities and stand-alone physical therapy clinics. At the time of submission, the undergraduate program has established seven external clinical sites, all of which are prepared to support the graduate program. Please see **EXHIBIT D** for letters of support from local external clinical sites.

6.3.h. Alternatives to Program Development

Not applicable

6.4. Program Implementation and Projected Resource Requirements

Program implementation will begin during the first fall following approval by all necessary entities. The curriculum is designed to be completed in 21 months, beginning during the fall term. Resource requirements will be met through redirection from the current undergraduate program.

6.4.a. Program Administration

Describe the administrative organization for the program and explain what changes, if any, will be required in the institutional administrative organization.

The Master of Science in Athletic Training Program will be housed within the College of Education and Human Performance. The following is the proposed administrative organization for the program based on the requirements of the CAATE and the autonomy of university structure: There is a Dean of the College of Education and Human Performance in which the program will be housed. The program will have a Program Director with teaching duties, a Clinical Education Coordinator with teaching duties, and one full-time faculty member with teaching duties.

6.4.b. Program Projections

Indicate the planned enrollment growth and development of the new program during the first five (5) years (FORM 1). Include a plan for sustainability of the program after the initial five (5) year startup.

Initial enrollment is expected to be 5-10 students. Early acceptance in October is planned. General acceptance for others will be in the spring semester. The possibility of increasing class sizes will be investigated after the graduation of the first few classes. The continued need for athletic trainers in healthcare in all settings will provide sustainability for the program, as the workforce will always need qualified employees in this profession.

6.4.c. Faculty Instructional Requirements

Indicate the number, probable rank, experience, and cost of faculty required over the five (5) year period.

The faculty member holding the title of Program Director of the MSAT program will be awarded a stipend consistent with other healthcare Master's level programs at WLU. The other program faculty members hold the Master of Science degree in Athletic Training or related field, and already hold, or soon will hold, an educational or clinical doctoral degree. Rank and salary are determined based on qualifications and experience. It is anticipated that the current athletic training faculty will deliver the graduate degree courses. If a faculty member's teaching loads

exceeds the expectation set by their Letter of Appointment, they will receive appropriate overload compensation. Faculty to student ratios required by the CAATE will be respected in the MSAT and the undergraduate Exercise Physiology Pre-AT major.

Over the first five-years of the program, it is anticipated that WLU will need to add one or two full-time clinical athletic trainers and at least one adjunct AT faculty member. This will be necessary to provide the teaching and clinical oversight necessary for undergraduates in the Exercise Physiology Pre-AT major as well as the MSAT program.

6.4.d. Library Resources and Instructional Materials

Evaluate the adequacy of existing library resources and instructional materials for the proposed program. Estimate the nature and probable cost of additional resources necessary to bring the proposed program to an accreditable level.

The CAATE requires a standard to be met regarding Library resources.

CAATE Standard 86: Library and other Information Sources: Students must have reasonable access to the information resources needed to adequately prepare them for professional practice. This includes current electronic or print editions of books, periodicals, and other reference materials and tools related to the program goals.

The Program has met this standard at the undergraduate level and the same standard is in place for the master's level Program.

The Library home page:

<http://www.westliberty.edu/residence-life/studenthandbook-library/>

From the home page there are a number of options in "dropdown" form from which to choose. They are: "About," "Research," "Services," "History and Treasures," and "Contact." All of these provide access to multiple options. There is also a "main box" that can be used to search everything held by the library, both electronic and paper.

Below is a link to all University Electronic Resources:

<http://www.westliberty.edu/library/desktop-resources/>

The library and all of its resources are available to students on and off campus with student logins. See **EXHIBIT E**

6.4.e. Support Service Requirements:

Indicate the nature of any additional support services (e.g., laboratories, computer facilities, equipment, etc.) likely to be required by the proposed program. Include the expected costs, and describe how such expansions will be incorporated into the institutional budget. Describe any student support services that will be put into place to enhance student retention and successful program completion for this new program.

Each student will be assigned an advisor who will mentor the graduate student throughout the program. All newly developed courses for the proposed MSAT will have a standard, web-based format using the institutional learning management platform, Sakai, to facilitate student learning and retention. Should the Program implement online courses, additional course reviews will ensure

that each course conforms to Quality Matters standards and the university's office of E-Learning will provide assistance to students as needed. In addition, the University offers access to a writing center, IT help desk, and the Learning and Student Development Center.

6.4.f. Facilities Requirements

Indicate whether the program will require the addition of new space or facilities or the remodeling or renovation of existing space. If so, provide a statement detailing such plans and space needs and their estimated funding requirements. Describe the impact of this new program on space utilization requirements.

No additional or new space/facilities will be required. The transition from the current accredited undergraduate program will not affect any current space. The MSAT Program will have adequate facilities that already meet standards set forth by the CAATE. It will also benefit from the expansion of new facilities being built for athletics.

6.4.g. Operating Resource Requirements

Using FORM 2, provide a summary of operating resource requirements by object of expenditure. See EXHIBIT F

The MSAT program will utilize the current Program Director to oversee program operations and development. The Program Director will receive a stipend similar to other similar MS Programs. Faculty members (for summer courses) and adjuncts will receive \$1000 per credit hour. Additional support will come from current West Liberty University staff members in the Office of Graduate Admissions, Help Desk, and the Office of E-learning. Current expenses will include costs associated with marketing, office supplies, and postage. Educational equipment will include computer hardware and related equipment, textbooks, and additional resources as may be needed to provide online instruction, but most of this is already in place for the undergraduate AT program. The electronic databases currently available through the university library will be sufficient for MSAT studies and research. Sources of funding will be generated through competitive tuition rates of approximately \$500 for domestic and \$600 per credit hour for international students. The rates will be adjusted as necessary in future years. Assumptions for calculations are based on similar competitive graduate programs in the area. The program is projected to be self-sustaining through the generation of program tuition.

After the initial five-year period, the program will continue to be sustained through student tuition and fees. The College of Education and Human Performance will continue to work with the Department of Athletics sharing the costs of equipment replacement and upgrades.

6.4.h. Source of Operating Resources:

Indicate the source of operating resource requirements if the service levels are to reach those projected in FORM 1. Describe any institutional plans to reallocate resources to the program in each year of the five (5) year period. Describe the supplementary resource needs that are beyond the usual or expected institutional allocations that are derived through the regular budget request process. See EXHIBIT F

West Liberty University is not currently seeking any new financial support for this program. The MS Athletic Training program will be supported by tuition revenue.

6.5. Program Evaluation

6.5.a. Evaluation Procedures

Indicate the evaluation or review guidelines, procedures, schedule, and assessment measures that will be used for this program. Criteria and standards for program evaluation will vary according to the level and purpose of the program. The evaluation should address the viability, adequacy, and necessity of the program in relation to the mission of the institution. Both qualitative and quantitative indicators are important. Among the measures may also be the value of the program to the State and its people, its roles in contributing to human development, and its social utility in contributing to the further development of West Virginia.

Evaluation of the Master of Athletic Training Degree Program will be conducted in accordance with requirements of the West Liberty University Board of Governors and the CAATE (the accrediting agency). The program will be evaluated using methods compatible with other programs at the University and will receive national, state, and institutional review as well as a department program review. See **EXHIBIT H**

Courses with Assessment

AT 510 Athletic Training Simulation Practicum I.....2 credit hours

This course involves the students' clinical education. The students apply didactic education skills with clinical preceptors during a preseason rotation. Students are required to work the schedules assigned at the sites. Simulation case scenarios are presented to assure students are receiving the necessary exposure and knowledge per the CAATE standards.

This course involves the students' clinical education and application of the didactic education during a preseason clinical rotation.

Learning Objectives:

Through successful completion of this course, the student will be able to:

1. Identify and implement the necessary pre-season duties, which include: preparticipation examinations, hydration status, prophylactic/equipment maintenance, and other designated administrative roles through simulated situations and scenarios.
2. Apply evidence-based practice in clinical education while working with patients and guidance from clinical preceptor(s).
3. CAATE Competencies (See **EXHIBIT I**): PHP-2-6, PHP-15, PHP-16, PHP-17a-i, PHP-24-41, PHP-46, PHP-47, CE-3, CE-6, CE-7, CE-10-20, CE-20a-j, CE-21, CE-21a-k, CE-21l, CE-21m-p, CE-22, AC-27-33, AC-36b, AC-36d, AC-36e, AC-36o, PD-9, PD-10 CIP-3, CIP-5, EBP-1-14, PD-5, PD-6, PD-8, PD-12 CIP-4, CIP-4b, CIP-4e, CIP-4f TI-1-3, TI-8, TI-9, TI-11a-f, TI-12, TI-13, TI-19, TI-20, PS-1, PS-2, PS-3, PS-4, PS-5, PS-6, PS-7, PS-8, PS-9, PS-10

Assessment:

1. Weekly preceptor evaluations completed on the athletic training student(s) in ATrack. End-of-rotation student evaluation on preceptor. All evaluations will be reviewed by the Clinical Education Coordinator.

AT 513 Advanced Concepts in Rehabilitation..... 3 credit hours

The course is designed to provide the graduate students with knowledge and the skills to implement therapeutic exercises, strength training, range of motion exercises, aquatic therapy, and other rehabilitative interventions for the whole body.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Apply their clinical examination skills to properly evaluate, develop, and implement an appropriate treatment/rehabilitation plan to provide appropriate patient care.
2. Utilize evidence-based research to implement and develop an individualized rehabilitation plan for each patient.
3. Proficiently instruct and explain to a patient how to correctly perform rehabilitative exercises.
4. Explain the body's relationship with gait, posture, biomechanics, and ergonomics with different therapeutic interventions
5. CAATE Competencies (See EXHIBIT I): PHP-19, CE-5, CE-8, CE-9, AC-43, TI-6, TI-7, TI-10, TI-11d, TI-14, TI-15, TI-17, TI-18, CIP4, CIP-4a-f

Assessment:

1. Complete a written assignment searching for the best available evidence in therapeutic rehabilitation as it deals with a specific injury/pathology. Evaluation will be based upon appropriate intervention and evidence-based explanation to support the plan.
2. Clinical Proficiencies will be completed by the graduate students in the application of various therapeutic interventions to concur with didactic instruction.

AT 514 Organization & Administration2 credit hours

A basis for the foundation and introduction to the business side of the profession. This course explores topics including athletic training room facility design, medical record keeping procedures, personnel and program management among other areas.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Synthesize the role and scope of practice of the athletic trainer and associated organizational, budgetary, strategic planning, and regulatory practices and procedures in the operation of healthcare delivery and athletic training services/clinics.
2. Describe the credentialing processes for the athletic training profession and the regulatory bodies nationally and locally that maintain practice standards including but not limited to scope of practice and roles/responsibilities.
3. CAATE Competencies (See EXHIBIT I): EBP-1-14, PD-5, PD-6, PD-8, PD-12, AC-1, HA-1-30

Assessment:

1. Develop a portfolio advocating for the profession at the secondary, collegiate, state and national levels.

AT 515 Concepts in Therapeutic Modalities..... 3 credit hours

This course is designed to provide theory and application to the use of therapeutic modalities and their application as a result of various musculoskeletal and pathological conditions.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Describe and differentiate between pathological and physiological responses to inflammatory and non-inflammatory conditions and how these influence design, implementation and progression of a therapeutic intervention.
2. Assess, appropriately prepare the patient, and reassess the selected therapeutic intervention while recognizing safety and manufacturer procedures and process for the intervention.
3. Select and implement appropriate Clinical Integration Proficiencies according to the CAATE Standards in all patient populations.
4. CAATE Competencies (See EXHIBIT I): TI-1-3, TI-8, TI-9, TI-11a-f, TI-12, TI-13, TI-19, TI-20

Assessment:

1. Building upon the Evidence-Based Practice course and research foundation, complete a written assignment searching for the best available evidence in therapeutic modality use in treating a condition/injury the graduate students have identified as part of the research capstone project.
2. The graduate students will also be assessed on appropriately selected and using a therapeutic modality intervention on a current, real-world patient during their clinical practicum experience and other course patient scenarios (PBL I).
3. Clinical Proficiencies will be completed by the graduate students in the application of various therapeutic modalities to concur with didactic instruction.

AT 520 Supplemental Clinical Practicum II.....2 credit hours

This course involves the students' clinical education. The student applies didactic education skills with clinical preceptors. Students are required to work the schedules assigned at the sites. It will be focused more on disease, nutrition, and general medical areas per the CAATE standards.

Learning Objectives:

Through successful completion of this course, the student will be able to:

1. Identify and be aware of general medical, nutritional, and other physical and mental needs of patients.
2. Apply evidence-based practice in clinical education while working with patients and guidance from clinical preceptor(s).
- 3.
4. CAATE Competencies (See **EXHIBIT I**): PHP-2-6, PHP-15, PHP-16, PHP-17a-i, PHP-24-41, PHP-46, PHP-47, CE-3, CE-6, CE-7, CE-10-20, CE-20a-j, CE-21, CE-21a-k, CE-21l, CE-21m-p, CE-22, AC-27-33, AC-36b, AC-36d, AC-36e, AC-36o, PD-9, PD-10 CIP-3, CIP-5, EBP-1-14, PD-5, PD-6, PD-8, PD-12 CIP-4, CIP-4b, CIP-4e, CIP-4f TI-1-3, TI-8, TI-9, TI-11a-f, TI-12, TI-13, TI-19, TI-20, PS-1, PS-2, PS-3, PS-4, PS-5, PS-6, PS-7, PS-8, PS-9, PS-10

Assessment:

2. Weekly preceptor evaluations completed on the athletic training student(s) in ATrack. End-of-rotation student evaluation on preceptor. All evaluations will be reviewed by the Clinical Education Coordinator.

AT 521 Advanced Orthopedic Assessment I.....3 credit hours

The course is designed to provide the graduate students with the knowledge and the skills for proper evaluation, examination, diagnosis and foundational assessment skills and theories related but not limited to the lower extremity and lumbar and sacral areas of the body.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the student will be able to:

1. Efficiently and effectively examine and evaluate, clinically diagnose/differential diagnose, explain participation status, and refer when appropriate a variety of orthopedic injuries/conditions that person may acquire.
2. Effectively complete an orthopedic examination and evaluation from beginning to end that includes the following skills: history, inspection, palpation, functional assessment, special tests, neurological tests of the lower extremity.
3. Explain the necessity of diagnostic tools, and their accuracy as related to reliability, sensitivity, specificity, likelihood ratios, prediction values, and pre-test and post-test probabilities for physical evaluations.

4. Utilize evidence-based practice and patient-centered values during evaluation protocols.
5. CAATE Competencies (See EXHIBIT I): CE-6, CE-7, CE-10, CE-11, CE-12, CE-13, CE-14, CE-16, CE-17, CE-18, CE-19, CE-20, CE-20a, CE-20b, CE-20c, CE-20d, CE-20e, CE-20f, CE-21, CE-21a-h, CIP-4, CIP-4b, CIP-4e, CIP-4f

Assessment:

1. Demonstrate clinical proficiency while performing a comprehensive clinical evaluation of the lower extremity and trunk.
2. Written assessments will evaluate content knowledge of evaluation skills and injuries/pathologies for the lower extremity and trunk.
3. Oral practical examinations to assess competency in evaluation skills on patients.

AT 522 Problem Based Learning in Athletic Training I.....3 credit hours

This course is intended to challenge the students to become critical thinkers and problem solvers in the treatment of patient cases introduced throughout the semester.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Identify, research, and explain relevant topics regarding patients as related to athletic training.
2. Implement a holistic approach to treating patients within the scope of athletic training.
3. Implement appropriate referral procedures to other healthcare professionals when deemed necessary.
4. CAATE Competencies (See EXHIBIT I): PHP-24-41, PHP-46, PHP-47, PS-1-10, PD-10

Assessment:

1. The students will develop a complete patient scenario of their choice consisting of pathology, history, inspection, palpation, special tests and the evaluation process. This will describe and define the patient care needed based on the clinical diagnosis and then itemize the total plan of care including appropriate referral, diagnostics necessary, patient education, rehabilitation plan and return to activity criteria. Content will be based on a upper extremity or cervical spine pathology. The scenario must be backed with research of current relevant articles and data.

AT 523 Theory and Practice in Rehabilitation I.....2 credit hours

This course is designed to build and apply on the ideas and knowledge learned in 513. The student will apply the knowledge to patient scenarios and design rehabilitation plans for many scenarios.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Apply their clinical examination skills to properly evaluate, develop, and implement an appropriate treatment/rehabilitation plan to provide appropriate patient care.
2. Utilize evidence-based research to implement and develop an individualized rehabilitation plan for each patient.
3. Proficiently instruct and explain to a patient how to correctly perform rehabilitative exercises.
4. Explain the body's relationship with gait, posture, biomechanics, and ergonomics with different therapeutic interventions
5. CAATE Competencies (See EXHIBIT I): PHP-19, CE-5, CE-8, CE-9, AC-43, TI-6, TI-7, TI-10, TI-11d, TI-14, TI-15, TI-17, TI-18, CIP4, CIP-4a-f

Assessment:

1. Complete a written assignment searching for the best available evidence in therapeutic rehabilitation as it deals with a specific injury/pathology. Evaluation will be based upon appropriate intervention and evidence-based explanation to support the plan.
2. Clinical Proficiencies will be completed by the graduate students in the application of various therapeutic interventions to concur with didactic instruction.
3. Develop appropriate rehabilitation plan from injury to return to play based on the patient scenario related but not limited to the lower extremity and lumbar and sacral areas of the body.

AT 524 Best Practices in AT.....2 credit hours

This course discusses contemporary issues in Athletic Training including current research and implications and technological advances. Evidence-Based Medicine and research, research design is introduced and emphasized in this class.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Define and explain the five-step process of evidence-based practice and its relationship to athletic training, create and answer a clinical question through relevant literature and the clinical decision-making process.
2. Describe and differentiate the types of research, research components, and levels of research evidence.
3. Use the appropriate literature search techniques and critical appraisal methods to review the overall quality of the literature, and apply outcomes evidence into clinical practice.
4. Apply the evidence-based practice process to answer a clinical question in a real-world scenario and use appropriate methods to appraise the quality of the literature to determine a best practice clinical intervention.
5. Describe the credentialing processes for the athletic training profession and the regulatory bodies nationally and locally that maintain practice standards including but not limited to scope of practice and roles/responsibilities.
6. CAATE Competencies (See EXHIBIT I): EBP-1-14, PD-5, PD-6, PD-8, PD-12

Assessment:

1. The culminating project will consist of a research poster that could be submitted to a state, regional, or national conference. The review of literature and abstract development will be the initial process for the final research capstone for the degree.

AT 530 Professional Clinical Practicum III..... 2 credit hours

This course involves the students' clinical education. The student applies didactic education skills with clinical preceptors during a continuation of the previous two practicum rotations. Students are required to work the schedules assigned at the sites of a high school, clinic, or collegiate setting.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Gain proficiency in prophylactic bracing, taping, and wound care administration on patients.
2. Apply the concepts of therapeutic modalities to patients following appropriate clinical evaluation and diagnosis.
3. Apply evidence-based practice in clinical education while working with patients and guidance from clinical preceptor(s).
4. CAATE Competencies (See **EXHIBIT I**): PHP-19, PHP-42-45, CE-5, CE-6, CE-7, CE-8, CE-9, CE-10, CE-11-19, CE-20a-f, CE-21a-h, CE-23, AC-2, AC-3, AC-34, AC-43, TI-4, TI-5, TI-6, TI-7, TI-10, TI-11d, TI-14, TI-15, TI-17, TI-18, TI-21, TI-22, TI-23, TI-24, TI-25, TI-26, TI-27, TI-28, TI-29, TI-30, TI-31, CIP4, CIP-4a, CIP-4c, CIP-4b, CIP-4c, CIP-4d, CIP-4e, CIP-4f, PS-11, PS-12, PS-13, PS-14, PS-15, PS-16, PS-17, PS-18

Assessment:

1. Preceptor evaluations completed on the athletic training student(s), in ATrack, at the midterm and final points of the semester. End-of-rotation student evaluation on preceptor. All evaluations will be reviewed by the Clinical Education Coordinator.

AT 531 Advanced Orthopedic Assessment II.....3 credit hours

The course is designed to provide the graduate students with the knowledge and the skills for proper evaluation, examination, diagnosis and foundational assessment skills and theories related but not limited to upper extremity and thoracic and cervical spine areas of the body.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

2. Efficiently and effectively examine and evaluate, clinically diagnose/differential diagnose, explain participation status, and refer when appropriate a variety of orthopedic injuries/conditions that person may acquire.
3. Effectively complete an orthopedic evaluation from beginning to end that include the following skills: history, inspection, palpation, functional assessment, special tests, neurological tests of the upper extremity
4. Explain the necessity of diagnostic tools, and their accuracy as related to reliability, sensitivity, specificity, likelihood ratios, prediction values, and pre-test and post-test probabilities for physical evaluations.
5. Utilize evidence-based practice and patient-centered values during evaluation protocols.
6. CAATE Competencies (See **EXHIBIT I**): PHP-42-45, CE-6, CE-7, CE-10, CE-11-19, CE-20a-f, CE-21a-h, AC-34, CIP-4a, CIP-4c, CIP-4d

Assessment:

1. Demonstrate clinical proficiency while performing a comprehensive clinical evaluation of the upper extremity.
2. Written assessments will evaluate content knowledge of evaluation skills and injuries/pathologies for the upper extremity.
3. Oral practical examinations to assess competency in evaluation skills on patients.

AT 532 Problem Based Learning in Athletic Training II.... 3 credit hours

This course is intended to challenge the students to become critical thinkers and problem solvers in the treatment of patient cases introduced throughout the semester.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Identify, research, and explain relevant topics regarding patients as related to athletic training.
2. Implement a holistic approach to treating patients within the scope of athletic training.
3. Implement appropriate referral procedures to other healthcare professionals when deemed necessary.
4. CAATE Competencies (See **EXHIBIT I**): CE-23, AC-2, AC-3, TI-4, TI-5, TI-21, TI-22, TI-23, TI-24, TI-25, TI-26, TI-27, TI-28, TI-29, TI-30, TI-31, PS-11, PS-12, PS-13, PS-14, PS-15, PS-16, PS-17, PS-18

Assessment:

1. The student will develop a complete patient scenario of his or her choice consisting of pathology, history, inspection, palpation, special tests and the evaluation process. This will describe and define the patient care needed based on the clinical diagnosis and then itemize the total plan of care including appropriate referral, diagnostics necessary, patient education, rehabilitation plan and return to activity criteria. Content will be based on a

upper extremity or head, neck or spine pathology. The scenario must be backed with research of current relevant articles and data.

AT 533 Theory and Practice in Rehabilitation II.....2 credit hours

A continuation of 523 the previous semester this course continues the trends the student is learning regarding application of the knowledge to patient scenarios and the designing of rehabilitation plans for many conditions related but not limited to upper extremity and thoracic and cervical spine areas of the body.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Apply their clinical examination skills to properly evaluate, develop, and implement an appropriate treatment/rehabilitation plan to provide appropriate patient care.
2. Utilize evidence-based research to implement and develop an individualized rehabilitation plan for each patient.
3. Proficiently instruct and explain to a patient how to correctly perform rehabilitative exercises.
4. Explain the body's relationship with gait, posture, biomechanics, and ergonomics with different therapeutic interventions
5. CAATE Competencies (See EXHIBIT I): PHP-19, CE-5, CE-8, CE-9, AC-43, TI-6, TI-7, TI-10, TI-11d, TI-14, TI-15, TI-17, TI-18, CIP4, CIP-4a-f

Assessment:

1. Complete a written assignment searching for the best available evidence in therapeutic rehabilitation as it deals with a specific injury/pathology. Evaluation will be based upon appropriate intervention and evidence-based explanation to support the plan.
2. Clinical Proficiencies will be completed by the graduate students in the application of various therapeutic interventions to concur with didactic instruction.
3. Develop appropriate rehabilitation plan from injury to return to play based on the patient scenario presented.

AT 540 Professional Clinical Immersion..... 3 credit hours

This course involves the students' clinical education and application of the didactic education during a full clinical immersion (two four-week or one eight-week rotations) at an assigned clinical site.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Application of all skills learned didactically and necessary to be an entry-level athletic trainer.
2. Relate the role of an athletic trainer for everyday routines and maintenance of designated employment setting(s).
3. CAATE Competencies (See **EXHIBIT I**): EBP-1-14, PD-5, PD-6, PD-8, PD-12, AC-1, HA-1-30

Assessment:

1. Preceptor evaluations completed on the athletic training student(s), in ATrack, at the midterm and final points of each clinical immersion. End-of-rotation student evaluation on the preceptor for each clinical immersion. All evaluations will be reviewed by the Clinical Education Coordinator.

AT 544 Research Capstone.....2 credit hours

In this course, the graduate students will complete a research capstone project that has been built upon since the beginning of their coursework. This course will also focus on organizational and administrative aspects in athletic training.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Apply the evidence-based practice process in the development of a clinical question or problem, search and appraise quality literature evidence, and interpret outcome measures to develop the clinical intervention or answer to a clinical problem.
2. Demonstrate the ability to write and verbally articulate relevant evidence to a current clinical questions or problem through a review of literature
3. Create an appropriate academic research abstract and thesis in the form of writing and presentation format.
4. Relate the role and scope of practice of the athletic trainer and associated organizational, budgetary, strategic planning, and regulatory practices and procedures in the operation of healthcare delivery and athletic training services/clinics.
5. CAATE Competencies (See **EXHIBIT I**): EBP-1-14, PD-5, PD-6, PD-8, PD-12, AC-1, HA-1-30

Assessment:

1. Develop a professional resume and an athletic training facility and budget.
2. The final research capstone project will consist of a thesis paper, abstract to be submitted to national, regional, and or state conference proceedings, and a final presentation to the College of Education and Human Performance with selected faculty.

AT 545 General Medical Conditions Athletic Training.....2 credit hours

This course is designed for the students to acknowledge other medical/patient issues, conditions, and pathologies different from the traditional issues Athletic Trainers deal with daily.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Identify a variety of general medical conditions that are less common pathologies seen in the field of athletic training, including but not limited to common congenital or acquired risk factors, musculoskeletal conditions and common illness in physically active populations.
2. Efficiently use tools designed for clinical assessment of various medical conditions.
3. Use clinical reasoning during patient assessment to formulate diagnosis/differential diagnosis in common illness/disease and orthopedic/injury conditions.
4. Use outcome measures, surveillance data, risk factors for injury and illness, environmental conditions to incorporate injury prevention strategies.
5. Determine when examination results warrant patient referral to another healthcare provider and facilitate the referral process.
6. CAATE Competencies (See **EXHIBIT I**): PHP-2, PHP-3, PHP-4, PHP-5, PHP-6, PHP-15, PHP-16, PHP-17a, PHP-17b, PHP-17c, PHP-17d, PHP-17e, PHP-17f, PHP-17g, PHP-17h, PHP-17i, CE-3, CE-17, CE-20g, CE-20h, CE-20i, CE-20j, CE-21i, CE-21j, CE-21k, CE-21l, CE-21m, CE-21n, CE-21o, CE-21p, CE-22, AC-27, AC-28, AC-29, AC-30, AC-31, AC-32, AC-33, AC-36b, AC-36d, AC-36e, AC-36o, PD-9, CIP-3, CIP-5

Assessment:

1. Demonstrate clinical proficiency using assessment tools during physical examination for general medical pathologies. Written assignment researching evidence-based literature on a general medication condition selected by the graduate student.

AT 547 Movement Restoration.....2 credit hours

This course will allow students to apply all concepts learned from previous coursework dealing with patient assessment, rehabilitation, recognition, and correction of movement deficiencies.

Learning Objectives:

Through successful completion of this course and in compliance with CAATE standards, the students will be able to:

1. Apply their clinical examination skills to properly recognize deficiencies in posture, and movement.
2. Utilize evidence-based research to examine current trends related to physical examination theories.
3. Proficiently instruct and explain to a patient how to correctly perform exercises related to posture correction.

4. Explain the body's relationship with gait, posture, biomechanics, and ergonomics with different therapeutic interventions
5. CAATE Competencies (See EXHIBIT I): PHP-19, CE-5, CE-8, CE-9, AC-43, TI-6, TI-7, TI-10, TI-11d, TI-14, TI-15, TI-17, TI-18, CIP4, CIP-4a-f

Assessment:

1. Fully and correctly identify and assess movement or posture deficiencies in patients presented.
2. Complete and analyze a movement screen on a patient and instruct prevention exercise and techniques based on the findings of the exam.

6.5.b. Accreditation Status

Indicate the accrediting agency for the proposed program, the schedule for initiating and receiving accreditation, and the costs of each stage of the process. Attach to the proposal the statement of standards used by the accrediting agency for such a program and how each accreditation standard will be addressed within the proposed program.

The accrediting agency for this program is the Commission on Accreditation of Athletic Training Education (CAATE). The following are the accreditation guidelines directly from the website:

“There are several essential documents to review when considering accreditation of a professional program in athletic training. *Pursuing and Maintaining Accreditation of Professional Athletic Training Programs* provides step-by-step instructions to professional athletic training programs that wish to pursue or maintain accreditation. *The Standards for Accreditation of Professional Athletic Training Programs, (Standards)* outline the specific standards that must be met by all accredited programs. Its purpose is to explicitly define the requirements to achieve and maintain CAATE accreditation of professional athletic training programs.

Accreditation is a voluntary, non-governmental peer review process that strives to ensure quality and accountability, and encourage programmatic improvement. By requesting accreditation, the sponsoring institution of the degree program agrees to be assessed against the *Standards*. The sponsoring institution of an accredited program must comply with these *Standards* and use them to examine, improve upon, and report on its program's growth and achievement. Accreditation involves a collegial process of self-review and peer review, involving three major activities:

- A self-evaluation (self-study) by an institution or program using the Standards found on this website and culminating in submission of a self-study report to the CAATE.
- A peer review of the self-study and the institution during a site visit to confirm the accuracy of the self-study and gather additional evidence of quality that will be submitted to the Review Committee
- A recommendation by the Review Committee to the CAATE who will make a final decision regarding accreditation.
- More information about applying for accreditation can be found within the *Pursuing and Maintaining Accreditation Document*.”

Continuing Accreditation Timeline

Programs that are continuing accreditation will automatically begin the comprehensive review process on the following timeline:

- The self-study module will automatically open in eAccreditation July 1 in the year before accreditation expires and be due July 1 the following year. (For example, if the program's accreditation cycle ends in 2022-2023, the self-study will open on July 1, 2021, and would be due July 1, 2022).
- Upon final submission of the self-study the program will automatically be invoiced the non-refundable self-study/site visit fee. Review of self-study materials will not begin until payment is received.
- Following receipt of payment, the program's site visit team will be assigned and review of materials will begin. The site visit team and program director will coordinate to select site visit dates (available dates range from October 15 – February 15).
- Additional details about the continuing accreditation process can also be found within the Pursuing and Maintaining Accreditation Document

Accreditation: Initial accreditation is granted once the program is in place. Since the undergraduate program is already accredited, the CAATE is willing to allow programs to submit a substantive change form and transition to the masters level. The CAATE has announced that many times it won't perform a site visit, but just require a self-study submission for Programs that are in good-standing.

Application for Accreditation: Formal application requires registration via the eAccreditation account/information by the Program Director of the sponsoring institution and payment of the eAccreditation registration fee (\$750). The program must register in eAccreditation at least six months prior to submitting the self-study; however, it is recommended that programs register 12 months or more in advance of self-study submission to ensure timely completion of the self-study and allow for programmatic data to be entered into the system. Application does not guarantee accreditation will be achieved.

Fees: A non-refundable self-study and site visit fee of \$5000 (<http://caate.net/accreditationfees/>), payable to the CAATE, must be submitted prior to the review of the self-study materials. E-Accreditation will generate an invoice when the "Submit to CAATE" button for the submission of the self-study is selected. If the program wishes to receive the invoice prior to the actual submission of the self-study, program administrators may request the invoice by emailing accounting@caate.net. The \$5000 fee is all-inclusive with all site visit expenses covered by the CAATE. Programs will not be invoiced for expenses as has previously been done. No program will be reviewed until the Self Study/Site Visit Fee is paid. **See Standards (EXHIBIT H)**

EXHIBITS

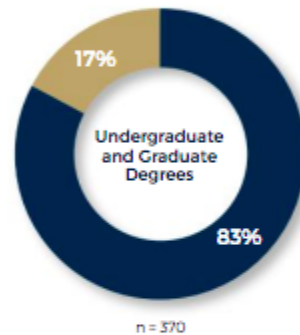
EXHIBIT A ATHLETIC TRAINING DEGREE LEVEL AND DEGREE TYPE NATIONWIDE

DEGREE LEVEL AND DEGREE TYPE

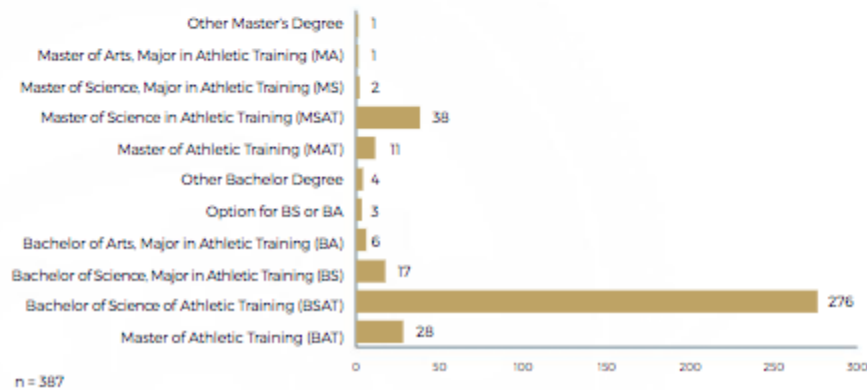
Of the 370 programs, 307 programs result in a Baccalaureate degree (down from 335 in 2014-2015) and 63 programs result in a Master's degree (up from 39 in 2014-2015). Of the programs that award a Baccalaureate degree the majority award a Bachelor of Science of Athletic Training, while most programs that award a Master's degree award a Master of Science of Athletic Training. It is important to note that when reporting degree type, programs are instructed to select all that apply, so if a program is in a transition period with both undergraduate and graduate students, they may be awarding both Baccalaureate and Master's degrees.

Professional Program Degree Level

- Baccalaureate Degree
- Master's Degree



Professional Program Degree Type



Retrieved from: https://issuu.com/caate/docs/2015-16_caate_analytics_report_vf

EXHIBIT B ATHLETIC TRAINER EMPLOYMENT BY STATE

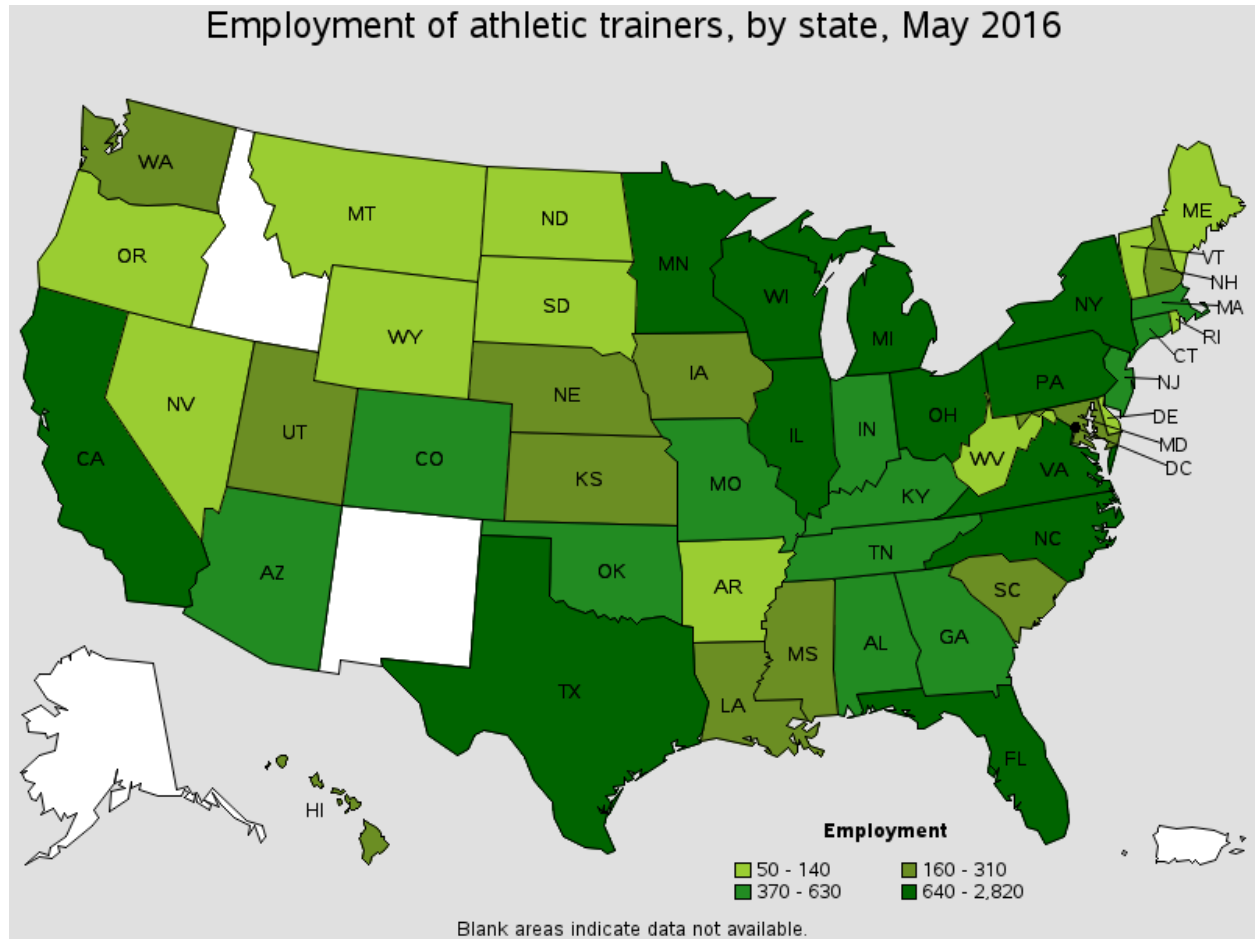


EXHIBIT C PROGRAM PLANNING AND DEVELOPMENT

Intent to Plan	July 2017
Completed Proposal	January 2018
Graduate Studies Council Approval	January 2018
Faculty Senate Approval	January 2018
Board of Governors Approval	January 2018

MSAT Updates based on Assessment Meeting with Cathy and Melinda

- I. Intent to plan is Approved
- II. Write Proposal--Series 11 Format Section 6
- III. Stop all Course Numbers at 500
- IV. Cap hours at 30. University rule

In the plan need to include current statistics with accredited programs etc. (Hannah)
 Disclaimer about CAATE making the mandate by 2026 (David)
 Take original proposal and take old out and add new courses
 Assessment plan is the big thing: Example is having an overall project showing how they meet the standards.
 Assessments need to be class specific so we need to add to each syllabus

Initially proposed timeline:

Jan 18--CC1 and CC2 forms completed with content (All of us) Grad council Jan 24
 Feb. 18--Graduate Curriculum Meeting for approval (David)
 March 18--Present to Faculty Senate (the Proposal needs to be completed for this)
 All of us will work on and all of us will be present to support at Senate
 April 4th, 2018 ****BOG to Approve****
 Then shipped to HEPC. This lasts about a month for approval. Need supporting documents from the clinical sites that they support or MSAT.
 May 2018---HEPC approval expected.----work on HLC document pending HEPC approval----
 August 1, 2018-- HLC document due to them.
 August 2019 Approval by HLC. Then we submit to substantive change form to CAATE. That date for 2020 programs is not even on the radar yet with the CAATE.

Degree Substantive Change Review Cycles

Intent Due	Mini Self-Study Due	Availability
June 1, 2017	August 1, 2017	11
October 1, 2017	December 1, 2017	14
December 1, 2017	February 1, 2018	15
February 1, 2018	April 1, 2018	15
June 1, 2018	August 1, 2018	15
October 1, 2018	December 1, 2018	15
December 1, 2018	February 1, 2019	15
Substantive change with Comprehensive Review May 1	<i>Same deadline as Self-Study</i> July 1	

CAATE Substantive Change Information

EXHIBIT D LETTERS OF SUPPORT



12-5-17

To Whom it may Concern:

The West Liberty Athletic Training Program would like to thank you for your years of service, cooperation and willingness to assist with the education of our students. I am happy to announce that West Liberty will be proposing to implement a Masters Level Athletic Training Program as a result of the recent decisions made by the CAATE. (Commission on Accreditation of Athletic Training Education.)

As a state institution, the Program must go through a formal proposal process. Therefore, one section of this is to collect letters of support in the community for the implementation of our program.

As a clinical site and to show support, please sign below to acknowledge the proposed transition and confirm that your business/company/institution will continue to work with West Liberty and the Athletic Training students at your clinical sites and you will continue to provide Preceptors and options for our students and their clinical rotations.

Thank you. Please contact me if you have any questions.

Signature of Support

Thank you,
David

*Dr. David R. Hanna PT, MS, ATC
Program Director/Associate Professor
Athletic Training Program
West Liberty University
david.hanna@westliberty.edu
304-336-8547 (o)
304-312-2983 (c)*

Brooke High School



12-5-17

To Whom it may Concern:

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Thank you. Please contact me if you have any questions.

Signature of Support

Thank you,
David

*Dr. David R. Hanna PT, MS, ATC
Program Director/Associate Professor
Athletic Training Program
West Liberty University
david.hanna@westliberty.edu
304-336-8547 (o)
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12-5-17

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Thank you. Please contact me if you have any questions.

Signature of Support

Thank you,
David

Dr. David R. Hanna PT, MS, ATC
Program Director/Associate Professor
Athletic Training Program
West Liberty University
david.hanna@westliberty.edu
304-336-8547 (o)
304-312-2983 (c)

Wheeling Park High School



12-5-17

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Thank you. Please contact me if you have any questions.

Signature of Support Tom Hovengo MS ATC PTA

Thank you,
David

*Dr. David R. Hanna PT, MS, ATC
Program Director/Associate Professor
Athletic Training Program
West Liberty University
david.hanna@westliberty.edu
304-336-8547 (o)
304-312-2983 (c)*

The Linsly School



12-5-17

To Whom it may Concern:

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As a clinical site and to show support, please sign below to acknowledge the proposed transition and confirm that your business/company/institution will continue to work with West Liberty and the Athletic Training students at your clinical sites and you will continue to provide Preceptors and options for our students and their clinical rotations.

Thank you. Please contact me if you have any questions.

Signature of Support Brian Rose

Thank you,
David

Dr. David R. Hanna PT, MS, ATC
Program Director/Associate Professor
Athletic Training Program
West Liberty University
david.hanna@westliberty.edu
304-336-8547 (o)
304-312-2983 (c)

Bethany College

EXHIBIT E LIBRARY RESOURCES

DATABASES & DIGITAL COLLECTION

- Academic Search Complete
- Business Source Elite
- Cochrane Central Register of Controlled Trials
- Cochrane Database of Systematic Reviews
- Cochrane Methodology Register
- Communication and Mass Media Complete
- Database of Abstracts of Reviews of Effects
- Dentistry & Oral Sciences Source
- Dynamed
- ERIC
- Gale Business Insights: Global
- Gale Opposing Viewpoints in Context
- Gale Science In Context
- Gale World History In Context
- Grove Music Online
- Health Technology Assessments
- Literature Resource Center
- MasterFILE Premier
- Medline Complete
- MLA Directory of Periodicals
- MLA International Bibliography
- Newspaper Source
- NHS Economic Evaluation Database
- Nursing/Academic Edition
- Points of View
- ProQuest
- PubMed
- SPORTDiscus
- Teacher Reference Center
- WV Infodepot

EXHIBIT F
OPERATING RESOURCE REQUIREMENTS
FORM 2

A. FTE Positions	First Year	Second Year	Third Year	Fourth Year	Fifth Year
1. Administrators	0	0	0	0	0
2. Full-time Faculty #	0	0	0	0	0
3. Adjunct Faculty	0	0	1	1	1
4. Graduate Assistants	0	0	0	0	0
5. Other Personnel	0	0	0	0	0
a. Clerical workers	0	0	0	0	0
b. Professionals	0	0	0	0	0

Current WLU Faculty Members will be moving from undergraduate to graduate instructors. Possible adjuncts will be needed to teach the Pre-AT major classes in the Exercise Physiology program. This would be paid at the standard undergraduate rate of \$750 per credit hour.

B. Operating Costs	First Year	Second Year	Third Year	Fourth Year	Fifth Year
1. Personal Services	0	0	0	0	0
a. Administrators	0	0	0	0	0
b. Full-time Faculty #	0	0	0	0	0
c. Adjunct Faculty (Possibly)	0	0	\$4,500	\$4,500	\$4,500
d. Graduate Assistants	0	0	0	0	0
e. Non-Academic Personnel					
Clerical Workers	0	0	0	0	0
Professionals	0	0	0	0	0
Total Labor	0	0	\$4,500	\$4,500	\$4,500

2. CAATE Fees	\$3,000 to \$6,000 (Substantive Change)	\$3850	\$3850	\$3850	\$3,850
3. Maintenance	0	0	0	0	0
4. Equipment					
a. Educational Equipment	\$2,000	\$1,500	\$1,500	\$1,500	\$1,500

b. Research Equipment	\$1,000	\$1,500	\$1,500	\$1,500	\$1,500
5. Clinical	0	\$1,000	\$3,000	\$5,000	\$1,000
6. Faculty Travel	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000
Total Expense	\$11,000	\$9,850	\$11,850	\$13,850	\$9,850

C. Sources	First Year 2020	Second Year 2020/21	Third Year 2021/22	Fourth Year 2022/23	Fifth Year 2023/24
1. General Fund Appropriations	0	0	0	0	0
2. Federal Government	0	0	0	0	0
3. Private and Other	0	0	0	0	0
4. Tuition	\$137,500	\$141,625	\$159,135	\$246,306	\$255,755
Total All Sources	\$137,500	\$141,625	\$159,135	\$246,306	\$255,755

**SOURCE OF OPERATING RESOURCES
FORM 1**

	First Year	Second Year	Third Year	Fourth Year	Fifth Year
Number of Students Served through Course Offerings of the Program					
Head Count	10	10	10	15	15
Student Credit Hours	200	200	200	300	300
Resident Tuition (\$450 per credit hour) 3% increase each year	\$90,000	\$92,700	\$95,481	\$145,520	\$151,945
Number of Majors					
Head Count	5	5	5	10	10
Student Credit Hours	100	100	100	200	200
Non-resident tuition (\$475 per credit hour) 3% increase each year	\$47,500	\$48,925	\$63,654	\$100,786	\$100,810
Total projected revenue	\$137,500	\$141,625	\$159,135	\$246,306	\$255,755

EXHIBIT G
ASSESSMENT PLAN MATRIX

Student Learning Outcomes	Course to Assess	When	Assessment Measurement
1. Possess and utilize effective communication skills in various athletic training and health care settings.	AT 545 General Medical Conditions in Athletic Training	Spring Year 2	Written assignment Clinical proficiency assessments
	AT 521 Advanced Orthopedic Assessment I	Spring Year 2	Oral Practical Exam Clinical proficiency assessments
	AT 515 Concepts in Therapeutic Modalities	Fall Year 1	Written assignment Clinical proficiency assessments
	AT 522 Problem-Based Learning in Athletic Training I	Spring Year 1	Written Case Assignment
	AT 531 Advanced Orthopedic Assessment II	Fall Year 2	Oral Practical Exam Clinical proficiency assessments
	AT 513 Advanced Concepts in Rehabilitation	Fall Year 1	Written assignment Clinical proficiency assessments
	AT 532 Problem-Based Learning in Athletic Training II	Fall Year 2	Written Case Assignment
	AT 540 Professional Clinical Immersion	Spring Year 2	Preceptor evaluations Student evaluations
2. Demonstrate Evidence Based Practice in a variety of applied settings.	AT 524 Best Practices in Athletic Training	Spring Year 1	Research current Evidence-Based Research poster Written review of literature
	AT 515 Concepts in Therapeutic Modalities	Fall Year 1	Written assignment

	<p>AT 513 Advanced Concepts in Rehabilitation</p> <p>AT 544 Research Capstone</p>	<p>Fall Year 1</p> <p>Spring Year 2</p>	<p>Written assignment</p> <p>Written capstone review of literature, presentation Prepare for submission to conference proceedings (local, state, regional, national)</p>
<p>3. Apply ethical-decision making regarding patient care and daily management of various athletic training and health care settings.</p>	<p>AT 545 General Medical Conditions in Athletic Training</p> <p>AT 515 Concepts in Therapeutic Modalities</p> <p>AT 521 Advanced Orthopedic Assessment I</p> <p>AT 531 Advanced Orthopedic Assessment II</p> <p>AT 513 Advanced Concepts in Rehabilitation</p> <p>AT 545 Research Capstone in AT</p>	<p>Spring Year 2</p> <p>Fall Year 1</p> <p>Spring Year 1</p> <p>Spring Year 2</p> <p>Fall Year 1</p> <p>Spring Year 2</p>	<p>Clinical proficiency assessments</p> <p>Clinical proficiency assessments</p> <p>Oral Practical Exam Clinical proficiency assessments</p> <p>Oral Practical Exam Clinical proficiency assessments</p> <p>Written assignment</p> <p>Written assignment</p>
<p>4. Evaluate the importance of patient-centered values and care among patient populations.</p>	<p>AT 524 Best Practices in AT</p> <p>AT 521 Advanced Orthopedic Assessment I</p>	<p>Spring Year 1</p> <p>Spring Year 1</p>	<p>Research current Evidence-Based literature</p> <p>Oral Practical Exam Clinical proficiency assessments</p>

	AT 531 Advanced Orthopedic Assessment II	Fall Year 2	Oral Practical Exam Clinical proficiency assessments
	AT 513 Advanced Concepts in Rehabilitation	Fall Year 1	Written assignment
5. Advocate for the profession of athletic training in various settings, and display leadership, work ethic, and mentorship qualities as a healthcare provider.	AT 510 AT Simulation Practicum I	Fall Year 1	Preceptor evaluations Student evaluations
	AT 540 Professional Clinical Immersion	Spring Year 2	Preceptor evaluations Student evaluations
	AT 545 Research Capstone	Spring Year 2	Written capstone review of literature, presentation Prepare for submission to conference proceedings (local, state, regional, national)
	AT 540 Professional Clinical Immersion	Spring Year 2	Preceptor evaluations Student evaluations
6. Demonstrate mastery of all Knowledge, Skills, and Abilities outlined by the current CAATE Standards.	AT 545 General Medical Conditions in Athletic Training	Spring Year 2	Written assignment Clinical proficiency assessments
	AT 544 Research Capstone	Spring Year 2	Research current Evidence-Based Research poster Written review of literature
	AT 521 Advanced Orthopedic Assessment I	Spring Year 1	Oral Practical Exam Clinical proficiency assessments
	AT 515 Concepts in Therapeutic Modalities	Fall Year 1	Written assignment Clinical proficiency assessments
	AT 522 Problem Based		

	Learning in Athletic Training I	Fall Year 1	Written case assignment
	AT 520 Supplemental Clinical Practicum I	Spring Year 2	Preceptor evaluations Student evaluations
	AT 531 Advanced Orthopedic Assessment II	Fall Year 2	Oral Practical Exam Clinical proficiency assessments
	AT 523 Theory and Practice in Rehabilitation I	Spring Year 1	Written assignment
	AT 532 Problem Based Learning in Athletic Training II	Fall Year 2	Written case assignment
	AT 530 Professional Clinical Practicum III	Fall Year 2	Preceptor evaluations Student evaluations
	AT 544 Research Capstone	Spring Year 2	Written review of literature, presentation, prepare for submission to conference proceedings (local, state, regional, national)
	AT 540 Professional Clinical Immersion	Spring Year 2	Preceptor evaluations Student evaluations
	AT Movement Restoration	Spring Year 2	Simulated Patient Screenings and Interpretation

EXHIBIT H

CAATE STANDARDS

CAATE Post-Professional Web Page

Standards for the Accreditation of Post-Professional Athletic Training Programs

1. The sponsoring institution must be accredited by an agency recognized by the United States Department of Education or by the Council for Higher Education Accreditation and must be legally authorized to provide a program of post baccalaureate education. For programs outside of the United States, the institution must be accredited by a recognized post-baccalaureate accrediting agency.
2. The program must lead to a post-baccalaureate (post-professional) masters or doctoral degree.
3. The name “Athletic Training” must appear on the transcript as the major, specialization, concentration, emphasis, or track.
4. The institution should grant a post-baccalaureate (post-professional) degree in athletic training.
5. All sites where students are involved in patient care (excluding the Program’s sponsoring institution) must have an affiliation agreement or memorandum(s) of understanding that is endorsed by the appropriate administrative authority (i.e. those bearing signature authority) at both the sponsoring institution and site. In the case where the administrative oversight of the student differs from the affiliate site, formal agreements must be obtained from all parties.
6. In certain instances, the school/college or university sponsoring the program may establish affiliation with other units within the institution or at other institutions, to provide instruction, research, or administrative experiences. If such affiliations are made there must be formal administrative arrangements for use of all affiliated settings.
7. The program should be housed within the school of health sciences, health professions, medicine or similar health-related academic unit.
8. Develop a Plan: The program’s outcomes and objectives guide the program, and must be consistent with the missions of the university, school/college, and department in which the program is housed.
9. Develop a Plan: All aspects of the program (didactic, scholarly experience, advanced clinical practice) must have corresponding program outcomes and objectives.
10. Develop a Plan: The program’s outcomes and objectives must reflect its faculty expertise and resources.

11. Develop a Plan: The program's outcomes must increase students' depth and breadth of understanding of athletic training subject matter areas, skills, and Post Professional Core-Competencies, beyond the knowledge, skills, and abilities required of the professional preparation program.

12. Develop a Plan: There must be a comprehensive assessment plan to evaluate all aspects of the educational program. Assessments used for this purpose must include those defined in Standards 10 and 11. Additional assessments may include, CAATE Post –Professional Degree Standards 8 but are not limited to, clinical site evaluations, preceptor evaluations, academic course performance, retention and graduation rates, graduating student exit evaluations, and alumni placement rates one year post graduation.

13. Develop a Plan: The plan must be ongoing and document regular assessment of the educational program.

14. Assessment Measures: The program's assessment measures must include those stated in Standards 10 and 11 in addition to any unique metrics that reflect the specific program, department, or college. The specific volume and nature of this information is influenced by the individual character of the institution and should be in keeping with other similar academic programs within the institution. The assessment tools must relate the program's stated educational mission, goals and objectives to the quality of instruction all identified, student learning, and overall program effectiveness.

15. Assessment Measures: The program's aggregate institutional data (as defined by the CAATE) for the most recent three years must be provided. (revised January 16, 2017) EFFECTIVE JULY 1, 2018 - Standard 15. Assessment Measures: The program's aggregate institutional data (as defined below by the CAATE) for the most recent three years must be provided. • The program's employment/placement rate for the most recent three graduating cohorts within 6 months of graduation. • The program's retention and graduation rates for the most recent three academic years. (Retention rate (modified from United States Department of Education): Measures the percentage of enrolled students who are seeking post-professional degrees who return to the institution to continue their studies the following fall.) (Graduation rate (taken from United States Department of Education): Measures the progress of students who began their studies as full-time, first-time degree- or certificate-seeking students by showing the percentage of these students who complete their degree or certificate within a 150% of "normal time" for completing the program in which they are enrolled.) This revision impacts Standard 16. The wording of Standard 16 remains the same.

16. Assessment Measures: Programs must post the aggregate institutional data (as defined by the CAATE) on the program's home page or a direct link to the data must be on the program's home webpage.

17. Collect the Data: Programs must obtain data to determine all identified program outcomes.

18. Data Analysis: Programs must analyze the outcomes data to determine the extent to which the program is meeting its stated mission, goals, and objectives.

19. Action Plan: The results of the data analysis are used to develop a plan for continual program improvement. This plan must: a. Develop targeted goals and action plans if the program and student learning outcomes are not met; and b. State the specific timelines for reaching those outcomes; and c. Identify the person(s) responsible for those action steps; and d. Provide evidence of periodic updating of action steps as they are met or circumstances change. Personnel
20. Program Director must be a full-time employee of the sponsoring institution.
21. The Program Director must possess a terminal degree (e.g., PhD, EdD) from a CAATE Post-Professional Degree Standards 9 regionally accredited institution.
22. The Program Director must be a member of the graduate faculty, where applicable, as defined by institutional policy.
23. Program Director must have faculty status, with full faculty rights, responsibilities, privileges, and full college voting rights as defined by institution policy and that are consistent with similar positions at the institution necessary to provide appropriate program representation in institutional decisions.
24. The Program Director should be tenured and hold the rank of associate professor or higher.
25. The Program Director must have an ongoing involvement in the athletic training profession as evidenced by scholarly publications/presentations and involvement in the profession.
26. Program Director must have programmatic administrative and supervisory assignment that is consistent with other similar assignments within the degree granting unit at the institution.
27. Program Director must have administrative release time. The Program Director's release time must be equivalent to similar health care programs in the institution. If no such similar program exists at the institution, then benchmark with peer institutions.
28. Program Director Responsibilities must include input to and assurance of the following program features: a. Ongoing compliance with the Standards; b. Planning, development, implementation, delivery, documentation, and assessment of all components of the curriculum; c. Advanced clinical practice experiences; d. Programmatic budget.
29. Program Director Qualifications: The Program Director must be certified and be in good standing with the Board of Certification (BOC).
30. Program Director Qualifications: The Program Director must possess a current state athletic training credential and be in good standing with the state regulatory agency (where applicable).
31. Athletic Training Faculty Qualifications: All faculty assigned and responsible for the instruction of the required program content must be qualified through professional preparation and experienced in their respective academic areas as determined by the institution.

32. Athletic Training Faculty Qualifications: All faculty assigned and responsible for the instruction of the required program content must be recognized by the institution as having instructional responsibilities.

33. Athletic Training Faculty Qualifications: All faculty assigned and responsible for the instruction of required program content must incorporate the most current athletic training knowledge, skills, and abilities as they pertain to their respective teaching areas.

34. Athletic Training Faculty must have an ongoing involvement in the athletic training profession as evidenced by scholarly publications/presentations and involvement in the profession.

35. Athletic Training Faculty Qualifications: All faculty assigned and responsible for CAATE Post-Professional Degree Standards 10 instruction of the required program content must possess a current state credential and be in good standing with the state regulatory agency (where and when applicable) when teaching hands on athletic training patient care techniques with an actual patient population.

36. Athletic Training Faculty Number: In addition to the Program Director, there must be a minimum of one full-time (1.0 FTE) core faculty member as defined in the glossary, dedicated (100% of 1 FTE) to the athletic training program. The faculty members must have full faculty rights, responsibilities, privileges, and full college voting rights as defined by institution policy and that are consistent with similar positions at the institution necessary to provide appropriate program representation in institutional decisions.

37. Athletic Training Faculty: Based on the program's student enrollment, the number of athletic training faculty must be sufficient to advise and mentor students.

38. Athletic Training Faculty: Based on the program's student enrollment, the number of athletic training faculty must be sufficient to meet program outcomes.

39. Medical Director: The program must have a Medical Director. This individual must be an MD/DO who is licensed to practice in the state sponsoring the program.

40. Medical Director: The Medical Director must, in coordination with the Program Director, serve as a resource and medical content expert for the program. Program Delivery: Program delivery includes didactic, laboratory, and advanced clinical practice courses.

41. The program must assure that the Post-Professional Core Competencies are integrated within the program.

42. Clearly written current course syllabi are required for all courses that deliver content related to the Post-Professional Core Competencies and must be written using clearly stated objectives.

43. Clinical placements must be non-discriminatory with respect to race, color, creed, religion, ethnic origin, age, sex, disability, sexual orientation, or other unlawful basis.

44. All clinical education sites must be evaluated by the program on an annual and planned basis and the evaluations must serve as part of the program's comprehensive assessment plan.
45. The program's students must be credentialed and be in good standing with the Board of Certification (BOC) prior to providing athletic training services.
46. The program's students must possess a current state athletic training credential and be in good standing with the state regulatory agency (where applicable) prior to providing athletic training services.
47. Course credit must be consistent with institutional policy or institutional practice.
48. The number of work hours performed during clinical experiences and graduate assistantship experiences must be in compliance with institutional and Federal policy.
49. The program must include scholarly experiences designed to improve student critical thinking and decision making.
50. The athletic training faculty must be actively involved in advising students in scholarly experiences by providing mentorship and serving as role models.
51. Sufficient time and opportunity must be provided within the program for students CAATE Post-Professional Degree Standards 11 to engage in scholarly experiences.
52. The program's scholarly experiences should lead to dissemination of new knowledge in athletic training.
53. The program's scholarly experiences should emphasize clinical research designed to inform athletic training practice.
54. The program must include advanced clinical practice experiences designed to improve the students' ability to provide patient care.
55. Sufficient time and opportunity must be provided within the program for students to engage in advanced clinical practice experiences.
56. Assessment of student achievement of the advanced clinical practice outcomes and objectives must be accounted for via formal academic coursework.
57. Students must receive formal and informal feedback regarding their advanced clinical practice performance at regular intervals.
58. The advanced clinical practice experiences must integrate the Post-Professional Core Competencies.

59. There must be an individualized advanced clinical education plan (individual goals and/or objectives) for each student to improve the students' ability to provide patient care. Financial Resources

60. The program must receive adequate, equitable, and annually available resources necessary to meet the program's needs based on the program's size and documented mission and outcomes. Funding must be commensurate with other comparable health care programs. If no such similar program exists at the institution, then benchmark with health care programs at peer institutions. Facilities and Instructional Resources

61. The classroom and laboratory space must be sufficient to deliver the curriculum and must be available for exclusive use during normally scheduled class times.

62. The number and quality of instructional aids must meet the needs of the program.

63. The equipment and supplies needed to instruct students in the required program content must be available for formal instruction, practice, and clinical education.

64. Library and other Information Sources: Students must have reasonable access to the information resources needed to adequately prepare them for advanced practice and to support the Post-Professional Core Competencies. This includes current electronic or print editions of books, periodicals, and other reference materials and tools related to the program outcomes.

65. Offices must be provided for program staff and faculty on a consistent basis to allow program administration and confidential student counseling. Operational Policies and Fair Practices

66. Program Admission, Retention and Advertisement: standards and criteria must be identified and publicly accessible.

67. Student, faculty recruitment, student admission, and faculty employment practices must be non-discriminatory with respect to race, color, creed, religion, ethnic origin, age, sex, disability, sexual orientation, or other unlawful basis.

68. The program must assure equal opportunity for classroom instruction, clinical CAATE Post – Professional Degree Standards 12 (revised January 16, 2017) EFFECTIVE JULY 1, 2017 - New Standard: The institution must demonstrate honesty and integrity in all interactions that pertain to the athletic training program. experience, and other educational activities for all students in the program.

69. All program documents must use accurate terminology of the profession and program offered (e.g., BOC certification, accreditation status, and the program title of athletic training).

70. Academic tuition, fees, and other required program specific costs incurred by the student must be publicly accessible in official institutional documents.

71. Full financial responsibilities and benefits (e.g., tuition and fees, tuition waivers, financial aid, graduate assistantships) must be provided to the student, in writing, prior to the student committing to attend the institution. Program Description and Requirements
72. Athletic training faculty and students must have a clearly written and consistent description of the academic curriculum available to them.
73. Athletic training faculty and students must have a clearly written and consistent description of the academic curriculum available to them. This description must include program mission, outcomes and objectives.
74. Athletic training faculty and students must have a clearly written and consistent description of the academic curriculum available to them. This description must include curriculum and course sequence.
75. Athletic training faculty and students must have a clearly written and consistent description of the academic curriculum available to them. This description must include program requirements for completion of the degree.
76. The institution must have a published procedure available for processing student and faculty grievances.
77. Policies and processes for student withdrawal and for refund of tuition and fees must be published in official institutional publications or other announced information sources and made available to applicants.
78. Policies and procedures governing the award of available funding for scholarships administered by the program must be accessible by eligible students. Student Records
79. Program must maintain appropriate student records demonstrating progression through the curriculum.
80. Program must maintain appropriate student records. These records, at a minimum, must include program admission application and supporting documents.
81. Program must maintain appropriate student records. These records, at a minimum, must include remediation and disciplinary actions (when applicable).
82. Program must maintain appropriate student records. These records, at a minimum, must include advanced clinical practice experiences.
83. Student records must be stored in a secure location(s), either electronic or in print, and be accessible to only designated program personnel.

CAATE Post –Professional Degree Standards 13 Clarification effective November 30, 2015:

Inherent in any Standards that pertain to establishing policy is the assumption that the programs must also abide by those policies. Failure to do so will be cited as non-compliant with the associated Standard.

CAATE Post –Professional Degree Standards 14 Glossary:

Advanced clinical practice: the practice of athletic training at a level which requires substantial theoretical knowledge in athletic training and proficient clinical utilization of this knowledge in practice.

Adapted from: https://www.ncsbn.org/1986_Position_Paper_on_Advanced_Clinical_Nursing_Practice.pdf

Affiliation agreement: formal, written document signed by administrative personnel, who have the authority to act on behalf of the institution or affiliate, from the sponsoring institution and affiliated site. This agreement defines the roles and responsibilities of the host site, the affiliate, and the student. Same as the memorandum of understanding.

Appropriate administrative authority: Individuals identified by the host institution and, when applicable, the affiliate who have been authorized to enter an agreement on behalf of the institution or affiliate. The individuals having appropriate administrative authority may vary based on the nature of the agreement.

Aspirational Standards: Standards denoted by the verb “should” are Aspirational Standards. In contrast to Compliance Standards, Aspirational Standards are not required to ensure minimum educational quality. Instead, Aspirational Standards are provided in instances where the CAATE feels that it is important to note a desired state beyond the minimum required for accreditation compliance. Aspirational Standards are only recommendations and are NOT utilized to determine program compliance and are NOT used to make accreditation decisions. However, Aspirational Standards are important and any non-compliance with an Aspirational Standard must be justified.

Assessment plan: See Comprehensive Assessment Plan

Clinical site: A physical area where clinical education occurs.

Compliance Standards: Compliance Standards represent the minimum education standards for quality that are required to demonstrate accreditation compliance. Accreditation decisions are only made based upon program compliance with Compliance Standards.

Comprehensive Assessment Plan: The process of identifying program outcomes, collecting relevant data, and analyzing those data, then making a judgment on the efficacy of the program in meeting its goals and objectives. When applicable, remedial or corrective changes are made in the program.

Course/coursework: Courses involve classroom (didactic), laboratory, and clinical learning experience.

Degree: The award conferred by the college or university that indicates the level of education (masters or doctorate) that the student has successfully completed in athletic training.

CAATE Post –Professional Degree Standards 15

Faculty: An individual who has full faculty status, rights, responsibilities, privileges, and full college voting rights as defined by institution policy and that are consistent with similar positions at the institution necessary to provide appropriate program representation in institutional decisions.

Additional faculty are defined as follows:

Core Faculty: Administrative or teaching faculty devoted to the program that has full faculty status, rights, responsibilities, privileges, and full college voting rights as defined by the institution. This person is appointed to teach athletic training courses, advise and mentor students in the AT program. At minimum, the core faculty must include the Program Director and one (1) additional faculty member. Core faculty report to and are evaluated and assigned responsibilities exclusively by the administrator (Chair or Dean) of the academic unit in which the program is housed.

Associated Faculty: Individual(s) with a split appointment between the program and another institutional entity (e.g., athletics, another program, or another institutional department). These faculty members may be evaluated and assigned responsibilities by multiple different supervisors.

Adjunct Faculty: Individual contracted to provide course instruction on a full-course or partial-course basis, but whose primary employment is elsewhere inside or outside the institution. Adjunct faculty may be paid or unpaid.

Fees: Institutional charges incurred by the student other than tuition and excluding room and board.

Goals: The primary or desired results needed to meet an outcome. These are usually larger and longer term than objectives.

Health Care Professional: Athletic Trainer, Chiropractor, Dentist, Registered Dietician, Emergency Medical Technician, Nurse Practitioner, Nutritionist, Paramedic, Occupational Therapist, Optometrist, Orthotist, Physician (MD/DO), Pharmacist, Physical Therapist, Physician Assistant, Podiatrist, Prosthetist, Psychologist, Registered Nurse or Social Worker who hold a current active state or national practice credential and/or certification in the discipline and whose discipline provides direct patient care in a field that has direct relevancy to the practice and discipline of Athletic Training. These individuals may or may not hold formal appointments to the instructional faculty.

Higher education accrediting agency: An organization that evaluates post-secondary educational institutions.

Institutional Aggregate data: Institutional aggregate data must include, but is not limited to: retention rate, graduation rates, transfer-out rates, graduation rates for students receiving athletically related student aid, transfer-out rates for students receiving athletically related

CAATE Post –Professional Degree Standards 16 student aid, job placement for graduates, job placement rates for graduates, graduate and professional education placement for graduates.

Laboratory: A setting where students practice skills on a simulated patient (i.e., role playing) in a controlled environment.

Medical director: The physician who serves as a resource regarding the program's medical content. There is no requirement that the medical director participates in the clinical delivery of the program.

Memorandum of understanding (MOU): Similar to an affiliation agreement, but tends not to include legally-binding language or intent.

Must: A verb used to denote that a standard is a Compliance Standard that is required to ensure minimal educational quality.

Objectives: Sub-goals required to meet the larger goal. Generally objectives are more focused and shorter-term than the overriding goal.

Outcome (program): The quantification of the program's ability to meet its published mission. The outcome is generally formed by multiple goals and objectives. For example, based on the

evaluation of the goals associated with the outcomes, each outcome may be measured as "met," "partially met," or "not met."

Outcome assessment instruments: A collection of documents used to measure the program's progress towards meeting its published outcomes. Examples of outcomes assessment instruments include course evaluation forms, employer surveys, alumni surveys, student evaluation forms, preceptor evaluation forms, and so on.

Physician: A medical doctor (MD) or doctor of osteopathic medicine (DO) who possesses the appropriate state licensure.

Preceptor: A certified/licensed professional who teaches and/or evaluates students in a clinical setting using an actual patient base.

Professional development: Continuing education opportunities and professional enhancement, typically is offered through the participation in symposia, conferences, and in-services that allow for the continuation of eligibility for professional credentials.

Program Director: The full-time faculty member of the host institution and a BOC Certified Athletic Trainer responsible for the implementation, delivery, and administration of the AT program.

CAATE Post –Professional Degree Standards 17 Release time (reassigned work load): A reduction in the base teaching load to allow for the administrative functions associated with functioning as the Program Director and/or clinical coordinator.

Required program content: Required content that encompasses the Post-Professional Core Competencies and content necessary to achieve all aspects of the program's (didactic, scholarly experience, advanced clinical practice) outcomes.

Retention: Matriculating through the AT program culminating in graduation.

Retention rate: A time-based measure of the number of students who are enrolled at the start of the period being studied (e.g., 1 year, 4 years) versus those enrolled at the end of the period.

Retention rate is calculated as: number at end/number at start * 100.

Scholarly experiences: Any activity that promotes the intellectual and creative process and involves generating, transmitting, applying, and preserving knowledge for the benefit of external audiences.

Should: A verb used to denote that a standard is an Aspirational Standard that is recommended to achieve a desired state that is beyond minimal educational quality.

Similar academic institution (Syn: Peer institution): Institutions of comparable size, academic mission, and other criteria used for comparing metrics. Many institutions publish a list of peer institutions.

Sponsoring institution: The college or university that offers the academic program and awards the degree associated with the athletic training program.

Stakeholder: Those who are affected by the program's outcomes. Examples include the public, employers, the Board of Certification, Inc., and alumni.

EXHIBIT I

CAATE EDUCATION COMPETENCIES

Athletic Training Education Competencies

Knowledge and Skills- Evidence Based-Practice

EBP-1. Define evidence-based practice as it relates to athletic training clinical practice.

EBP-2. Explain the role of evidence in the clinical decision making process.

EBP-3. Describe and differentiate the types of quantitative and qualitative research, research components, and levels of research evidence.

EBP-4. Describe a systematic approach (eg, five step approach) to create and answer a clinical question through review and application of existing research.

EBP-5. Develop a relevant clinical question using a predefined question format (eg, PICO= Patients, Intervention, Comparison, Outcomes; PIO = Patients, Intervention, Outcomes).

EBP-6. Describe and contrast research and literature resources including databases and online critical appraisal libraries that can be used for conducting clinically-relevant searches.

EBP-7. Conduct a literature search using a clinical question relevant to athletic training practice using search techniques (eg, Boolean search, Medical Subject Headings) and resources appropriate for a specific clinical question.

EBP-8. Describe the differences between narrative reviews, systematic reviews, and meta-analyses.

EBP-9. Use standard criteria or developed scales (eg, Physiotherapy Evidence Database Scale [PEDro], Oxford Centre for Evidence Based Medicine Scale) to critically appraise the structure, rigor, and overall quality of research studies.

EBP-10. Determine the effectiveness and efficacy of an athletic training intervention utilizing evidence-based practice concepts.

EBP-11. Explain the theoretical foundation of clinical outcomes assessment (eg, disablement, health-related quality of life) and describe common methods of outcomes assessment in athletic training clinical practice (generic, disease-specific, region-specific, and dimension-specific outcomes instruments).

EBP-12. Describe the types of outcomes measures for clinical practice (patient-based and clinician-based) as well as types of evidence that are gathered through outcomes assessment (patient-oriented evidence versus disease-oriented evidence).

EBP-13. Understand the methods of assessing patient status and progress (eg, global rating of change, minimal clinically important difference, minimal detectable difference) with clinical outcomes assessments.

EBP-14. Apply and interpret clinical outcomes to assess patient status, progress, and change using psychometrically sound outcome instruments.

Prevention and Health Promotion (PHP)

Athletic trainers develop and implement strategies and programs to prevent the incidence and/or severity of injuries and illnesses and optimize their clients'/patients' overall health and quality of life. These strategies and programs also incorporate the importance of and physical activity in maintaining a healthy lifestyle and in preventing chronic disease (eg, diabetes, obesity,

cardiovascular disease).

Knowledge and Skills-Prevention and Health Promotion

PHP-1. Describe the concepts (eg, case definitions, incidence versus prevalence, exposure assessment, rates) and uses of injury and illness surveillance relevant to athletic training.

PHP-2. Identify and describe measures used to monitor injury prevention strategies (eg, injury rates and risks, relative risks, odds ratios, risk differences, numbers needed to treat/harm).

PHP-3. Identify modifiable/non-modifiable risk factors and mechanisms for injury and illness.

PHP-4. Explain how the effectiveness of a prevention strategy can be assessed using clinical outcomes, surveillance, or evaluation data.

PHP-5. Explain the precautions and risk factors associated with physical activity in persons with common congenital and acquired abnormalities, disabilities, and diseases.

PHP-6. Summarize the epidemiology data related to the risk of injury and illness associated with participation in physical activity.

Prevention Strategies and Procedures

PHP-7. Implement disinfectant procedures to prevent the spread of infectious diseases and to comply with Occupational Safety and Health Administration (OSHA) and other federal regulations.

PHP-8. Identify the necessary components to include in a preparticipation physical examination as recommended by contemporary guidelines (eg, American Heart Association, American Academy of Pediatrics Council on Sports Medicine & Fitness).

PHP-9. Explain the role of the preparticipation physical exam in identifying conditions that might predispose the athlete to injury or illness.

PHP-10. Explain the principles of the body's thermoregulatory mechanisms as they relate to heat gain and heat loss.

PHP-11. Explain the principles of environmental illness prevention programs to include acclimation and conditioning, fluid and electrolyte replacement requirements, proper practice and competition attire, hydration status, and environmental assessment (eg, sling psychrometer, wet bulb globe temperatures [WBGT], heat index guidelines).

PHP-12. Summarize current practice guidelines related to physical activity during extreme weather conditions (eg, heat, cold, lightning, wind).

PHP-13. Obtain and interpret environmental data (web bulb globe temperature [WBGT], sling psychrometer, lightning detection devices) to make clinical decisions regarding the scheduling, type, and duration of physical activity.

PHP-14. Assess weight loss and hydration status using weight charts, urine color charts, or specific gravity measurements to determine an individual's ability to participate in physical activity in a hot, humid environment.

PHP-15. Use a glucometer to monitor blood glucose levels, determine participation status, and make referral decisions.

PHP-16. Use a peak-flow meter to monitor a patient's asthma symptoms, determine participation status, and make referral decisions.

PHP-17. Explain the etiology and prevention guidelines associated with the leading causes of sudden death during physical activity, including but not limited to:

PHP-17a. Cardiac arrhythmia or arrest

PHP-17b. Asthma

PHP-17c. Traumatic brain injury

PHP-17d. Exertional heat stroke

PHP-17e. Hyponatremia

PHP-17f. Exertional sickling

PHP-17g. Anaphylactic shock

PHP-17h. Cervical spine injury

PHP-17i. Lightning strike

PHP-18. Explain strategies for communicating with coaches, athletes, parents, administrators, and other relevant personnel regarding potentially dangerous conditions related to the environment, field, or playing surfaces.

PHP-19. Instruct clients/patients in the basic principles of ergonomics and their relationship to the prevention of illness and injury.

Protective Equipment and Prophylactic Procedures

PHP-20. Summarize the basic principles associated with the design, construction, fit, maintenance, and reconditioning of protective equipment, including the rules and regulations established by the associations that govern its use.

PHP-21. Summarize the principles and concepts related to the fabrication, modification, and appropriate application or use of orthotics and other dynamic and static splints.

PHP-22. Fit standard protective equipment following manufacturers' guidelines.

PHP-23. Apply preventive taping and wrapping procedures, splints, braces, and other special protective devices.

Fitness/Wellness

PHP-24. Summarize the general principles of health maintenance and personal hygiene, including skin care, dental hygiene, sanitation, immunizations, avoidance of infectious and contagious diseases, diet, rest, exercise, and weight control.

PHP-25. Describe the role of exercise in maintaining a healthy lifestyle and preventing chronic disease.

PHP-26. Identify and describe the standard tests, test equipment, and testing protocols that are used for measuring fitness, body composition, posture, flexibility, muscular strength, power, speed, agility, and endurance.

PHP-27. Compare and contrast the various types of flexibility, strength training, and cardiovascular conditioning programs to include expected outcomes, safety precautions, hazards, and contraindications.

PHP-28. Administer and interpret fitness tests to assess a client's/patient's physical status and readiness for physical activity.

PHP-29. Explain the basic concepts and practice of fitness and wellness screening.

PHP-30. Design a fitness program to meet the individual needs of a client/patient based on the results of standard fitness assessments and wellness screening.

PHP-31. Instruct a client/patient regarding fitness exercises and the use of muscle strengthening equipment to include correction or modification of inappropriate, unsafe, or dangerous lifting techniques.

General Nutrition Concepts

PHP-32. Describe the role of nutrition in enhancing performance, preventing injury or illness, and maintaining a healthy lifestyle.

PHP-33. Educate clients/patients on the importance of healthy eating, regular exercise, and general preventative strategies for improving or maintaining health and quality of life.

PHP-34. Describe contemporary nutritional intake recommendations and explain how these recommendations can be used in performing a basic dietary analysis and providing appropriate general dietary recommendations.

PHP-35. Describe the proper intake, sources of, and effects of micro- and macronutrients on performance, health, and disease.

PHP-36. Describe current guidelines for proper hydration and explain the consequences of improper fluid/electrolyte replacement.

PHP-37. Identify, analyze, and utilize the essential components of food labels to determine the content, quality, and appropriateness of food products.

PHP-38. Describe nutritional principles that apply to tissue growth and repair.

PHP-39. Describe changes in dietary requirements that occur as a result of changes in an individual's health, age, and activity level.

PHP-40. Explain the physiologic principles and time factors associated with the design and planning of pre-activity and recovery meals/snacks and hydration practices.

PHP-41. Identify the foods and fluids that are most appropriate for pre-activity, activity, and recovery meals/snacks.

Weight Management and Body Composition

PHP-42. Explain how changes in the type and intensity of physical activity influence the energy and nutritional demands placed on the client/patient.

PHP-43. Describe the principles and methods of body composition assessment to assess a client's/patient's health status and to monitor changes related to weight management, strength training, injury, disordered eating, menstrual status, and/or bone density status.

PHP-44. Assess body composition by validated techniques.

PHP-45. Describe contemporary weight management methods and strategies needed to support activities of daily life and physical activity.

Disordered Eating and Eating Disorders

PHP-46. Identify and describe the signs, symptoms, physiological, and psychological responses of clients/patients with disordered eating or eating disorders.

PHP-47. Describe the method of appropriate management and referral for clients/patients with disordered eating or eating disorders in a manner consistent with current practice guidelines.

Performance Enhancing and Recreational Supplements and Drugs

PHP-48. Explain the known usage patterns, general effects, and short- and long-term adverse effects for the commonly used dietary supplements, performance enhancing drugs, and recreational drugs.

PHP-49. Identify which therapeutic drugs, supplements, and performance-enhancing substances are banned by sport and/or workplace organizations in order to properly advise clients/patients about possible disqualification and other consequences.

Clinical Examination and Diagnosis (CE)

Athletic trainers must possess strong clinical examination skills in order to accurately diagnosis and effectively treat their patients. The clinical examination is an ongoing process, repeated to some extent each time the patient is treated. The development of these skills requires a thorough understanding of anatomy, physiology, and biomechanics. Athletic trainers must also apply clinical-reasoning skills throughout the physical examination process in order to assimilate data, select the appropriate assessment tests, and formulate a differential diagnosis.

The competencies identified in this section should be considered in the context of the competencies identified in other domains. For example, the knowledge and skills associated with acute care and therapeutic interventions, while applicable for this domain, are not repeated here.

The clinical examination process is comprehensive and may include a review of the systems and regions identified below based on the patient's relevant history and examination findings.

Consideration must also be given to the patient's behavioral and cognitive status and history; competencies addressing this content area are included elsewhere.

Systems and Regions

- a. Musculoskeletal
- b. Integumentary
- c. Neurological
- d. Cardiovascular
- e. Endocrine
- f. Pulmonary
- g. Gastrointestinal
- h. Hepatobiliary
- i. Immune
- j. Renal and urogenital
- k. The face, including maxillofacial region and mouth
- l. Eye, ear, nose, and throat

Knowledge and Skills

CE-1. Describe the normal structures and interrelated functions of the body systems.

CE-2. Describe the normal anatomical, systemic, and physiological changes associated with the lifespan.

CE-3. Identify the common congenital and acquired risk factors and causes of musculoskeletal injuries and common illnesses that may influence physical activity in pediatric, adolescent, adult, and aging populations.

- CE-4.** Describe the principles and concepts of body movement, including normal osteokinematics and arthrokinematics.
- CE-5.** Describe the influence of pathomechanics on function.
- CE-6.** Describe the basic principles of diagnostic imaging and testing and their role in the diagnostic process.
- CE-7.** Identify the patient's participation restrictions (disabilities) and activity limitations (functional limitations) to determine the impact of the condition on the patient's life.
- CE-8.** Explain the role and importance of functional outcome measures in clinical practice and patient health-related quality of life.
- CE-9.** Identify functional and patient-centered quality of life outcome measures appropriate for use in athletic training practice.
- CE-10.** Explain diagnostic accuracy concepts including reliability, sensitivity, specificity, likelihood ratios, prediction values, and pretest and post-test probabilities in the selection and interpretation of physical examination and diagnostic procedures.
- CE-11.** Explain the creation of clinical prediction rules in the diagnosis and prognosis of various clinical conditions.
- CE-12.** Apply clinical prediction rules (eg, Ottawa Ankle Rules) during clinical examination procedures.
- CE-13.** Obtain a thorough medical history that includes the pertinent past medical history, underlying systemic disease, use of medications, the patient's perceived pain, and the history and course of the present condition.
- CE-14.** Differentiate between an initial injury evaluation and follow-up/reassessment as a means to evaluate the efficacy of the patient's treatment/rehabilitation program, and make modifications to the patient's program as needed.
- CE-15.** Demonstrate the ability to modify the diagnostic examination process according to the demands of the situation and patient responses.
- CE-16.** Recognize the signs and symptoms of catastrophic and emergent conditions and demonstrate appropriate referral decisions.
- CE-17.** Use clinical reasoning skills to formulate an appropriate clinical diagnosis for common illness/disease and orthopedic injuries/conditions.
- CE-18.** Incorporate the concept of differential diagnosis into the examination process.
- CE-19.** Determine criteria and make decisions regarding return to activity and/or sports participation based on the patient's current status.
- CE-20.** Use standard techniques and procedures for the clinical examination of common injuries, conditions, illnesses, and diseases including, but not limited to:
- CE-20a.** history taking
 - CE-20b.** inspection/observation
 - CE-20c.** palpation
 - CE-20d.** functional assessment
 - CE-20e.** selective tissue testing techniques / special tests
 - CE-20f.** neurological assessments (sensory, motor, reflexes, balance, cognitive function)
 - CE-20g.** respiratory assessments (auscultation, percussion, respirations, peak-flow)
 - CE-20h.** circulatory assessments (pulse, blood pressure, auscultation)
 - CE-20i.** abdominal assessments (percussion, palpation, auscultation)
 - CE-20j.** other clinical assessments (otoscope, urinalysis, glucometer, temperature, ophthalmoscope).

CE-21. Assess and interpret findings from a physical examination that is based on the patient's clinical presentation. This exam can include:

CE-21a. Assessment of posture, gait, and movement patterns

CE-21b. Palpation

CE-21c. Muscle function assessment

CE-21d. Assessment of quantity and quality of osteokinematic joint motion

CE-21e. Capsular and ligamentous stress testing

CE-21f. Joint play (arthrokinematics)

CE-21g. Selective tissue examination techniques / special tests

CE-21h. Neurologic function (sensory, motor, reflexes, balance, cognition)

CE-21i. Cardiovascular function (including differentiation between normal and abnormal heart sounds, blood pressure, and heart rate)

CE-21j. Pulmonary function (including differentiation between normal breath sounds, percussion sounds, number and characteristics of respirations, peak expiratory flow)

CE-21k. Gastrointestinal function (including differentiation between normal and abnormal bowel sounds)

CE-21l. Genitourinary function (urinalysis)

CE-21m. Ocular function (vision, ophthalmoscope)

CE-21n. Function of the ear, nose, and throat (including otoscopic evaluation)

CE-21o. Dermatological assessment

CE-21p. Other assessments (glucometer, temperature)

CE-22. Determine when the findings of an examination warrant referral of the patient.

CE-23. Describe current setting-specific (eg, high school, college) and activity-specific rules and guidelines for managing injuries and illnesses.

Acute Care of Injuries and Illnesses (AC)

Athletic trainers are often present when injuries or other acute conditions occur or are the first healthcare professionals to evaluate a patient. For this reason, athletic trainers must be knowledgeable and skilled in the evaluation and immediate management of acute injuries and illnesses.

The competencies identified in this section should be considered in the context of the competencies identified in other domains. For example, the knowledge and skills associated with the process of examination and documentation, while applicable for this domain, are not repeated here. Likewise, the knowledge and skills associated with the administrative and risk management aspects of planning for an emergency injury/illness situation are not repeated here.

Knowledge and Skills

Planning

AC-1. Explain the legal, moral, and ethical parameters that define the athletic trainer's scope of acute and emergency care.

AC-2. Differentiate the roles and responsibilities of the athletic trainer from other pre-hospital care and hospital-based providers, including emergency medical technicians/paramedics, nurses, physician assistants, and physicians.

AC-3. Describe the hospital trauma level system and its role in the transportation decision-making process.

Examination

AC-4. Demonstrate the ability to perform scene, primary, and secondary surveys.

AC-5. Obtain a medical history appropriate for the patient's ability to respond.

AC-6. When appropriate, obtain and monitor signs of basic body functions including pulse, blood pressure, respiration, pulse oximetry, pain, and core temperature. Relate changes in vital signs to the patient's status.

AC-7. Differentiate between normal and abnormal physical findings (eg, pulse, blood pressure, heart and lung sounds, oxygen saturation, pain, core temperature) and the associated pathophysiology.

Immediate Emergent Management

AC-8. Explain the indications, guidelines, proper techniques, and necessary supplies for removing equipment and clothing in order to access the airway, evaluate and/or stabilize an athlete's injured body part.

AC-9. Differentiate the types of airway adjuncts (oropharyngeal airways [OPA], nasopharyngeal airways [NPA] and supraglottic airways [King LT-D or Combitube]) and their use in maintaining a patent airway in adult respiratory and/or cardiac arrest.

AC-10. Establish and maintain an airway, including the use of oro- and nasopharyngeal airways, and neutral spine alignment in an athlete with a suspected spine injury who may be wearing shoulder pads, a helmet with and without a face guard, or other protective equipment.

AC-11. Determine when suction for airway maintenance is indicated and use according to accepted practice protocols.

AC-12. Identify cases when rescue breathing, CPR, and/or AED use is indicated according to current accepted practice protocols.

AC-13. Utilize an automated external defibrillator (AED) according to current accepted practice protocols.

AC-14. Perform one- and two- person CPR on an infant, child and adult.

AC-15. Utilize a bag valve and pocket mask on a child and adult using supplemental oxygen.

AC-16. Explain the indications, application, and treatment parameters for supplemental oxygen administration for emergency situations.

AC-17. Administer supplemental oxygen with adjuncts (eg, non-rebreather mask, nasal cannula).

AC-18. Assess oxygen saturation using a pulse oximeter and interpret the results to guide decision making.

AC-19. Explain the proper procedures for managing external hemorrhage (eg, direct pressure, pressure points, tourniquets) and the rationale for use of each.

AC-20. Select and use the appropriate procedure for managing external hemorrhage.

- AC-21.** Explain aseptic or sterile techniques, approved sanitation methods, and universal precautions used in the cleaning, closure, and dressing of wounds.
- AC-22.** Select and use appropriate procedures for the cleaning, closure, and dressing of wounds, identifying when referral is necessary.
- AC-23.** Use cervical stabilization devices and techniques that are appropriate to the circumstances of an injury.
- AC-24.** Demonstrate proper positioning and immobilization of a patient with a suspected spinal cord injury.
- AC-25.** Perform patient transfer techniques for suspected head and spine injuries utilizing supine log roll, prone log roll with push, prone log roll with pull, and lift-and-slide techniques.
- AC-26.** Select the appropriate spine board, including long board or short board, and use appropriate immobilization techniques based on the circumstance of the patient's injury.
- AC-27.** Explain the role of core body temperature in differentiating between exertional heat stroke, hyponatremia, and head injury.
- AC-28.** Differentiate the different methods for assessing core body temperature.
- AC-29.** Assess core body temperature using a rectal probe.
- AC-30.** Explain the role of rapid full body cooling in the emergency management of exertional heat stroke.
- AC-31.** Assist the patient in the use of a nebulizer treatment for an asthmatic attack.
- AC-32.** Determine when use of a metered-dose inhaler is warranted based on a patient's condition.
- AC-33.** Instruct a patient in the use of a meter-dosed inhaler in the presence of asthma related bronchospasm.
- AC-34.** Explain the importance of monitoring a patient following a head injury, including the role of obtaining clearance from a physician before further patient participation.
- AC-35.** Demonstrate the use of an auto-injectable epinephrine in the management of allergic anaphylaxis. Decide when auto-injectable epinephrine use is warranted based on a patient's condition.
- AC-36.** Identify the signs, symptoms, interventions and, when appropriate, the return-to-participation criteria for:
- AC-36a.** sudden cardiac arrest
 - AC-36b.** brain injury including concussion, subdural and epidural hematomas, second impact syndrome and skull fracture
 - AC-36c.** cervical, thoracic, and lumbar spine trauma
 - AC-36d.** heat illness including heat cramps, heat exhaustion, exertional heat stroke, and hyponatremia
 - AC-36e.** exertional sickling associated with sickle cell trait
 - AC-36f.** rhabdomyolysis
 - AC-36g.** internal hemorrhage
 - AC-36h.** diabetic emergencies including hypoglycemia and ketoacidosis
 - AC-36i.** asthma attacks
 - AC-36j.** systemic allergic reaction, including anaphylactic shock
 - AC-36k.** epileptic and non-epileptic seizures
 - AC-36l.** shock
 - AC-36m.** hypothermia, frostbite

AC-36n. toxic drug overdoses
AC-36o. local allergic reaction

Immediate Musculoskeletal Management

AC-37. Select and apply appropriate splinting material to stabilize an injured body area.
AC-38. Apply appropriate immediate treatment to protect the injured area and minimize the effects of hypoxic and enzymatic injury.
AC-39. Select and implement the appropriate ambulatory aid based on the patient's injury and activity and participation restrictions.

Transportation

AC-40. Determine the proper transportation technique based on the patient's condition and findings of the immediate examination.
AC-41. Identify the criteria used in the decision-making process to transport the injured patient for further medical examination.
AC-42. Select and use the appropriate short-distance transportation methods, such as the log roll or lift and slide, for an injured patient in different situations.

Education

AC-36. Instruct the patient in home care and self-treatment plans for acute conditions.

Therapeutic Interventions (TI)

Athletic trainers assess the patient's status using clinician- and patient-oriented outcome measures. Based on this assessment and with consideration of the stage of healing and goals, a therapeutic intervention is designed to maximize the patient's participation and health-related quality of life. A broad range of interventions, methods, techniques, equipment, activities using body movement, and medications are incorporated into this domain. These interventions are designed to enhance function by identifying, remediating, and preventing impairments and activity restrictions

(functional limitations) to maximize participation. Rehabilitation is conducted in a wide variety of settings (eg, aquatic, clinic) with basic and contemporary equipment/modalities and on a wide range of patients with respect to age, overall health, and desired level of activity. Therapeutic interventions also include the use of prescription and nonprescription medications. For this reason, the athletic trainer needs to be knowledgeable about common prescription and nonprescription drug indications, adverse reactions, and interactions.

The competencies identified in this section should be considered in the context of the competencies identified in other content areas. For example, the knowledge and skills associated with the process of examination and documentation, while applicable for this content area, are not included here.

Therapeutic interventions include:

- Techniques to reduce pain
- Techniques to limit edema
- Techniques to restore joint mobility

- Techniques to restore muscle extensibility
- Techniques to restore neuromuscular function
- Exercises to improve strength, endurance, speed, and power
- Activities to improve balance, neuromuscular control, coordination, and agility
- Exercises to improve gait, posture, and body mechanics
- Exercises to improve cardiorespiratory fitness
- Functional exercises (eg, sports- or activity-specific)
- Exercises which comprise a home-based program
- Aquatic therapy
- Therapeutic modalities
 - superficial thermal agents (eg, hot pack, ice)
 - electrical stimulation
 - therapeutic ultrasound
 - diathermy
 - therapeutic low-level laser and light therapy
 - mechanical modalities
 - traction
 - intermittent compression
 - continuous passive motion
 - massage
 - biofeedback
- Therapeutic medications (as guided by applicable state and federal law)

Knowledge and Skills

Physical Rehabilitation and Therapeutic Modalities

TI-1. Describe and differentiate the physiological and pathophysiological responses to inflammatory and non-inflammatory conditions and the influence of these responses on the design, implementation, and progression of a therapeutic intervention.

TI-2. Compare and contrast contemporary theories of pain perception and pain modulation.

TI-3. Differentiate between palliative and primary pain-control interventions.

TI-4. Analyze the impact of immobilization, inactivity, and mobilization on the body systems (eg, cardiovascular, pulmonary, musculoskeletal) and injury response.

TI-5. Compare and contrast the variations in the physiological response to injury and healing across the lifespan.

TI-6. Describe common surgical techniques, including interpretation of operative reports, and any resulting precautions, contraindications, and comorbidities that impact the selection and progression of a therapeutic intervention program.

TI-7. Identify patient- and clinician-oriented outcomes measures commonly used to recommend activity level, make return to play decisions, and maximize patient outcomes and progress in the treatment plan.

TI-8. Explain the theory and principles relating to expected physiological response(s) during and following therapeutic interventions.

TI-9. Describe the laws of physics that (1) underlay the application of thermal, mechanical, electromagnetic, and acoustic energy to the body and (2) form the foundation for

the development of therapeutic interventions (eg, stress-strain, leverage, thermodynamics, energy transmission and attenuation, electricity).

TI-10. Integrate self-treatment into the intervention when appropriate, including instructing the patient regarding self-treatment plans.

TI-11. Design therapeutic interventions to meet specified treatment goals.

TI-11a. Assess the patient to identify indications, contraindications, and precautions applicable to the intended intervention.

TI-11b. Position and prepare the patient for various therapeutic interventions.

TI-11c. Describe the expected effects and potential adverse reactions to the patient.

TI-11d. Instruct the patient how to correctly perform rehabilitative exercises.

TI-11e. Apply the intervention, using parameters appropriate to the intended outcome.

TI-11f. Reassess the patient to determine the immediate impact of the intervention.

TI-12. Use the results of on-going clinical examinations to determine when a therapeutic intervention should be progressed, regressed or discontinued.

TI-13. Describe the relationship between the application of therapeutic modalities and the incorporation of active and passive exercise and/or manual therapies, including therapeutic massage, myofascial techniques, and muscle energy techniques.

TI-14. Describe the use of joint mobilization in pain reduction and restoration of joint mobility.

TI-15. Perform joint mobilization techniques as indicated by examination findings.

TI-16. Fabricate and apply taping, wrapping, supportive, and protective devices to facilitate return to function.

TI-17. Analyze gait and select appropriate instruction and correction strategies to facilitate safe progression to functional gait pattern.

TI-18. Explain the relationship between posture, biomechanics, and ergonomics and the need to address these components in a therapeutic intervention.

TI-19. Identify manufacturer, institutional, state, and/or federal standards that influence approval, operation, inspection, maintenance and safe application of therapeutic modalities and rehabilitation equipment.

TI-20. Inspect therapeutic equipment and the treatment environment for potential safety hazards.

Therapeutic Medications

TI-21. Explain the federal, state, and local laws, regulations and procedures for the proper storage, disposal, transportation, dispensing (administering where appropriate), and documentation associated with commonly used prescription and nonprescription medications.

TI-22. Identify and use appropriate pharmaceutical terminology for management of medications, inventory control, and reporting of pharmacological agents commonly used in an athletic training facility.

TI-23. Use an electronic drug resource to locate and identify indications, contraindications, precautions, and adverse reactions for common prescription and nonprescription medications.

TI-24. Explain the major concepts of pharmacokinetics and the influence that exercise might have on these processes.

TI-25. Explain the concepts related to bioavailability, half-life, and bioequivalence (including the relationship between generic and brand name drugs) and their relevance to the patient, the choice of medication, and the dosing schedule.

TI-26. Explain the pharmacodynamic principles of receptor theory, dose-response relationship, placebo effect, potency, and drug interactions as they relate to the mechanism of drug action and therapeutic effectiveness.

TI-27. Describe the common routes used to administer medications and their advantages and disadvantages.

TI-28. Properly assist and/or instruct the patient in the proper use, cleaning, and storage of drugs commonly delivered by metered dose inhalers, nebulizers, insulin pumps, or other parenteral routes as prescribed by the physician.

TI-29. Describe how common pharmacological agents influence pain and healing and their influence on various therapeutic interventions.

TI-30. Explain the general therapeutic strategy, including drug categories used for treatment, desired treatment outcomes, and typical duration of treatment, for the following common diseases and conditions: asthma, diabetes, hypertension, infections, depression, GERD, allergies, pain, inflammation, and the common cold.

TI-31. Optimize therapeutic outcomes by communicating with patients and/or appropriate healthcare professionals regarding compliance issues, drug interactions, adverse drug reactions, and sub-optimal therapy.

Psychosocial Strategies and Referral (PS)

Athletic trainers must be able to recognize clients/patients exhibiting abnormal social, emotional, and mental behaviors. Coupled with recognition is the ability to intervene and refer these individuals as necessary. Additionally, athletic trainers appreciate the role of mental health in injury and recovery and use interventions to optimize the connection between mental health and restoration of participation.

Knowledge and Skills

Theoretical Background

PS-1. Describe the basic principles of personality traits, trait anxiety, locus of control, intrinsic and extrinsic motivation, and patient and social environment interactions as they affect patient interactions.

PS-2. Explain the theoretical background of psychological and emotional responses to injury and forced inactivity (eg, cognitive appraisal model, stress response model).

PS-3. Describe how psychosocial considerations affect clinical decision-making related to return to activity or participation (eg, motivation, confidence).

PS-4. Summarize and demonstrate the basic processes of effective interpersonal and cross-cultural communication as it relates to interactions with patients and others involved in the healthcare of the patient.

PS-5. Summarize contemporary theory regarding educating patients of all ages and cultural backgrounds to effect behavioral change.

Psychosocial Strategies

PS-6. Explain the importance of educating patients, parents/guardians, and others regarding the condition in order to enhance the psychological and emotional well-being of the patient.

PS-7. Describe the psychological techniques (eg, goal setting, imagery, positive self-talk, relaxation/anxiety reduction) that the athletic trainer can use to motivate the patient during injury rehabilitation and return to activity processes.

PS-8. Describe psychological interventions (eg, goal setting, motivational techniques) that are used to facilitate a patient's physical, psychological, and return to activity needs.

PS-9. Describe the psychosocial factors that affect persistent pain sensation and perception (eg, emotional state, locus of control, psychodynamic issues, sociocultural factors, personal values and beliefs) and identify multidisciplinary approaches for assisting patients with persistent pain.

PS-10. Explain the impact of sociocultural issues that influence the nature and quality of healthcare received (eg, cultural competence, access to appropriate healthcare providers, uninsured/underinsured patients, insurance) and formulate and implement strategies to maximize client/patient outcomes.

Mental Health and Referral

PS-11. Describe the role of various mental healthcare providers (eg, psychiatrists, psychologists, counselors, social workers) that may comprise a mental health referral network.

PS-12. Identify and refer clients/patients in need of mental healthcare.

PS-13. Identify and describe the basic signs and symptoms of mental health disorders (eg, psychosis, neurosis; sub-clinical mood disturbances (eg, depression, anxiety); and personal/social conflict (eg, adjustment to injury, family problems, academic or emotional stress, personal assault or abuse, sexual assault or harassment) that may indicate the need for referral to a mental healthcare professional.

PS-14. Describe the psychological and sociocultural factors associated with common eating disorders.

PS-15. Identify the symptoms and clinical signs of substance misuse/abuse, the psychological and sociocultural factors associated with such misuse/abuse, its impact on an individual's health and physical performance, and the need for proper referral to a healthcare professional.

PS-16. Formulate a referral for an individual with a suspected mental health or substance abuse problem.

PS-17. Describe the psychological and emotional responses to a catastrophic event, the potential need for a psychological intervention and a referral plan for all parties affected by the event.

PS-18. Provide appropriate education regarding the condition and plan of care to the patient and appropriately discuss with others as needed and as appropriate to protect patient privacy.

Healthcare Administration (HA)

Athletic trainers function within the context of a complex healthcare system. Integral to this function is an understanding of risk management, healthcare delivery mechanisms, insurance, reimbursement, documentation, patient privacy, and facility management.

Knowledge and Skills

HA-1. Describe the role of the athletic trainer and the delivery of athletic training services within the context of the broader healthcare system.

HA-2. Describe the impact of organizational structure on the daily operations of a healthcare facility.

HA-3. Describe the role of strategic planning as a means to assess and promote organizational improvement.

HA-4. Describe the conceptual components of developing and implementing a basic business plan.

HA-5. Describe basic healthcare facility design for a safe and efficient clinical practice setting.

HA-6. Explain components of the budgeting process including: purchasing, requisition, bidding, request for proposal, inventory, profit and loss ratios, budget balancing, and return on investments.

HA-7. Assess the value of the services provided by an athletic trainer (eg, return on investment).

HA-8. Develop operational and capital budgets based on a supply inventory and needs assessment; including capital equipment, salaries and benefits, trending analysis, facility cost, and common expenses.

HA-9. Identify the components that comprise a comprehensive medical record.

HA-10. Identify and explain the statutes that regulate the privacy and security of medical records.

HA-11. Use contemporary documentation strategies to effectively communicate with patients, physicians, insurers, colleagues, administrators, and parents or family members.

HA-12. Use a comprehensive patient-file management system for appropriate chart documentation, risk management, outcomes, and billing.

HA-13. Define state and federal statutes that regulate employment practices.

HA-14. Describe principles of recruiting, selecting, hiring, and evaluating employees.

HA-15. Identify principles of recruiting, selecting, employing, and contracting with physicians and other medical and healthcare personnel in the deployment of healthcare services.

HA-16. Describe federal and state infection control regulations and guidelines, including universal precautions as mandated by the Occupational Safety and Health Administration (OSHA), for the prevention, exposure, and control of infectious diseases, and discuss how they apply to the practicing of athletic training.

HA-17. Identify key regulatory agencies that impact healthcare facilities, and describe their function in the regulation and overall delivery of healthcare.

HA-18. Describe the basic legal principles that apply to an athletic trainer's responsibilities.

HA-19. Identify components of a risk management plan to include security, fire, electrical and equipment safety, emergency preparedness, and hazardous chemicals.

HA-20. Create a risk management plan and develop associated policies and procedures to guide the operation of athletic training services within a healthcare facility to

include issues related to security, fire, electrical and equipment safety, emergency preparedness, and hazardous chemicals.

HA-21. Develop comprehensive, venue-specific emergency action plans for the care of acutely injured or ill individuals.

HA-22. Develop specific plans of care for common potential emergent conditions (eg, asthma attack, diabetic emergency).

HA-23. Identify and explain the recommended or required components of a pre-participation examination based on appropriate authorities' rules, guidelines, and/or recommendations.

HA-24. Describe a plan to access appropriate medical assistance on disease control, notify medical authorities, and prevent disease epidemics.

HA-25. Describe common health insurance models, insurance contract negotiation, and the common benefits and exclusions identified within these models.

HA-26. Describe the criteria for selection, common features, specifications, and required documentation needed for secondary, excess accident, and catastrophic health insurance.

HA-27. Describe the concepts and procedures for revenue generation and reimbursement.

HA-28. Understand the role of and use diagnostic and procedural codes when documenting patient care.

HA-29. Explain typical administrative policies and procedures that govern first aid and emergency care.

HA-30. Describe the role and functions of various healthcare providers and protocols that govern the referral of patients to these professionals.

Professional Development and Responsibility (PD)

The provision of high quality patient care requires that the athletic trainer maintain current competence in the constantly changing world of healthcare. Athletic trainers must also embrace the need to practice within the limits of state and national regulation using moral and ethical judgment. As members of a broader healthcare community, athletic trainers work collaboratively with other healthcare providers and refer clients/patients when such referral is warranted.

Knowledge and Skills

PD-1. Summarize the athletic training profession's history and development and how current athletic training practice has been influenced by its past.

PD-2. Describe the role and function of the National Athletic Trainers' Association and its influence on the profession.

PD-3. Describe the role and function of the Board of Certification, the Commission on Accreditation of Athletic Training Education, and state regulatory boards.

PD-4. Explain the role and function of state athletic training practice acts and registration, licensure, and certification agencies including (1) basic legislative processes for the implementation of practice acts, (2) rationale for state regulations that govern the practice of athletic training, and (3) consequences of violating federal and state regulatory acts.

PD-5. Access, analyze, and differentiate between the essential documents of the national governing, credentialing and regulatory bodies, including, but not limited to, the

NATA Athletic Training Educational Competencies, the BOC Standards of Professional Practice, the NATA Code of Ethics, and the BOC Role Delineation Study/Practice Analysis.

PD-6. Explain the process of obtaining and maintaining necessary local, state, and national credentials for the practice of athletic training.

PD-7. Perform a self-assessment of professional competence and create a professional development plan to maintain necessary credentials and promote life-long learning strategies.

PD-8. Differentiate among the preparation, scopes of practice, and roles and responsibilities of healthcare providers and other professionals with whom athletic trainers interact.

PD-9. Specify when referral of a client/patient to another healthcare provider is warranted and formulate and implement strategies to facilitate that referral.

PD-10. Develop healthcare educational programming specific to the target audience (eg, clients/patients, healthcare personnel, administrators, parents, general public).

PD-11. Identify strategies to educate colleagues, students, patients, the public, and other healthcare professionals about the roles, responsibilities, academic preparation, and scope of practice of athletic trainers.

PD-12. Identify mechanisms by which athletic trainers influence state and federal healthcare regulation.

Clinical Integration Proficiencies (CIP)

The clinical integration proficiencies (CIPs) represent the synthesis and integration of knowledge, skills, and clinical decision-making into actual client/patient care. The CIPs have been reorganized into this section (rather than at the end of each content area) to reflect their global nature. For example, therapeutic interventions do not occur in isolation from physical assessment. In most cases, assessment of the CIPs should occur when the student is engaged in real client/patient care and may be necessarily assessed over multiple interactions with the same client/patient. In a few instances, assessment may require simulated scenarios, as certain circumstances may occur rarely but are nevertheless important to the well-prepared practitioner. The incorporation of evidence-based practice principles into care provided by athletic trainers is central to optimizing outcomes. Assessment of student competence in the CIPs should reflect the extent to which these principles are integrated. Assessment of students in the use of Foundational Behaviors in the context of real patient care should also occur.

Prevention & Health Promotion

CIP-1. Administer testing procedures to obtain baseline data regarding a client's/patient's level of general health (including nutritional habits, physical activity status, and body composition). Use this data to design, implement, evaluate, and modify a program specific to the performance and health goals of the patient. This will include instructing the patient in the proper performance of the activities, recognizing the warning signs and symptoms of potential injuries and illnesses that may occur, and explaining the role of exercise in maintaining overall health and the prevention of diseases. Incorporate contemporary behavioral change theory when educating clients/patients and associated individuals to affect health-related change. Refer to other medical and health professionals when appropriate.

CIP-2. Select, apply, evaluate, and modify appropriate standard protective equipment, taping, wrapping, bracing, padding, and other custom devices for the client/patient in order to prevent and/or minimize the risk of injury to the head, torso, spine, and extremities for safe participation in sport or other physical activity.

CIP-3. Develop, implement, and monitor prevention strategies for at-risk individuals (eg, persons with asthma or diabetes, persons with a previous history of heat illness, persons with sickle cell trait) and large groups to allow safe physical activity in a variety of conditions. This includes obtaining and interpreting data related to potentially hazardous environmental conditions, monitoring body functions (eg, blood glucose, peak expiratory flow, hydration status), and making the appropriate recommendations for individual safety and activity status.

Clinical Assessment & Diagnosis / Acute Care / Therapeutic Intervention

CIP-4. Perform a comprehensive clinical examination of a patient with an upper extremity, lower extremity, head, neck, thorax, and/or spine injury or condition. This exam should incorporate clinical reasoning in the selection of assessment procedures and interpretation of findings in order to formulate a differential diagnosis and/or diagnosis, determine underlying impairments, and identify activity limitations and participation restrictions. Based on the assessment data and consideration of the patient's goals, provide the appropriate initial care and establish overall treatment goals. Create and implement a therapeutic intervention that targets these treatment goals to include, as appropriate, therapeutic modalities, medications (with physician involvement as necessary), and rehabilitative techniques and procedures. Integrate and interpret various forms of standardized documentation including both patient-oriented and clinician-oriented outcomes measures to recommend activity level, make return to play decisions, and maximize patient outcomes and progress in the treatment plan.

CIP-5. Perform a comprehensive clinical examination of a patient with a common illness/condition that includes appropriate clinical reasoning in the selection of assessment procedures and interpretation of history and physical examination findings in order to formulate a differential diagnosis and/or diagnosis. Based on the history, physical examination, and patient goals, implement the appropriate treatment strategy to include medications (with physician involvement as necessary). Determine whether patient referral is needed, and identify potential restrictions in activities and participation. Formulate and communicate the appropriate return to activity protocol.

CIP-6. Clinically evaluate and manage a patient with an emergency injury or condition to include the assessment of vital signs and level of consciousness, activation of emergency action plan, secondary assessment, diagnosis, and provision of the appropriate emergency care (eg, CPR, AED, supplemental oxygen, airway adjunct, splinting, spinal stabilization, control of bleeding).

Psychosocial Strategies and Referral

CIP-7. Select and integrate appropriate psychosocial techniques into a patient's treatment or rehabilitation program to enhance rehabilitation adherence, return to play, and overall outcomes. This includes, but is not limited to, verbal motivation, goal setting, imagery, pain management, self-talk, and/or relaxation.

CIP-8. Demonstrate the ability to recognize and refer at-risk individuals and individuals with psychosocial disorders and/or mental health emergencies. As a member of the management team, develop an appropriate management plan (including recommendations for patient safety and activity status) that establishes a professional helping relationship with the patient, ensures interactive support and education, and encourages the athletic trainer's role of informed patient advocate in a manner consistent with current practice guidelines.

Healthcare Administration

CIP-9. Utilize documentation strategies to effectively communicate with patients, physicians, insurers, colleagues, administrators, and parents or family members while using appropriate terminology and complying with statutes that regulate privacy of medical records. This includes using a comprehensive patient-file management system (including diagnostic and procedural codes) for appropriate chart documentation, risk management, outcomes, and billing.

EXHIBIT J APPROVAL DOCUMENTATION

Graduate Studies Council Minutes January 24, 2018

The regular meeting of the Graduate Studies Council was called to order at 1:01 pm on January 24, 2018 by Dr. Brian Crawford.

Present: Sara Sweeney, Dr. Brian Crawford, Dr. Gerard NeCastro, Dr. Leann Elkins, Dr. Bill Childers, Dr. Catherine Monteroso, Dr. Robert Kreisberg, Dr. Gregory Chase, Dr. Joseph Horzempa, Dr. Keith Bell, Dr. Mike Turentine, Dr. Tom Michaud, Stephanie Meredith, Dr. Tammy McClain, Dr. Zack Loughman.
Absent: Martyna Matusiak and Dr. Matthew Harder.

New Business:

- Curriculum Changes - Motions were made and seconded on all AT courses and were unanimously approved.

Discussion: Dr. Kreisberg had concerns about the AT masters program putting strain on Biology faculty due to the prerequisite requirements of the the MSAT program. Dr. Crawford responded that WLU will have to hire faculty and lab equipment once the program is implemented as needed. Sara Sweeney also had concerns with the layout of course offerings with too many hours in the summer. Dr. Hanna agreed that the course offering layout would need to be slightly changed to not overload students on summer courses.

- Students having access to Sakai sites from previous courses - Discussion about keeping all graduate courses open in Sakai. Dr. Crawford will follow-up with the Office of Distance Learning.
- LiveText 2-yr access for grad students to gather accreditation data – By a show of hands it appeared that the Business Department were the only ones using this. Leann didn't think this was financially feasible for an 18-month program. Need to find a way to pay for without paying individually. Dr. Crawford stated that an institutional license of LiveText was being discussed by Cabinet and may be included in tuition next year for all students to eliminate students having to purchase it.
- Mission and Vision statement for graduate council – and individual program and vision – Needs to be developed. All Program Directors are asked to email Sara Sweeney for their individual programs.
- TAGS revival – Sara has a few GA students from each program. Faculty should encourage students to attend the Feb. 20 and April 17 programs. Lunchtime meetings would help attendance.
- Concurrent admission process – There are forms that need to be filled out and signed as Program Director or Dean for undergraduate students to take upper level grad courses. The procedure for this is located in the Graduate Catalog. This can be done and returned via email. There was also discussion about duplicate emails in apex roster reports and seeing multiple degrees in DegreeWorks. Sara will follow up with Barbara Long at WVNET about fixing this problem.

- Data Change request form – does not list any graduate concentrations – Sara will follow up with Scott Cook.
 - Discussion on the need for students to get a confirmation from Registrar's Office once a change had been made.
 - Graduation Deadline, too early for most programs – Students have to apply for graduation long before they are half way through their program. Forms need to be changed to eliminate late fees for students. We do not want to anger students as they are leaving the University. Sara check on possibly extending the deadline to apply for graduation for grad students only to July or August.
 - Graduate Culture – Sara asked what other graduate culture issues should she tackle? Dr. Kreisberg suggested dining hours. Dr. Childers mentioned that several of his students have not received their Financial Aid distributions for January and they have been in session for 2-3 weeks. Group discussion about ALL services (food, convenience store, Library, wellness center, writing center, etc) being available to graduate students. Maybe suggest staying open until 6:00pm. Concerns of hours outside of the undergraduate Fall and Spring semesters was discussed. Also discussion about graduate student housing – during the summer?
- Old Business:
- Graduate Faculty Policy 255 Revisions – This was tabled at the last meeting. Revisions to the policy need to be completed this semester. Dr. NeCastro suggested that: (1) a list of current graduate faculty; (2) date of hire; and (3) the council needs approved. Members were asked to email any suggestion and/or concerns prior to next meeting.

Important Dates:

January 29 – HLC visit with Grad Council for MSDH and MSCP @ 1:30 pm

Feb 21 – Next Graduate Council Meeting

Feb 21 – RECAP submission deadline – westliberty.edu/recap

March 19 & 20 – HLC Institutional Reaffirmation Visit

April 2 – Pre-registration for Fall

May 11 – Last day to apply for December 2018 Graduation without a late fee

Summer registration is now open

The meeting was adjourned at 2:24 pm by Sara Sweeney. The next general meeting will be on February 21, 2018 at 1:30 p.m.

**West Liberty University Faculty Senate
Minutes
January 30, 2018**

Senators present: Linda Cowan, Jeff Pfister (secretary) Gregory Chase, James Crumbacher, David Hanna, Hannah Harnar, Ryan Koenig, Darrin Cox, Aaron Harper, Dominique Hoche, Corey Reigel (vice-chair), Peter Staffel, Chad Kuhns, Fuhua Chen, Jon Serra (chair), Mohamed Youssef

Absent members: Michael Aulick, Brian Fencil, Aaron Huffman, Matthew Zdilla

Administrators, Representatives, and Honored Guests: Stephen Greiner (President)

Brian Crawford, (Provost), Sylvia Hawranick-Senften (ACF Representative), James Haizlett, (BOG Representative)

Senate was called to order by the Senate Chair, Jon Serra at 3:32 p.m. in Campbell Hall, room 304.

Announcement

- Next Senate meeting will be held Tuesday, February 20th.
- Senate members were reminded to sign-in using the attendance sheet provided.

President Greiner:

- Enrollment – West Liberty is experiencing the 3rd continuous semester of positive enrollment. While pleased with the report, President Greiner cautions that projections show West Virginia to have a smaller population in the future; therefore it will be difficult for this trend to continue.

- Budget – President Greiner reported that the Governor has recommended a raise. However the State's portion of the allocated funds will only be 0.25% and the University would have to come up with the remaining funds. Currently it is not yet known how the University would make up the difference.

- Legislation - SB 111, Concealed Carry – Faculty Senate Chairs from universities across West Virginia are discussing the proposed language. President Greiner advised Chair Serra that it would be likely that he get a phone call from another institution to discuss policy.

- Questions from floor – No Questions.

Provost Crawford:

- Accreditation – The site visit for the MA Clinical Psychology concluded. Official results should become available during summer

- Higher Learning Commission – an accreditation team will arrive Monday, March 19th and Tuesday, March 20th. Faculty is reminded that they will have an open session with the team.

- Faculty Salary Policy – Faculty should expect the policy to be posted in late spring for comment.

- Questions from the floor – 1) heating issues in the Elbin library. Discussion followed.

Faculty Senate Minutes -- January 30, 2018

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Sylvia Hawranick-Senften – ACF Representative:

- SB 111, Forming Open and Robust University Minds Act – the purpose of this bill is to enact the exercise of First Amendment rights on public university campuses with regard to forms of assembly, protests, speech, and petitions.

- PEIA – GO365 continues to receive lots of public concerns. \$25 premium fee for those who don't earn the minimum number of points should be removed.

- Questions from the floor – 1) SB111, target harassment. Discussion followed.

Jim Haizlett – BOG Representative:

- Next BOG meetings – January 31st and April 4th

- Policy 34 – was officially rescinded by BOG. This former policy (34) will now become an “administrative procedure” rather than a Board Policy, similar to West Virginia University and Ohio State. Jim suggested since this no longer is a BOG policy, he will no longer serve to facilitate dialogue. He would like to see the new procedures available for advance review.

Chad Kuhns – General Studies:

- 2-year data reports – Faculty teaching a General Studies should have received an email from Sarah West. This email was only sent to the faculty members who teach a General Studies course and have used LiveText for assessment.

- Assessment of Program Level data – Program Level rubric will be selected for capstone or upper level -- committee is considering make proposal for policy which will possibly be posted later in the Spring

- Questions from the floor – 1) Concern of dissemination of assessment data released publically about a faculty individual data. 2) SOL norming, 3) Data trends. Discussion followed.

Aaron Harper – Academic Policies Report:

- Academic Dishonesty Procedure Proposal – the current policy and types of academic dishonesty are being reviewed. Graduate programs and special programs are recommended to have their own policy.

- Questions from the floor – Discussion Followed.

Darrin Cox – Finance Report:

- Faculty Salary – committee is looking at compression and reviewing suggestions for salary equity.

- Faculty Workload – Senator Cox reminded Senate that the current performance measurement tool of “Significant, Significant, Reasonable” was initiated when the teaching load was 12 credits.

Discussion continued following committee reports.

Faculty Senate Minutes -- January 30, 2018

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Dominique Hoche – Personnel Policies Report:

- Volunteers – an announcement will be sent to recruit committee members. Anyone interested should contact Dominique directly.

- Questions from the floor – no questions.

Ryan Koenig – HE 300, Nutrition and Physical Fitness proposal:

- Background – Add HE 300, Nutrition and Physical Fitness to Group 6 in the Perceptions and Cultures category of General Studies. This addition will provide students another option in Group 6 (HE 250 - Intro. to Health). HE 300 seeks to connect self and cultural awareness through knowledge of nutrition and physical fitness.

- Motion – Ryan Koenig made the motion to add HE300 to General Studies, Corey Reigel seconded motion. Discussion – 1) Prerequisites. 2) Numbering of a 300 has the perception of an upper level course.

- Motion Amended – Per floor discussion, the course numbering will be revised to receive a 200-level numbering.
- Vote – Faculty voted, Motion Amendment: 15 Yea, 0 Nay, 1 Abstention
- Discussion occurred.
- Vote – Faculty voted, Motion to add HE 300 to General Studies carries: 13 Yea, 2 Nay, 1 Abstention

David Hanna – MS, Athletic Training:

Background – The Commission on Accreditation of Athletic Training Education (CAATE) will no longer be offering accreditation of BS programs in Athletic Training. Institutions across the State offering BS degrees in Athletic Training will be required to shift to a master's or doctoral level program or will lose accreditation. This MS degree proposal offers West Liberty an early entry into the advance degree field by integrating a 4+1 program.

- Motion – David Hanna made a motion to add Master in Science in Athletic Training, Linda Cowan seconded.
- Discussion occurred.
- Vote – Faculty voted, Motion: 15 Yea, 0 Nay, 2 Abstention

Discussion:

Faculty Workload – Senate Chair Serra reported that the topic of workload has been something talked about in recent years. The purpose of this topic is not to state that we are working, but to examine how performance is measured. Should this topic be examined in greater detail with other Institutions? Is this something that Senate should be examining? Senators are asked to bring the topic to their constituents.

Faculty Senate Minutes -- January 30, 2018

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Faculty Forum:

- Various topics were identified and discussed.

A motion to adjourn was made and seconded. The Senate adjourned at 5:35 p.m.

Respectfully Submitted,

Jeff Pfister, Senate Secretary

West Liberty University Board of Governors
Minutes
January 31, 2018

Attendance:

Jack Adams, Adam Croasmun, Les DeFelice, Cindy Fluharty, Jim Haizlett, Rich Lucas, Jim Stultz, Teresa Toriseva, Rhonda Tysk, Kris Williams

Unable to Attend:

Joe Carey, Patrick Ford

Administration/Faculty/Staff:

Scott Cook, Brian Crawford, Mary Ann Edwards, Steve Greiner, David Hanna, Diana Harto, Jason Koegler, Roberta Linger, John McCullough, Joe Montemurro, Gerard NeCastro, Ron Witt, Angie Zambito

I. Call to Order/Roll Call/Quorum and Mission Statement

Chair DeFelice called the meeting to order at 4:00 p.m. and a quorum was established.

II. Introductions

None.

III. Public Comment

None.

IV. Agenda Order

There were no changes to the agenda order.

V. Approval of Minutes*

A. Minutes of the Full Board November 29, 2017*

On motion by Rich Lucas and seconded by Jim Stultz, it was unanimously adopted by the West Liberty University Board of Governors to approve the minutes of the full Board of November 29, 2017.

B. Minutes of the Executive Committee January 24, 2018*

On motion by Jim Stultz and seconded by Cindy Fluharty, it was unanimously adopted by the West Liberty University Board of Governors to approve the minutes of the Executive Committee of January 24, 2018.

VI. Board Items for Approval*

A. Ashland, Athens, Meigs Counties, Ohio – Metro Rate

Mr. Cook distributed a map of current and proposed Ohio counties encompassed by the metro rate. It was noted that a metro rate proposal for the entire state of Ohio could be presented in the future.

On motion by Jack Adams and seconded by Rhonda Tysk, it was unanimously adopted by the West Liberty University Board of Governors to approve the new Metro Rate counties of Ashland, Athens, and Meigs, Ohio beginning with the 2018-19 academic year as stipulated.

B. Policy 34 – Nepotism – Employment of Relatives*

Ms. Harto is asking that Policy 34 – Nepotism-Employment of Relatives, be rescinded by the Board. Having heard from faculty and staff, along with conversations with the Executive

Committee of the Board, in the end it appears it does not need to be a policy required of the BOG. The policy should be rescinded and not replaced, but will be addressed as an operational/day-to-day policy. A discussion followed with regard to the issue. On motion by Jim Stultz and seconded by Adam Croasmun, it was unanimously adopted by the West Liberty University Board of Governors to approve rescinding Board of Governors Policy 34 – Nepotism – Employment of Relatives.

C. MS Athletic Training Proposal*

Dr. David Hanna noted that at the current BS level, the program has been in good standing as an undergraduate major for Athletic Training. Students continuing in this major need to be at least at a master's level. This is a bona fide health care major, with graduates working hand-in-hand with physicians, athletic teams, hospitals, physical therapy clinics, armed services, among others. They specialize in examination, evaluation, prevention and treatment of injuries, mainly orthopedic, and rehabilitation processes.

On motion by Cindy Fluharty and seconded by Rhonda Tysk, it was unanimously adopted by the West Liberty University Board of Governors to approve the proposal to add the new degree program Master of Science in Athletic Training to be offered within the College of Education and Human Performance.

VII. President's Report

Dr. Greiner noted that members should each have a copy of the updated Institutional Master Plan, University Deferred Maintenance Plan, and the Technology Plan.

A conference call was recently held with college/university presidents regarding current legislation, which would allow anyone with a concealed carry permit to carry firearms on campus. This legislation would supersede the BOG policy, and West Liberty would have no authority to stop individuals with a permit from carrying weapons on campus. This legislation is currently working its way through the state system.

The grand opening for the Downtown Center was held January 26th. The Foundation office is housed at this location, along with the Entrepreneurship Center to work with downtown businesses. A Community University class has already been held at the Center. Dr. Greiner thanked Rich Lucas for his role in getting this specific location for WLU.

For the first time, some money may be released from the State for some of WLU's capital projects. Savings from refinancing bonds will go to fund highest priority safety projects, which would be the replacement and repair of six elevators on campus.

The fleet management contract is almost complete, and vehicles have arrived on campus; we are currently waiting on sedans. This contract will help WLU financially, and employees won't have to

take their personal vehicles out and handle the associated paperwork to be reimbursed.

Discussions are taking place with Panhandle Cleaning & Restoration, owners of the apartment building at the foot of the hill next to Domino's Pizza. With 48 units, this agreement would be similar to that of UP I and UP II.

A lighting of the new fire pit in Alumni Park will be held next week with hot chocolate and snacks, followed by West Liberty Idol.

A recent agreement arranged by Dr. Miriam Roth Douglas will expand the study abroad program to Germany. Also, Dr. Joe Horzempa is a finalist for the second consecutive year for the West Virginia Professor of the Year award.

WLU athletes are national finalists for the 2018 NCAA Award of Excellence for recognition of community services. Head Volleyball Coach Kayla Mull, advisor to the WLU Student-Athlete Advisory Committee, was recognized for organizing a fundraiser in Moundsville. In the classroom, 93 of WLU's athletes have made the all-academic or Commissioner's Honor Roll, with football leading the way with 28 scholar athletes.

Jeannette Walls will be the Hughes Lecture Series speaker on March 22, 2018 at 7:00 p.m. in College Hall. Walls book "The Glass Castle" was recently made into a movie.

Dr. Greiner noted that he has been approached for the possible purchase of local property. Discussions will move forward and although price has not been discussed, the University is definitely interested in the property.

There have been ongoing discussions on a performance contract, possible bond issues, etc. The entire state is interested in the performance contract, and WLU is leading the way for such a contract.

VIII. Finance Report

Ms. Linger reported the budget status for the second half of FY18. Half-way through the year, revenue is trending well, having collected approximately 85% of budgeted revenue. Summer courses and the PA Program will have an additional assessment. The expense side has exactly half of payroll in for the year, running at 49%, which may increase with utilities and cold weather issues.

IX. Reports

A. Provost (Crawford)

Dr. Crawford thanked Board members who participated in the site visit for the MS in Dental Hygiene and MA in Clinical Psychology. We will know in a few months if the programs are recommended for approval. The next step would be submission to the U.S. Department of Education for their approval, with an anticipated start date of fall 2019.

Preparations continue for the upcoming overall HLC site visit on March 19 and 20, 2018. The argument is being completed; watch for invitations to participate as we complete the agenda. The BOG will most likely have an opportunity to meet with the site visitors.

Dr. Greiner recently signed an agreement with the WV School of Osteopathic Medicine in conjunction with WLU's new Master of Arts in Biology Program. A WLU student completing the proper paperwork and MA in Biology would be guaranteed admission to the Osteopathic School. Initially we will have five or six students participating, but anticipate 30 or 40 in a year or two.

B. Enrollment Update (Cook)

Mr. Cook distributed Fall 2017 and Spring 2018 enrollment statistics and reviewed with the group. High School enrollment will peak this year, but begin to decline next year.

C. Student Government (Croasmun)

Mr. Croasmun stated that he had attended the State Advisory Council in Huntington, WV; he will be traveling again in a few weeks. Four students graduated from Senate in December,

and those seats have been filled. A proposed Constitution change would amend Senate to 24 Senators, with three positions for veterans, an international student, and one more. The change will be voted on by the student body. Spring Fling has been booked at River City, and the SGA is looking into shuttles to campus for student safety. Spring Fling is a celebration held at the end of Greek week, the Friday of dead week. A bus trip has been planned for April 6, 7, and 8th to New York City. West Liberty Idol will start next Wednesday and be held every Wednesday in February. Mr. Croasmun concluded by thanking Dr. Greiner and the Board for their support.

X. Information Gathering

None.

XI. Possible Executive Session

None.

XII. Actions Emanating from Executive Session

None.

XIII. Next Meeting Date – Wednesday, April 4, 2018

XIV. Adjournment

On motion by Teresa Toriseva and seconded by Adam Croasmun, it was unanimously adopted by the West Liberty University Board of Governors to adjourn the meeting at 4:52 p.m.

Leslie DeFelice _____

Chair

James R. Stultz _____

Secretary

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Approval of Degree Programs at Out-of-State Location

INSTITUTION: Fairmont State University

RECOMMENDED RESOLUTION: *Resolved, That the West Virginia Higher Education Policy Commission approves Fairmont State University to partner with The American Campus in Mauritius, Africa to confer certain degrees.*

STAFF MEMBER: Corley Dennison

BACKGROUND:

Fairmont State University has entered into a Memorandum of Understanding (MOU) with The American Campus on the island of Mauritius, located off of the coast of Africa, to offer undergraduate degrees in Engineering Technology, Information Systems Management, Computer Science, Business Administration and Psychology as well as graduate programs at the master's level in Architecture and Business Administration.

Section 4.8 of Series 11, Procedural Rule, Submission of Proposals for Academic Programs at Public Regional Institutions and the Monitoring and Discontinuance of Existing Programs, reads:

“An institution planning to offer existing programs or courses at sites outside of West Virginia must have the approval of the appropriate out-of-state agency which regulates such offerings as well as the approval of the Commission.”

The Higher Learning Commission (HLC), the regional accrediting agency, has also informed Fairmont State University that approval must be granted by the West Virginia Higher Education Policy Commission prior to receiving approval from HLC.

Fairmont State plans to have an on-campus coordinator to serve as a liaison to the home campus and to support course delivery. Fairmont State University's president and provost plan to visit the campus twice-per-year to confer degrees and review campus operations. On site faculty members are to be hired under HLC guidelines for faculty credentials. At this time, there are no plans to send Fairmont faculty from the home campus to Mauritius. The University is to receive a flat fee for each credit hour generated by the satellite program.



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TO: Dr. Corley Dennison
Vice Chancellor for Academic Affairs - WVHEPC

FROM: Dr. Richard Harvey *RH*
Interim Provost and VP for Academic Affairs

DATE: October 19, 2018

Fairmont State University is seeking the consent and acknowledgment of the West Virginia Higher Education Policy Commission (WV HEPC) to offer certain degree programs through a partner institution, The American College (TAC) in Mauritius, Africa. Our regional accreditor, the Higher Learning Commission (HLC), requested documentation of WV HEPC support for this arrangement.

This request is the result of a Memorandum of Understanding (MOU) between Fairmont State University and The American Campus located in Mauritius. The principal goal of the MOU is to provide a framework for students attending The American Campus (TAC) in Mauritius to receive an American undergraduate degree under the supervision of and in cooperation with Fairmont State University. The degree will be delivered wholly by and through TAC in Mauritius. Students in the program will earn two degrees, one awarded by TAC and one by Fairmont State University. All faculty will have earned the required credentials to teach the program as prescribed under the prevailing standards of the HLC. TAC will hire the faculty on-site.

CURRICULAR CONTROL: Fairmont State will provide the program design and curriculum. Oversight of course management, learning objectives, course rigor, and assessment of student learning will be provided by Fairmont State. TAC is currently interested in the following Fairmont State undergraduate programs: Civil Engineering Technology, Information Systems Management, Computer Science, Business Administration, and Psychology. TAC is also interested in the following graduate programs: Master of Architecture, and Master of Business Administration.

FACULTY: TAC will select, hire, and train the faculty following the guidelines provided by Fairmont State University and established by the HLC. All faculty at TAC must be fully credentialed under the prevailing faculty standards set for Fairmont State University by the HLC. Fairmont State will provide an on-ramping program for new TAC faculty. Except for the occasional faculty exchange, Fairmont State will not deploy its faculty to Mauritius. On-site faculty in Mauritius will have a Fairmont State coordinator to support their program delivery and to liaise them to the WV campus.

ON-SITE: The President and Provost of Fairmont State will visit Mauritius twice per academic year to meet with faculty and students and ensure the program requirements and outcomes are met. The President and Provost also plan to attend commencement to confer the Fairmont State degrees. As the program grows, Fairmont State may establish an on-site administrator in Mauritius.

BUSINESS MODEL: Fairmont State University will receive a flat fee for every student credit hour generated by this program in Mauritius.

EXPERTISE: The President has implemented successfully in another institution the partnership described above. It was approved by the HLC without reservation.

MEMORANDUM OF UNDERSTANDING

between

THE AMERICAN CAMPUS

and

FAIRMONT STATE UNIVERSITY

In recognition of their common interests in developing bilateral relations and being convinced that cooperation between institutions of higher learning contributes to cultural enrichment, scientific progress, and the consolidation of friendship between Mauritius, Africa and the United States of America, THE AMERICAN CAMPUS and FAIRMONT STATE UNIVERSITY have entered this MEMORANDUM OF UNDERSTANDING (MOU). No financial obligations are assumed under this agreement.

THE AMERICAN CAMPUS and FAIRMONT STATE UNIVERSITY have reached agreement on the following general areas of cooperation, subject to mutual consent and the availability of sufficient funding:

- Exchange of academic staff;
- Student exchange for research and study;
- Joint educational, training, and/or research activities;
- Exchange of information in fields of interest to both parties;
- Practical training in pre-identified or otherwise selected field sites;
- Cooperation on academic, administrative, or curriculum matters;
- Collaborative research projects, lectures, symposia, seminars, conferences, etc.;
- Exchange of academic materials and other information;
- Special short-term academic programs; and
- Joint ventures.

The terms of such mutual assistance and funding for any specific program and activity shall be mutually discussed, separately negotiated, and agreed upon in writing by both parties prior to the initiation of a particular program. The principal goal of this MOU is to provide a framework for students attending THE AMERICAN CAMPUS to receive an undergraduate and graduate education under the supervision of and in cooperation with FAIRMONT STATE UNIVERSITY. Students will be able to earn degrees from FAIRMONT STATE UNIVERSITY delivered at THE AMERICAN CAMPUS.

It is expected that activities taking place under this MOU will be initiated primarily by academic units within each university, and in coordination with their respective administrative units concerned with international activities. All activities developed under this MOU shall comply with the procedures, policies, and practices of each institution as well as the laws and regulations of the host country. Both institutions acknowledge that any exchange of faculty, administrators, or students from one institution to the other shall be subject to the entry and visa regulations of each country.

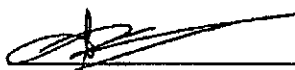
Both institutions subscribe to the policy of equal opportunity and do not discriminate on the basis of race, caste, sex, age, ethnicity, religion, or national origin. THE AMERICAN CAMPUS and FAIRMONT STATE UNIVERSITY shall abide by these principles in the administration of this agreement, and neither institution shall impose criteria for exchanges of scholars or students which would violate the principles of nondiscrimination.

Each institution will designate an individual to coordinate this program and all endeavors that may derive from it. For this purpose, THE AMERICAN CAMPUS designates Spalding Jugganaikloo, President, and FAIRMONT STATE UNIVERSITY designates Dr. Mirta Martin, President.

No amendment, consent, or waiver of terms of this MOU shall bind either party unless in writing and signed by all parties. Any such amendment, consent, or waiver shall be effective only in the specific instance and for the specified purpose given. The parties to this MOU, by the signatures below of their authorized representatives, acknowledge having read and understood this MOU and agree to be bound by its terms and conditions.


This MOU shall commence on the date of latest signature and be in effect for five years, at which time it shall be reviewed for possible extension. Either party may terminate this MOU by written notification signed by the appropriate official of the institution initiating the notice. However, such notification must be received by the other party at least six months prior to the effective date of termination.

THE AMERICAN CAMPUS
Royal Road, Belle Rose
Quatre Bornes
Mauritius, Africa


Spalding Jugganaikloo,
President

02/21/2018
Date

FAIRMONT STATE UNIVERSITY
1201 Locust Avenue
Fairmont, WV 26554
United States of America


Dr. Mirta Martin,
President

02/22/2018
Date



Ref: TEC/RGN/217 Vol 1

26 October 2016

The Managing Director
The American Campus
Rue du Savoir,
Building 51-5,
Cybercity Ebene,
Ebène

Dear Sir

Re: Registration of The American Campus and Accreditation of Programmes

A. Registration

We wish to inform you that your application for the registration of The American Campus as a private postsecondary educational institution has been approved by the Commission for a period of five years from 25 October 2016 to 31 October 2021.

You are kindly requested to collect the Certificate of Registration for The American Campus from our office. As per the regulations effective from 29 September 2009, the fee payable for the registration of a postsecondary educational institution is 10,000 MUR. Kindly note that the payment can be made either in cash or by an office cheque drawn in favour of the Tertiary Education Commission.

Upon receipt of this payment, we shall issue the Certificate of Registration for your institution.

B. Programme Accreditation

The following programmes have been granted provisional accreditation for three years from 25 October 2016 to 29 February 2020.

West Virginia Higher Education Policy Commission
Meeting of November 16, 2018

ITEM: Approval of Revisions to Series 21, Procedural Rule, Freshman Assessment and Placement Standards

INSTITUTIONS: All

RECOMMENDED RESOLUTION: *Resolved*, That the West Virginia Higher Education Policy Commission approves the revisions to Series 21, Procedural Rule, Freshmen Assessment and Placement Standards to be filed with the Secretary of State for the thirty-day public comment period and if no substantive comments are received that the Commission extends its final approval.

STAFF MEMBER: Corley Dennison

BACKGROUND:

Due to changing circumstances, it has become necessary to revise Series 21, Procedural Rule, Freshman Assessment and Placement Standards:

- The West Virginia Department of Education has signed a five-year contract with the College Board to allow the Scholastic Aptitude Test or SAT to become the 11th grade assessment exam. For decades, West Virginia has always been known as an ACT or American College Test state. This will now change as approximately 18,000 high school students will take the SAT test each year as compared to approximately 2,500 in 2017. A change in language is necessary to rewrite the policy from ACT priority to SAT priority.
- The College Board is introducing a revised ACCUPLACER exam in January 2019 entitled ACCUPLACER-Next Gen. The introduction of the new test requires a change in the placement scores.
- Revisions to delivery of developmental education requires a change in policy language. A multi-year Commission initiated effort has led to significant increases in college-level pass rates for math and English courses. Institutions are reducing or eliminating developmental, no-credit pre-requisite courses and replacing them with corequisite remediation, allowing the student to take college-level courses and be remediated at the same time. Pass rates for college-level math have increased 39 percent since 2012 and college-level English pass rates have increased 16.4 percent in the same time period.

The corequisite reform effort also requires institutions to develop policies to direct students into a math pathway appropriate for their particular field of study. Therefore, placement levels for math are now, depending on the pathway, variable at SAT math sub score 510 (ACT 19) for quantitative reasoning, SAT math sub score 520 (ACT 20) for a statistics pathway and SAT math sub score 530 (ACT 21) for algebra into calculus.

The placement score for SAT ERW (English, Reading, Writing) is now at 480 or ACT Verbal sub score of 18.

Uniform placement scores give high school students and their counselors a consistent benchmark for college readiness.

Language has been changed in the proposed version of Series 21 to allow institutions the flexibility to use multiple assessments in placing students out of remediation including factoring the high school GPA.

TITLE 133
PROCEDURAL RULE
WEST VIRGINIA HIGHER EDUCATION POLICY COMMISSION

SERIES 21
FRESHMAN ASSESSMENT AND PLACEMENT STANDARDS

§133-21-1. General.

1.1. Scope. This policy establishes freshman assessment and placement standards for institutions in assignment to initial credit-bearing courses in mathematics and English.

1.2. Authority. -- West Virginia Code §18B-1B-4.

1.3. Filing Date. -- ~~August 23, 2016.~~

1.4. Effective Date. -- ~~September 23, 2016.~~

1.5. Repeal of Former Rule. -- Repeals and replaces Title 133, Series 21 which had an effective date of ~~December 24, 2015.~~ September 23, 2016.

§133-21-2. Policy.

2.1. The policy, Freshman Assessment and Placement Standards, for students in West Virginia public colleges and universities was developed to assure the integrity of associate degrees, baccalaureate degrees, and certificate programs to increase the retention and graduation rates of students, and to encourage high school students to improve their academic preparation for college. The standards for freshman assessment and placement are designed to establish uniform procedures for the placement of students in credit-bearing courses in mathematics and English that can be applied toward an undergraduate academic degree.

~~2.2. Degree-seeking students in West Virginia public colleges and universities must demonstrate that they possess the minimum academic skills essential for success in their chosen program of study. Academic skill proficiency in mathematics, writing and reading is demonstrated by meeting established placement standards in mathematics, writing and reading. Students not satisfactorily demonstrating these skills must remediate deficiencies through successful completion of specific developmental education courses, co-requisite courses or other entry-level college credit courses that provide supplementary academic support programs or services.~~

~~2.32.~~ Full or part-time ~~degree-seeking~~ students identified as requiring remediation must enroll in the required ~~developmental education courses~~, co-requisite courses or other entry-level college courses with supplementary academic support ~~services~~ in the first year of enrollment.

~~2.4. Non-degree seeking students are exempt from these requirements. However, non-degree seeking students who change their academic status to degree-seeking are then subject to the developmental education placement standards and first term enrollment policies provided in this policy. Based on federal Title IV regulations, non-degree seeking students are not eligible to participate in federal financial aid programs.~~

~~2.5. All students must meet pre-requisites for college level credit courses for which they wish to enroll.~~

~~2.6. Beginning with the 2015-2016 academic year, the results of the comprehensive statewide assessment in grade 11 in English/Language Arts (ELA) and mathematics shall be used to determine if the high school student has met college and career readiness standards and is exempt from developmental education placement. If the student scores an achievement Level 3 in ELA and math on the West Virginia General Summative Assessment, that student is exempt from developmental education placement in West Virginia public higher education institutions.~~

§133-21-3. Definitions.

~~3.1. Developmental Education.~~

~~3.1.a. Developmental education programs and services commonly address academic preparedness, diagnostic assessment and placements, development of general and discipline specific learning strategies, and affective barriers to learning. When the course is offered as a discrete course, the developmental education course is a “pre-college” course and does not count toward a baccalaureate degree, an A.A. degree, an A.S. degree, or an A.A.S. degree or a certificate program. If the developmental skill deficiencies are addressed through an embedded or co-requisite approach with a college level entry course, the student can receive college credit for the course which will count toward graduation.~~

~~3.1.b. Strategies to address developmental skill deficiencies include, but are not limited to all forms of learning assistance, such as tutoring, mentoring, and supplemental instruction; personal, academic, and career counseling; academic advisement; and coursework.~~

~~3.21. Co-requisite Courses.~~

~~3.21.a. Co-requisite courses are credit-bearing courses that provide aligned academic support for the entry-level credit bearing course and are required as a component of the entry-level course. Co-requisite courses are designed for students who did not meet admission requirements for entry level math or English courses. Course content is the same as the traditional credit-bearing course but additional required attendance/instruction and/or participation in academic support structures is required for successful completion of the course. ~~Stretch courses are one example of co-requisite course delivery.~~~~

~~3.32. Academic Support Programs.~~

~~3.32.a. Academic support programs include, but are not limited to, modular course delivery; summer boot camps; extra class sessions; accelerated learning program (ALP) model; ~~paired courses~~; supplemental instruction; additional lab instruction; tutoring; and/or other instructional strategies which provide additional in-class or outside-class assistance and monitoring of student progress beyond that usually associated with entry-level college credit courses.~~

3.3. Remedial Education.

3.3.a. Remedial education addresses academic preparedness.

§133-21-4. Mathematics Placement Standards.

4.1. Students ~~may not enroll at any two-year or public four-year institution in West Virginia public colleges and universities in a mathematics course without required academic support which is designed to be applied toward a baccalaureate degree, an associate of arts (A.A.) degree, an associate of science (A.S.), an associate of applied science (A.A.S.) degree at a four-year college or university or an A.A., A.S. or A.A.S. degree or a certificate program at a community college unless the minimum score prescribed below is earned on one of the following assessments:~~ may enroll in a college-level, credit bearing math course without required academic support programs provided the following cut scores have been met:

<u>Assessment Test</u>	<u>Quantitative Reasoning</u>	<u>Elementary Statistics</u>	<u>College Algebra</u>
<u>SAT Math (taken March 2016 and later)</u>	<u>510</u>	<u>520</u>	<u>530</u>
<u>ACT Math</u>	<u>19</u>	<u>20</u>	<u>21</u>
<u>Next-Generation ACCUPLACER - Quantitative Reasoning, Algebra, and Statistics (QAS)</u>	<u>250</u>	<u>255</u>	<u>260</u>
<u>ACCUPLACER - Elementary Algebra</u>	<u>n/a</u>	<u>n/a</u>	<u>76</u>
<u>ACCUPLACER – college-level math</u>	<u>n/a</u>	<u>n/a</u>	<u>40</u>
<u>ACCUPLACER – arithmetic test</u>	<u>85</u>	<u>n/a</u>	<u>n/a</u>

*As these new tests are further verified, placement scores will be updated on the Commission website.

~~4.1.a. A score of 19 on the mathematics section of the American College Testing Program's (ACT) Assessment Test.~~

~~4.1.b. A score of 500 on the math section of the College Board's Scholastic Assessment (SAT).~~

~~4.1.c. An achievement level score of Level 3 on the mathematics portion of the statewide eleventh grade student assessment, the West Virginia General Summative Assessment.~~

~~4.1.d. A scaled score of 40 on the numerical test and 38 on the elementary algebra test of the American College Testing Program's Assessment of Skills for Successful Entry and Transfer (ASSET).~~

~~4.1.e. A scaled score of 85 on the arithmetic test for majors requiring quantitative reasoning courses or a scaled score of 76 on the elementary algebra test for majors requiring college algebra or a scaled score of 40 on the college-level math test of the College Board's ACCUPLACER Testing System.~~

~~4.1.f. Nationally-normed test scores, such as the Mathematical Association of America Basic Algebra test, with Chancellor's approval.~~

~~4.1.ga. Other assessments or end-of-course exams in mathematics as approved by the West Virginia Board of Education and/or the Chancellor.~~

4.2. ~~Students not meeting one of these standards must successfully complete required remediation. Institutions may require students who do not meet the standards to complete such courses at another institution or may design equivalent co-requisite coursework. Students not meeting the appropriate math pathway~~

placement score with an ACT math score of 18 or below (or SAT equivalent below 490) are placed into a college-level, credit-bearing courses with required academic support. Such courses could include a stretch course, a co-requisite course, an ALP class or other embedded course delivery. Baccalaureate institutions may place students in this placement range into other programs with the approval of the Higher Education Policy Commission Chancellor. Community and technical college institutions may place students in this placement range into other programs with the approval of the Community and Technical College System Chancellor. With Chancellor's permission, institutions can use multiple assessments including factoring the high school GPA.

4.3. A transfer student who has successfully completed remediation at the sending institution the developmental course or its equivalent, or other college level course that has met the developmental education deficiency per course design, may enroll in a credit bearing course in mathematics or transfer to another West Virginia state college or university and shall be deemed to have met the placement standard at the receiving institution and shall not be required to enroll in a developmental course or its equivalent at a West Virginia state college or university in mathematics. The assessment measure and score by which the student met the placement standard in mathematics shall be recorded on the student's transcript.

4.4. Based on WorkKeys profile requirements or other specific career skill requirements, institutions shall establish appropriate minimum placement standards for students enrolling in college level mathematics courses required in specifically identified degree or certificate programs. Students not meeting the minimum placement standard established by the institution must successfully complete required developmental (pre-college level) mathematics assistance programs. However, such students may also be placed in college level mathematics courses required in for the degree program that provide additional academic support programs to remediate the academic deficiency.

§133-21-5. English Composition Placement Standards.

5.1. Students ~~may not enroll~~ at any public two-year or four-year institution in West Virginia public colleges and universities may enroll in a college level credit bearing English course without required academic support programs provided the following cut scores are met. in an English composition course without required academic support which is designed to be applied toward a baccalaureate degree, an A.A. degree, an A.S. degree, or an A.A.S. degree at a four-year college or university or an A.A., A.S., or A.A.S. degree or certificate program at a community college unless the minimum score prescribed below is earned on one of the following assessments:

<u>Assessment Test</u>	<u>English Composition</u>
<u>SAT Evidence-Based Reading and Writing (taken March 2016 and later)</u>	<u>480</u>
<u>SAT Essay</u>	<u>13 (combined score)</u>
<u>ACT English</u>	<u>18</u>
<u>Next-Generation ACCUPLACER – Writing</u>	<u>250</u>

*As these new tests are further verified, placement scores will be updated on the Commission website.

5.1.a. ~~A score of 18 on the English section of the ACT.~~

5.1.b. ~~A score of 480 on the evidence based reading and writing section of the SAT.~~

~~5.1.c. An achievement level score of Level 3 on the English/language arts portion of the statewide eleventh grade student assessment, the West Virginia General Summative Assessment.~~

~~5.1.d. A scaled score of 38 on the writing skills test of the ASSET.~~

~~5.1.e. A scaled score of 88 on the Sentence Skills test of the College Board's ACCUPLACER Testing System.~~

5.1.f~~a~~. Satisfactory performance on a writing sample administered by each institution, with Chancellor's approval.

5.1.g~~b~~. Other assessments or end-of-course exams in English/language arts as approved by ~~the West Virginia Board of Education and/or~~ the Chancellor.

~~5.2. Students not meeting one of these standards must successfully complete required remediation. Institutions may require students who do not meet the standards to complete such courses at another institution or design equivalent co-requisite course work. Students not meeting the appropriate English pathway placement score with the ACT English score of 17 or below (or SAT equivalent score of 470 or below) are placed into a college-level, credit-bearing courses with required academic support. Such courses could include stretch courses, co-requisite courses, ALP or other embedded course delivery. Baccalaureate institutions may place students into other programs with approval from the Higher Education Policy Commission Chancellor. Community and Technical College institutions may place students into other programs with the approval of the Community and Technical College System Chancellor. With Chancellor's permission, institutions can use multiple assessments including factoring the high school GPA.~~

5.3. A transfer student who has successfully completed the remediation at the sending institution shall be deemed to have met the placement standard at the receiving institution. ~~developmental course or its equivalent, or other college-level course that has met the developmental education deficiency per course design may enroll in a credit-bearing course in English or transfer to another West Virginia state college or university and shall be deemed to have met the placement standard at the receiving institution and shall not be required to enroll in a developmental course or its equivalent at a West Virginia state college or university in English. The assessment measure and score by which the student met the placement standard in English shall be recorded on the student's transcript.~~

5.4. ~~Based on WorkKeys profile requirements or other specific career skill requirements, institutions shall establish appropriate minimum placement standards for students enrolling in college-level mathematics courses required in specifically identified degree or certificate programs. Students not meeting the minimum placement standard established by the institution must successfully complete required developmental (pre-college level) mathematics assistance programs. However, such students may also be placed in college-level mathematics courses required in for the degree program that provide additional academic support programs to remediate the academic deficiency.~~

§133-21-6. Reading.

6.1. Students scoring ~~17 on the reading section of the ACT, 23 or above on the reading test of the SAT, or 17 on the reading section of the ACT, 36 on the reading skills test of the ASSET, 30 percentile above on the~~

~~Nelson Denny Reading Test, or 79 on the Reading Comprehensive test of the College Board's ACCUPLACER Testing System will be considered to have met minimal reading skill requirements at those institutions which have developmental programs in reading.~~

Assessment Test	Reading
Next-Generation ACCUPLACER – Reading	252

*As these new tests are further verified, placement scores will be updated on the Commission website.

6.2. Institutions ~~in the state higher education system~~ are encouraged to provide assistance for students who do not meet the standard ~~and who are enrolled in a program leading to an associate or bachelor's degree.~~

6.3. A student having met the placement standard in reading who transfers to another West Virginia state college or university shall be deemed to have met the placement standard at the receiving institution. ~~and shall not be required to enroll in a developmental course in reading. The assessment measure and score by which the student met the placement standard in reading shall be recorded on the student's transcript.~~

§133-21-7. Determination of Placement.

~~7.1. In the event that a student has acquired placement scores via multiple assessments, the highest score(s) attained by the student is the score that guides the decision regarding developmental placement. For example, if the student's ACT score does not exempt the student from developmental education placement but the student scores a Level 3 on the West Virginia General Summative Assessment, that student is exempt from developmental education placement in any form.~~

7.21. Students ~~may~~ shall be exempt from ~~developmental remedial education~~ placement in any form if the student achieves the minimum required score on any of the approved assessment measures identified in Sections 4, 5, and 6 of this policy.

~~7.3. Institutions may utilize diagnostic testing to determine specific area(s) of weakness so that the student's specific area(s) of weakness can be remediated rather than requiring that student to complete an entire course.~~

7.42. Institutions shall develop and implement ~~developmental education delivery~~ strategies that allow students to progress through college-level, credit-bearing English and mathematics courses in the first year of enrollment at the institution. ~~These strategies may include, but are not limited to, stretch courses, co-requisite courses, co-requisite required course tutoring and assistance or other such academic support structure.~~

7.53. Each post-secondary institution shall file its policy on student academic placement for ~~developmental remedial~~ education deficiencies with the Chancellor's office.

~~7.6. The Compass test system and affiliated tests (Asset, Windows Compass, eCompass, Compass 5.0) is to be retired in the 2016 calendar year. However, a student's Compass scores are to be accepted by the institution into the future for as long a period of time as is acceptable by institutional policy.~~

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Approval of Revisions to Series 41, Procedural Rule, Health Sciences Service Program

INSTITUTIONS: All

RECOMMENDED RESOLUTION: *Resolved*, That the West Virginia Higher Education Policy Commission approves the revisions to Series 41, Procedural Rule, Health Sciences Service Program, to be filed with the Secretary of State for a thirty-day public comment period, and if no substantive comments are received, that the Commission extends its final approval.

STAFF MEMBER: Laura Boone

BACKGROUND:

The Health Sciences Service Program is a health professions recruitment incentive program administered by the Division of Health Sciences. Initially created in 1995, the program is established in West Virginia Code §18C-3-3 and is funded through an appropriation in the state budget.

The Commission makes awards to health professions students in 10 different disciplines enrolled at public or private West Virginia higher education institutions. In exchange for a monetary award, students agree to practice in a rural or underserved community immediately after graduation for two years full-time or four years part-time. Awards levels are either \$30,000 or \$15,000 depending on the student's discipline.

Under its present operation, the program is not need-based, and the Commission does not place any restrictions on how the recipients use the award. Students receive the award directly from the Commission in the final semester of their academic program. Although most students use the award to assist with loan repayment, some students use the award for other purposes such as assisting with relocation expenses upon conclusion of their academic program.

When the program was established, the Commission engaged an audit firm to evaluate whether the awards were taxable and received an opinion the awards were not taxable. Earlier this year, the Commission engaged its current auditing firm, Clifton Larson Allen, to reevaluate whether the awards were taxable. Clifton Larson Allen determined that federal case law related to taxation and recruitment incentive program awards had

evolved and that Health Sciences Service Program awards were taxable unless the recipient allocated the award toward loan repayment. In order to best comply with the auditor's recommendations, the Division of Health Sciences wishes to redesign the Health Sciences Service Program as a loan repayment program and require that participants direct their awards toward their educational debt. These changes do not require any revisions to the program statute, but they do require revisions to the procedural rule. The proposed changes include:

- Requiring all applicants to certify that they possess qualifying educational debt in an amount equal to or exceeding the award amount and defining what qualifies as educational debt.
- Delaying payment of the award amount until a participant completes his or her training and begins working at a rural or underserved site that qualifies for the service obligation.
- Requiring participants to submit documentation demonstrating they have allocated their award payments toward reducing their educational debt.

In addition to modifications related to the conversion into a loan repayment program, the proposed revisions to the procedural rule include:

- A revised definition of what nursing programs are eligible service obligation sites for nurse educators. This revision is in response to changes made during the 2018 Legislative Session related to oversight of nursing programs by the West Virginia Board of Examiners for Registered Professional Nurses.
- Revising and reordering multiple sections so that the rule reads more concisely and unnecessary repetition of certain provisions is eliminated.

Staff recommends approval of the revised Series 41 for filing with the Secretary of State for a thirty-day public comment period and, if no substantive comments are received, final filing of the rule with the Secretary of State.

**TITLE 133
PROCEDURAL RULE
WEST VIRGINIA HIGHER EDUCATION POLICY COMMISSION**

**SERIES 41
HEALTH SCIENCES SERVICE PROGRAM**

§133-41-1. General.

1.1. Scope. -- This rule promulgates policy and procedure regarding the establishment and operation of a Health Sciences Service Program.

1.2. Authority. -- West Virginia Code §18C-3-3.

1.3. Filing Date. -- ~~August 2, 2017.~~

1.4. Effective Date. -- ~~September 2, 2017.~~

1.5. Repeal of Former Rule. -- Repeals and replaces Title 133, Series 41, dated ~~February 13, 2015.~~

§133-41-2. Purpose.

2.1. The purpose of this program is to provide an incentive for fourth-year medical students to complete their training and provide primary care or emergency medicine in underserved areas of West Virginia, for other health professional students to complete their training and provide primary care in underserved areas of West Virginia, or for nursing program students to complete their training and teach in ~~associate or bachelor's degree nursing programs~~ a school of nursing in West Virginia. ~~"Primary care" means the health care services generally provided by family practice physicians, general practice physicians, general internists, geriatricians, obstetrician/gynecologists, general pediatricians, psychiatrists and mid-level providers, including nurse practitioners, nurse midwives, and physician assistants, dentists, pharmacists, physical therapists, doctoral clinical psychologists, and licensed independent clinical social workers.~~

2.1.a. "Primary care" means the health care services generally provided by family practice physicians, general practice physicians, general internists, geriatricians, obstetrician/gynecologists, general pediatricians, psychiatrists and mid-level providers, including nurse practitioners, nurse-midwives, physician assistants, dentists, pharmacists, physical therapists, doctoral clinical psychologists, and licensed independent clinical social workers, or other disciplines which may be identified as primary care by the Vice Chancellor for Health Sciences.

2.1.b. For medical students, the term "training" is defined as the completion of a degree program in allopathic or osteopathic medicine and includes the successful completion of a primary care or emergency medicine residency. For other applicants, the term "training" is defined as the entire degree program or certification program for advanced practice nurses (both master's and doctoral), physician assistants, dentists, pharmacists, physical therapists, doctoral clinical psychologists, licensed independent clinical social workers, or other disciplines identified as shortage fields by the Vice Chancellor for Health Sciences.

2.1.c. "Underserved" means any primary care health professional shortage area located in the state as determined by the Bureau for Public Health or any additional health professional shortage area determined by the Vice Chancellor for Health Sciences.

2.1.d. “School of nursing” means any associate, baccalaureate, master’s or doctoral level nursing program in West Virginia accredited by a national nursing accrediting agency recognized by the United States Department of Education.

2.2. Health Sciences Service Program funds are to be used to award fourth-year medical students at a West Virginia school of allopathic or osteopathic medicine who have been accepted in an accredited primary care or emergency medicine residency program in West Virginia; or to award students who are enrolled in the last academic year of an accredited education program at a West Virginia institution leading to a degree or certification as ~~a nurse practitioner, nurse midwife~~ an advanced practice nurse, physician assistant, dentist, pharmacist, physical therapist, doctoral clinical psychologist, licensed independent clinical social worker, or other disciplines identified as shortage fields by the Vice Chancellor for Health Sciences. Students who are enrolled in the last year of an accredited master’s or doctoral degree nursing program in West Virginia and intend to teach at ~~an associate or bachelor’s degree nursing program~~ a school of nursing in West Virginia also are eligible. Any funds repaid in lieu of practice in an underserved area of West Virginia or teaching at a school of nursing in West Virginia will be used to establish a revolving fund to make additional awards to eligible students.

§133-41-3. Eligibility Criteria.

3.1. In order to be eligible for ~~an award through the~~ a Health Sciences Service Program award, ~~applicants must meet the following minimum requirements:~~ each applicant must:

3.1.a. Certify that the applicant possesses educational debt in an amount equal to or exceeding the proposed award amount. “Educational debt” is defined as any government, commercial, or foundation loans for actual costs paid for tuition, reasonable education, and living expenses related to graduate or undergraduate education; and.

3.1.b. Be enrolled in the last academic year of an accredited education program at a West Virginia institution leading to a degree or certification as a physician, advanced practice nurse, physician assistant, dentist, pharmacist, physical therapist, doctoral clinical psychologist, licensed independent clinical social worker, or other disciplines identified as shortage fields by the Vice Chancellor for Health Sciences.; and

~~3.1.a. Be a fourth year medical student at a West Virginia school of allopathic or osteopathic medicine who has been accepted in an accredited primary care or emergency medicine residency program in West Virginia; or~~

~~3.1.b. Be enrolled in the last year of an accredited education program at a West Virginia institution leading to a degree or certification as a nurse practitioner, nurse midwife, physician assistant, dentist, pharmacist, physical therapist, doctoral clinical psychologist, licensed independent clinical social worker, or other disciplines identified as shortage fields by the Vice Chancellor for Health Sciences; and~~

~~3.1.c. Sign an agreement to practice full time for at least two (2) years or half time for at least four (4) years in an underserved area of West Virginia as determined by the West Virginia Bureau for Public Health or any additional health professional shortage area determined by the Vice Chancellor for Health Sciences; or~~

~~3.1.d. Be enrolled in the last year of an accredited master’s degree program in nursing in West Virginia; and~~

~~3.1.e. Sign an agreement to teach full time for at least two (2) years or half time for at least four (4) years at a qualifying associate or bachelor's degree nursing program in West Virginia as determined by the Vice Chancellor for Health Sciences.~~

~~3.2. Awarding preference will be given to West Virginia residents in accordance with the West Virginia Higher Education Policy Commission's (Commission) policy regarding "Residency Classification of Students for Admission and Fee Purposes."~~

§133-41-4. Application Process.

4.1. The applicant must apply to the Health Sciences Service Program using an application form approved by the Vice Chancellor for Health Sciences.

4.2. The Vice Chancellor for Health Sciences shall establish a deadline for applying for the Health Sciences Service Program. Applications must be complete and received by the deadline in order for the applicant to be considered for an award.

§133-41-5. Selection of Recipients.

5.1. Recipients will be selected from a pool of all applicants.

5.2. Awards shall be determined by the Vice Chancellor for Health Sciences with the advice of an advisory panel.

5.2.a. The advisory panel may be made up of the Division of Health Sciences Advisory Committee and such other members as may be added by the Vice Chancellor for Health Sciences from time to time.

5.3. In order to be selected to receive a Health Sciences Service Program award, an applicant must agree to practice primary care full-time for at least two (2) years or half-time for at least four (4) years in an underserved area of West Virginia as determined by the West Virginia Bureau for Public Health or any additional health professional shortage area determined by the Vice Chancellor for Health Sciences. or teach full time for at least two (2) years or half time for at least four (4) years at a qualifying associate or bachelor's degree nursing program in West Virginia as determined by the Vice Chancellor for Health Sciences. For advanced practice nursing only, applicants may agree to practice primary care or teach full-time for at least two (2) years or half-time for at least four (4) years at a school of nursing. A medical student applicant ~~only may~~ who intends to enter an emergency medicine residency only must agree to practice emergency medicine instead of primary care full-time for at least two (2) years or half-time for at least four (4) years in an underserved area of West Virginia as determined by the West Virginia Bureau for Public Health or any additional health professional shortage area determined by the Vice Chancellor for Health Sciences.

~~5.3.a. For medical students, the term "training" is defined as the completion of a degree program in allopathic or osteopathic medicine and includes the successful completion of a primary care or emergency medicine residency.~~

~~5.3.b. For other applicants, the term "training" is defined as the entire degree program or certification program for nurse midwives, nurse practitioners, physician assistants, master's degree nurses, dentists, pharmacists, physical therapists, doctoral clinical psychologists, licensed independent clinical social workers, or other disciplines which may be identified as shortage fields by the Vice Chancellor for Health Sciences.~~

5.4. Applications will be processed without regard to race, color, religion, sex, national origin, age, disability, genetic information, sexual orientation, gender identity, and veteran status.

5.5. In making awards, the Vice Chancellor for Health Sciences may consider such factors as the applicant's expressed commitment to primary care or teaching, his or her work or community service experiences in underserved areas of the State and the applicant's ties in West Virginia. For a medical student applicant only, the Vice Chancellor for Health Sciences also may consider the applicant's expressed commitment to emergency medicine.

5.6. The number of awards shall be determined by the availability of funds.

5.7. Nothing in this rule shall be construed as granting or guaranteeing any applicant any right to such an award.

5.8. Awarding preference will be given to West Virginia residents in accordance with the West Virginia Higher Education Policy Commission's (Commission) policy regarding "Residency Classification of Students for Admission and Fee Purposes."

§133-41-6. Award Provisions and Agreement.

6.1. The award amount shall be ~~a one-time award of~~ at least \$20,000 for medical and dental students and at least \$10,000 for all other eligible disciplines.

6.2. The award agreement shall contain the provision that the recipient will agree to practice full-time for at least two (2) years or half-time for at least four (4) years in an underserved area of West Virginia or teach full-time for at least two (2) years or half-time for at least four (4) years ~~in an associate or bachelor's degree nursing program in West Virginia~~ at a school of nursing in West Virginia.

6.3. The award agreement shall state that if a recipient fails to complete the service obligation and repayment of the award is required, that the granting of renewal of a license to practice in West Virginia or to reciprocal licensure in another state based upon licensure in West Virginia shall be contingent upon the recipient's complete repayment of the award and any accrued interest, court costs, or other costs associated with the debt.

6.3.a. No license, renewal or reciprocity shall be granted to persons whose payments are in arrears.

6.3.b. The appropriate regulatory board shall inform all states where a recipient has reciprocated based upon West Virginia licensure of any refusal to renew licensure in West Virginia as a result of failure to repay the award amount.

6.4. No award payments shall be disbursed before a properly completed and signed award agreement and documentation of qualifying educational debt have ~~has~~ been delivered by the recipient to the Vice Chancellor for Health Sciences or his or her designee.

6.5. A recipient who fails to complete his or her training or practice in an underserved area ~~of West Virginia~~ or fails to teach ~~in a qualifying nursing program in West Virginia~~ at a school of nursing as required by the award agreement is in breach of contract and is liable for repayment ~~of the total award plus interest~~ of the award as described in Section 9 of this rule.

~~6.5.a. Interest shall be at the rate of fifteen (15) percent. The Commission may, from time to time, change the rate of interest charged.~~

§133-41-7. Notification of Recipients and Fund Disbursement.

7.1. The Vice Chancellor for Health Sciences or his or her designee shall notify students of their selection to receive an award, ~~and~~.

7.2. ~~Shall disburse funds to those awarded.~~ The Vice Chancellor for Health Sciences shall disburse funds as follows upon the participant's completion of training:

~~7.2.a. Disbursements shall be made directly to medical students no later than sixty (60) days after they have been accepted into a primary care or emergency medicine residency program located in West Virginia and have returned a properly completed and signed award agreement to the Vice Chancellor for Health Sciences.~~

~~7.2.b. Disbursements shall be made directly to doctoral clinical psychology students no later than sixty (60) days after they have been accepted into a one (1) year internship program located in West Virginia and have returned a properly completed and signed award agreement to the Vice Chancellor for Health Sciences.~~

~~7.2.c. Disbursements shall be made directly to master's social work students no later than sixty (60) days after they have secured a two (2) year post graduate clinical field placement located in West Virginia and have returned a properly completed and signed award agreement to the Vice Chancellor for Health Sciences.~~

~~7.2.d. Disbursements to students in all other eligible disciplines shall be made directly to the student within sixty (60) days of the student returning a properly completed and signed award agreement to the Vice Chancellor for Health Sciences.~~

7.2.a. One-half of the award amount will be disbursed to the participant upon beginning practice or teaching at an approved practice site.

7.2.a.1. For physician participants who sign an employment contract during residency as described in Section 8.3 of this rule, the participant will receive the first half of the award amount within thirty (30) days of the Vice Chancellor for Health Sciences approving their employment contract for the service obligation.

7.2.b. The remaining half of the award will be disbursed as follows:

7.2.b.1. For participants completing the service obligation through full-time practice or teaching, the remaining half of the award will be disbursed to the participant after one year of practice or teaching at an approved site. In order to receive the second disbursement, the participant must provide documentation to the Vice Chancellor for Health Sciences that the participant allocated the entire initial award disbursement toward the participant's educational debt balance.

7.2.b.2. For participants completing the service obligation through half-time practice or teaching, the remaining half of the award will be disbursed to the participant after two years of practice or teaching at an approved site. In order to receive the second disbursement, the participant must provide documentation to the Vice Chancellor for Health Sciences that the participant allocated the entire initial award disbursement toward the participant's educational debt balance.

7.2.b.3. For physician participants who begin their full-time service obligation during residency, the remaining half of the award will be disbursed one year after the initial award disbursement. For physician participants who begin their half-time service obligation during residency, the remaining half of the award will be disbursed two years after the initial award disbursement. In order to receive the second disbursement, the participant must provide documentation to the Vice Chancellor for Health Sciences that the participant allocated the entire initial award disbursement toward the participant's educational debt balance.

§133-41-8. Fulfillment of Agreement.

8.1. To fulfill the award agreement, a participant must complete the service obligation and provide documentation demonstrating the participant has allocated the entire award towards his or her educational debt.

~~8.1.~~ 8.2. A recipient shall satisfy his or her obligation as stated in the recipient's award agreement by practicing primary care full- or half-time ~~in West Virginia as stated in the recipient's agreement~~ or by ~~full-time or~~ full- or half-time teaching at a ~~qualifying associate or bachelor's degree nursing program~~ school of nursing in West Virginia. A medical student recipient only who has completed an emergency medicine residency shall satisfy his or her obligation practicing emergency medicine full- or half-time in West Virginia.

~~8.1.a.~~ 8.2.a. Any recipient may petition the Vice Chancellor for Health Sciences to pursue additional post-graduate training beyond requirements contained in this section. The Vice Chancellor for Health Sciences shall use his or her discretion in approving such request.

8.2.b. At the time a recipient is ready to start his or her practice or teaching, he or she may request that additional areas be considered as underserved by the Vice Chancellor for Health Sciences. Among the criteria for consideration of such additional areas are factors such as a population shift which may create an additional underserved area or a location where a physician or other primary health care professional will retire or leave the area for other reasons.

8.2.c. With advance approval of the Vice Chancellor for Health Sciences, the recipient may serve his or her obligation concurrently with other service obligations.

~~8.2.~~ 8.3. A dentistry, ~~nurse practitioner, nurse midwifery~~ advanced practice nursing, pharmacy, physical therapy, or physician assistant recipient must begin practicing and completing the service obligation within six (6) months of graduation.

~~8.3.~~ 8.4. A medical student recipient must begin practicing and completing the service obligation within six (6) months of completing a qualifying primary care or emergency medicine ~~internship or~~ residency program in West Virginia.

~~8.3.a.~~ 8.4.a. Under certain circumstances during ~~the final two (2) years of~~ a medical student recipient's primary care or emergency medicine residency, the recipient may petition the Vice Chancellor for Health Sciences to allow his or her service obligation to begin during residency.

~~8.3.b.~~ 8.4.b. A recipient making such a request must possess an executed employment contract governing his or her post-residency employment. The practice site must be located in a qualifying underserved area ~~as designated by the West Virginia Bureau for Public Health or the Vice Chancellor for Health Sciences. The contract must be for full-time employment and~~ If the contract is for full-time

employment, it must require the recipient to work at the practice site for at least two (2) years upon completion of a qualifying primary care or emergency medicine residency program in West Virginia. If the contract is for half-time employment, it must require the recipient to work at the practice site for at least four (4) years upon completion of a qualifying primary care or emergency medicine residency program in West Virginia.

~~8.3.e.~~ 8.4.c. The Vice Chancellor for Health Sciences shall use his or her discretion in approving such a request. If the Vice Chancellor for Health Sciences approves such a request, the recipient may begin serving the service obligation from the ~~date of the Vice Chancellor's approval~~ execution date of the employment contract.

~~8.4.~~ 8.5. A nurse educator recipient must begin teaching and completing the service obligation within six (6) months of graduation.

~~8.5.~~ 8.6. A doctoral psychology recipient must begin practicing and completing the service obligation within six (6) months of completing his or her one (1) year internship required for attaining licensure as a doctoral clinical psychologist.

~~8.6.~~ 8.7. A master's level social work recipient must begin practicing and completing the service obligation within six (6) months of completing his or her two (2) year post-graduate clinical field placement required for attaining licensure as a licensed independent clinical social worker.

~~8.7. The West Virginia Bureau for Public Health or the Vice Chancellor for Health Sciences shall determine qualifying underserved areas. A current listing of underserved areas shall be made available, upon request, to recipients.~~

~~8.7.a. At the time a recipient is ready to start his or her practice or teaching, he or she may request that additional areas be considered as underserved by the Vice Chancellor for Health Sciences. Among the criteria for consideration of such additional areas are factors such as a population shift which may create an additional underserved area or a location where a physician or other primary health care professional will retire or leave the area for other reasons.~~

~~8.8. The Vice Chancellor for Health Sciences shall determine qualifying nursing programs, and all programs eligible for consideration must be accredited and located in West Virginia. A current listing of qualifying nursing programs shall be made available, upon request, to recipients.~~

~~8.9. To be eligible for credit toward obligation fulfillment, the applicant must first apply on an annual basis for and receive approval for practice in a specific designated underserved area or in a specific qualifying nursing program by the Vice Chancellor for Health Sciences.~~

~~8.9.a. With advance approval of the Vice Chancellor for Health Sciences, the recipient may serve his or her obligation concurrently with other service obligations.~~

~~8.9.b. If a recipient serves as much as twelve (12) consecutive months of his or her obligation but does not complete the full obligation, payment shall be figured on a pro rata basis. No credit shall be given for less than twelve (12) consecutive months of service.~~

§133-41-9. Repayment of Award in Lieu of Service.

9.1. In lieu of service, recipients must repay the full amount of funds received, plus interest, within one (1) year of the date they complete or terminate their training or one (1) year following the day they

are no longer practicing in an underserved area of West Virginia or teaching in a qualifying nursing program in West Virginia.

9.1.a. Payment may be made in one full payment or, with the approval of the Vice Chancellor for Health Sciences, arrangements may be made to repay the award over a one (1) year period.

9.1.b. If a recipient serves as much as twelve (12) months full-time practice or twenty-four (24) months of half time practice for his or her obligation but does not complete the full obligation, payment shall be figured on a pro rata basis. No credit shall be given for less than twelve (12) months of service of full-time practice or twenty-four (24) months of half-time practice.

9.2. Interest shall start to accrue on the day the recipient completes or terminates training or is no longer serving as stated in his or her award agreement.

9.2.a. Interest shall be at fifteen (15) percent. The Commission may, from time to time, change the rate of interest.

9.3. The recipient shall pay all attorney's fees and other costs and charges for the collection of any amount not paid when due.

§133-41-10. Cancellation and Waiver of Practice or Teaching Obligation.

10.1. In the event of the recipient's death, any unpaid indebtedness on his or her obligation shall be cancelled.

10.2. In the event of the permanent, total disability of the recipient, any unpaid indebtedness on his or her obligation shall be cancelled.

10.3. In certain cases such as partial disability, chronic disease, or other instances of extreme hardship, repayment of the award may be postponed or waived. The recipient must thoroughly document a request for such consideration. The Vice Chancellor for Health Sciences shall be the authority that may grant such postponement or waiver.

§133-41-11. Annual Certification of Practice or Teaching ~~and Credit Earned Toward Award Obligation Fulfillment.~~

11.1. To be eligible for credit toward the obligation, the recipient must have approval from the Vice Chancellor for Health Sciences to practice at a specific practice site in ~~a specific designated~~ an underserved area in West Virginia or teach in a specific qualifying nursing program in West Virginia. ~~In addition, when a recipient has completed twelve (12) months of practice or teaching, he or she must provide evidence of such practice.~~ Throughout the course of their participation in the program, participants must annually provide evidence of continued practice or teaching at an approved site. Such evidence shall be presented on a form provided by the Vice Chancellor for Health Sciences for this purpose. ~~The Vice Chancellor for Health Sciences shall be the authority that grants service obligation credit. The Vice Chancellor for Health Sciences shall notify the recipient of all credit which is granted.~~

11.2. Recipients shall be required to maintain ~~a current address~~ their current mailing address, email address, and phone number with the Vice Chancellor for Health Sciences until such time as the obligation has been satisfied through service or repayment.

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Presentation of 2018 Financial Aid Comprehensive Report

INSTITUTIONS: All

RECOMMENDED RESOLUTION: Information Item

STAFF MEMBER: Brian Weingart

BACKGROUND:

In accordance with West Virginia Code §18C-1-1e, this report represents the tenth annual Financial Aid Comprehensive Report. It contains (a) descriptions of and changes to West Virginia student financial aid programs, (b) policy recommendations for West Virginia aid programs, and (c) longitudinal data about recipients of state financial aid and outcomes of these recipients. The Financial Aid Comprehensive Report along with its two supplements on institutional aid at public institutions, and federal aid and student loans, together provide a comprehensive view of the principal sources of financial aid at West Virginia colleges and universities. It should be noted that the data presented are for the 2016-17 academic year; financial aid data for the 2017-18 academic year are currently being submitted by the institutions, and are not available at the time of publication.

PROGRAM CHANGES:

The Higher Education Student Financial Aid Advisory Board met three times in 2016-17 and made recommendations to the Commission regarding the academic criteria necessary to receive the Providing Real Opportunities to Maximize In-State Student Excellence (PROMISE) Scholarship, the PROMISE award amount, and the Higher Education Grant Program (HEGP) award structure.

The Commission expanded a statewide 2013-14 pilot project to share with public high schools student-level Free Application for Federal Student Aid (FAFSA) completion data in 2014-15 known as the FAFSA Data Share. This initiative allows authorized personnel in high schools to provide direct assistance and counseling to those students who have not filed the FAFSA or have an incomplete FAFSA. During 2016-17, the FAFSA Data Share was automated to make it easier for high school counselors to check the FAFSA completion status of their students and in 2017-18 TRIO organizations were given access to the FAFSA Data Share.

The PROMISE Scholarship has enjoyed several years of stability. The academic criteria necessary to receive the award has not changed since the 2007-08 academic year. However, the future fiscal outlook of the state requires the Higher Education Student

Financial Aid Advisory Board to review policy options going forward.

The HEGP has been able to increase the maximum award over the last six years from \$2,100 in 2011-12 to \$2,700 in 2018-19. While this is still below the maximum award amount of \$3,300 in 2009-10, the HEGP has been able to serve almost twice as many students each year since the award amount was decreased. For 2016-17, the HEGP was able to serve students with an Expected Family Contribution (EFC) of up to 10,000. There was also a five percent allocation for non-traditional first-time HEGP recipients, namely adults 25 years and older who filed their FAFSA by July 1, with a secondary deadline of July 31. The five percent allocation was able to serve all of the non-traditional students who met the criteria and filed by July 31, 2016. The HEGP has been able to maintain the award amount because the Legislature has maintained funding through 2018-19. State financial aid programs have been held harmless amid several years of state budget cuts.

The U.S. Department of Education made the 2019-20 FAFSA available via a mobile application to make the FAFSA more accessible to students and parents. The Commission will continue to conduct financial aid nights and FAFSA workshops to help students complete the FAFSA and maximize their scholarship and grant eligibility so that students can reduce the amount they have to borrow in student loans. The Commission has also developed informational videos on state financial aid programs to help increase awareness of state financial aid opportunities that students and parents can view online and on mobile devices.

DATA HIGHLIGHTS:

PROMISE Scholarship Program

- The number of PROMISE recipients increased from 10,034 in 2012-13 to 10,403 in 2016-17.
- The total cost of the scholarship increased from \$47,154,018 in 2012-13 to \$47,280,645 in 2016-17. Although the \$4,750 block award was implemented on January 1, 2010 for new scholars, pre-existing scholars still received full tuition and fees in 2012-13. From 2013-14 on, all scholars were subject to the new block award.
- Approximately 88 percent of PROMISE recipients in 2016-17 attended four-year public institutions. Of these, most attended either West Virginia University (44.4 percent) or Marshall University (19.2 percent).
- The percentage of the undergraduate enrollment at public institutions from each county who received the PROMISE Scholarship in 2016-17 was highest in Barbour County at 21.7 percent. Other counties with high proportions of PROMISE scholars among their students at public institutions were Pendleton County (20.1 percent) and Hancock County (18.9 percent).

- The proportion of first-time, full-time PROMISE scholars who graduate within four years increased from 47.4 percent to 50 percent between the 2010 and 2014 cohort years. The rates for all first-time, full-time freshmen increased from 26.6 to 31.4 percent during the same period.

Higher Education Grant Program (HEGP)

- The number of HEGP recipients decreased during the five-year period, from 19,308 in 2012-13 to 17,612 in 2016-17.
- The total amount awarded decreased from \$40.7 million in 2012-13 to \$40.2 million in 2016-17, a decrease of 1.3 percent.
- In 2016-17, 66.1 percent of HEGP recipients attended four-year public institutions. Of these, most students attended either West Virginia University (19 percent) or Marshall University (15.8 percent).
- McDowell County had the highest percentage (40.6 percent) of public institution undergraduate students who received an HEGP award in 2016-17. Other counties with high proportions of HEGP recipients among their students at public institutions were Wyoming County (37.2 percent), Barbour and Roane Counties (35.7 percent), and Mingo County (33.8 percent).
- The proportion of HEGP recipients who maintained the grant into the fall semester following their initial freshman enrollment was 51.7 percent for the 2012-13 fall cohort and increased to 55.6 percent for the 2016-17 fall cohort.
- The proportion of first-time, full-time HEGP recipients who graduated with a bachelor's degree within four years increased from 22.5 percent for the fall 2010 cohort to 26.1 percent for the 2014 cohort. Rates for all students increased from 26.6 percent to 31.4 percent during the same period.
- The six-year graduation rate for HEGP recipients was 44.1 percent for the 2010 cohort and 46.5 percent for the 2012 cohort.
- Two-, three-, and four-year associate degree rates were generally higher for HEGP students than for all students. This is noteworthy given that they are low-income students who historically have tended to have lower outcomes than their more affluent peers.

Higher Education Adult Part-Time Student (HEAPS) Grant Program

- The number of HEAPS recipients decreased from 3,122 in 2012-13 to 3,071 in 2016-17.

- The total amount of awards was approximately \$3 million in 2016-17, an increase of 1.4 percent over the roughly \$2.96 million disbursed in 2012-13.
- The average award increased from \$948 in 2012-13 to \$979 in 2016-17.
- In 2016-17, 45.8 percent of HEAPS Part-Time Enrollment Component recipients were enrolled at four-year public institutions; 47.2 percent at two-year public institutions; 2.2 percent at independent, non-profit institutions; and 4.8 percent at public vocational/technical centers.
- Nearly half of 2016-17 HEAPS recipients (43.1 percent) earned \$20,000 or less in income. About 25.8 percent earned between \$20,000 and \$40,000, while 31.1 percent earned over \$40,000. From 2012-13 to 2016-17, the proportion making \$40,000 or less has declined while the proportion making more than \$40,000 has increased.

Underwood-Smith Teacher Scholarship

- The number of Underwood-Smith Teacher Scholarship recipients has declined slightly from 40 in 2012-13 to 32 in 2016-17.
- The total amount of awards has decreased from \$182,500 in 2012-13 to \$155,577 in 2016-17.
- The average award in 2016-17 was \$4,737, an increase from the 2012-13 average of \$4,563.
- West Virginia University enrolled 10 Underwood-Smith Teacher Scholarship recipients in 2016-17, the most of any institution in the state.
- Out of the total 97 new Underwood-Smith Teacher Scholarship recipients from 2012 to 2016, 38.1 percent have canceled their obligation through teaching. An additional 17.5 percent are currently working to cancel their obligation through teaching.

Engineering, Science, and Technology Scholarship

- The number of recipients increased from 188 in 2012-13 to 221 in 2016-17.
- The total amount of awards increased from \$523,043 in 2012-13 to \$641,504 in 2016-17.
- The average award increased from \$2,784 to \$2,903.

- The largest numbers of Engineering, Science and Technology Scholarship recipients have historically come from Marshall University, West Virginia University, and WVU Institute of Technology.
- Out of the 440 new Engineering, Science and Technology Scholarship recipients from 2012 to 2016, about 10 percent have met their obligations through in-state employment.
- Approximately 2.3 percent of students in the 2012 to 2016 cohorts have met their obligations through repayment, while an additional 12 percent are currently in repayment.

Medical Student Loan Program

- The number of recipients from 2012-13 to 2016-17 fluctuated with the high mark of 273 in 2012-13 and a low of 245 in 2013-14. In 2016-17 there were 247 recipients.
- The number of recipients requesting loan deferment because they have begun medical practice in the state peaked in 2012-13 at 30 requests. The number of recipients receiving loan forgiveness by completing a year of full-time practice decreased from 40 in 2012-13 to 33 in 2016-17.
- The default rate on previous awards increased from 1.9 percent in 2012-13 to 2.5 percent in 2016-17.

Nursing Scholarship Program

- The Nursing Scholarship Program awarded a total of 208 scholarships to nursing students at all levels during the 2016-17 academic year. The program disbursed a total of \$199,500 in scholarship aid during this period.
- During the 2016-17 academic year, 119 registered nursing students received a total of \$133,500 in aid through the Nursing Scholarship Program. This represents an average award of \$1,122.
- Sixteen students at the master's or doctoral level received a total of \$50,000 in scholarship funds during the 2016-17 academic year, with an average award of \$3,125.

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Report on Fall 2018 Enrollment

INSTITUTIONS: All

RECOMMENDED RESOLUTION: Information Item

STAFF MEMBER: Chris Treadway

BACKGROUND:

The presentation will provide an analysis of current enrollment data derived from the Fall Census 2018 data collection along with a discussion of historical enrollment trends. Data elements to be discussed include:

- College-Going Rate
- Fall to Fall Retention Rates
- Headcount Enrollment
- FTE Enrollment

As of October 25, 2018, a few institutions were still working to finalize their Fall Census submissions. Data for this presentation will be provided to Commissioners once all institutional submissions are finalized and reviewed for accuracy.

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Report on Program Review

INSTITUTIONS: All

RECOMMENDED RESOLUTION: Information Item

STAFF MEMBER: Mark Stotler

BACKGROUND:

In accordance with West Virginia Code §18B-1B-4 and §18B-2A-4 and Series 10, Procedural Rule, Policy Regarding Program Review, the institutions through their respective governing boards conducted academic program reviews during the 2017-2018 academic year and submitted summary reports that indicated actions taken. A summary of program enrollments and graduates as well as a few highlights is provided in the information that follows. The data reflects the five years of the review period (2012-2013 through 2016-2017).

All programs were recommended for continuation. Programs that were identified with concerns or a need for follow-up are noted in the highlights section. Items that generated the most concerns evolved around program assessment and program viability. Several reviews raised concerns regarding adequate faculty resources.

The institutions reviewed a total of 97 programs. No programs were recommended for termination.



2017-2018 Program Review Summary

Bluefield State College:

Program	Average Enrollment	Total Graduates
BS Applied Science	84	55
BS Health Services Management	35	26
BA Humanities	53	17

Highlights:

- Ongoing changes in the field requires the Health Services Management program to fully utilize its advisory board. At a recent meeting, the board approved curriculum changes.
 - Recommendations from an external evaluator have led to several programmatic improvements.
-

Concord University:

Program	Average Enrollment	Total Graduates
BA Communication Arts	62	54
BS Recreation and Tourism Management	112	108
BA/BS Interdisciplinary Studies	23	22
BSW Social Work	157	118
RBA Regents Bachelor of Arts	161	469
MSW Social Work	121 (degree seeking)	110

Highlights:

- Recommendations to enhance programmatic assessment have been noted for Communication Arts and Interdisciplinary Studies programs.
 - Communication Arts has added an area of emphasis in Broadcast Meteorology.
 - Recreation and Tourism has been recommended to reduce the number of areas of emphasis (currently four). Sport Management will be moved to Business. The remaining areas will be aligned to match faculty resources.
-

Fairmont State University:

Program	Average Enrollment	Total Graduates
BS Biology	67	53
BS Chemistry	33	38
BS Computer Science	89	42
BS Forensics	34	14
BS Architecture	63	54

Highlights:

- Four of the programs received a recommendation for further development.
- Three programs have plans to secure accreditation - Computer Science, Forensics, and Architecture.

- Forensics has a plan to develop a new Forensics and Analytical Chemistry Technology Center.

Glenville State College:

Program	Average Enrollment	Total Graduates
BA Music	18	17
BS Behavioral Science	101	111
BA History	14	18
BS Business Administration	175	127

Highlights:

- Behavioral Science has experienced a 65 percent enrollment decline and is served by only one tenure track faculty member. Based on a recommendation by an external evaluator, the College is exploring converting the program to Psychology.
- The Business program offers six concentrations. There are plans to offer Management online.
- Music offers the world's first concentration in Bluegrass.

Marshall University:

Program	Average Enrollment	Total Graduates
BSBA Accounting	239	171
BSBA Economics	50	81
BSBA Finance	109	196
BSBA International Business	50	33
BSBA Management	414	544
BSBA Management Information Systems	48	66
BSBA Marketing	177	236
BA Economics	1	3
BA/BS Geography	35	29
BA International Affairs	28	31
BA Political Science	94	90
MBA Business Administration	151	312
MS Accountancy	23	67
MS Health Care Administration	68	148
MS Human Resource Management	60	148
MA Leadership Studies	233	463
MA Reading Education	69	136
MAT Teaching	88	156
MA/MS Geography	11	21
MA Political Science	10	17
MPA Public Administration	9	12
DNP Nurse Anesthesia	79	157
EdD Education	112	66

Highlights:

- Many programs, especially in the College of Business, reiterated concerns from past reviews regarding inadequate faculty resources.
 - The College of Business has expressed concern regarding the lack of dedicated space.
 - MS in Human Resource Management will realign the program with the Society of Human Resource Management which will allow a more focused practitioner based education program.
 - The implementation of the Master of Public Administration program in 2013 resulted in an enrollment decline for Political Science.
 - The Nurse Anesthesia program partners with the Charleston Area Medical Center for program delivery.
-

Shepherd University:

Program	Average Enrollment	Total Graduates
BS Biology	205	181
BS Economics	34	61
BA Political Science	80	91
MA Student Development and Administration	31	66

Highlights:

- Biology students have an opportunity to apply for the MedSTEP program, an agreement between Shepherd University and the West Virginia University School of Medicine.
 - Economics was recommended to offer more student learning opportunities outside the classroom and to consider pursuing external grants, increasing community outreach and seek accreditation.
 - Concerns were expressed regarding only one full-time faculty serving the MA in Student Development and Administration program.
-

West Liberty University:

Program	Average Enrollment	Total Graduates
BM Music	29	23
BA/BS Social Sciences	37	42
BS Business Administration	364	383

Highlights:

- Music and Business Administration received favorable accreditation actions during the review period.
 - Majors under Social Sciences include Geography and Planning, and History. A major in Political Science was recently eliminated after the loss of a faculty member.
-

West Virginia State University:

Program	Average Enrollment	Total Graduates
BS Business Administration	353	224
BA Economics	15	49
BA History	47	78
BA Political Science	35	24
BA Sociology	13	11

Highlights:

- In order to meet student demand, the Accounting and Management concentrations of Business Administration are offered fully online.
- History has experienced a 46 percent enrollment decline during the review period.
- Sociology has been requested to provide a follow-up report on assessment.

West Virginia University:

Program	Average Enrollment	Total Graduates
BA/BS Chemistry	123	140
BA Economics	17	46
BA Geography	64	114
BA/BS Geology	234	276
BA History	240	378
BS Business Management	273	715
BA/BS Physics	73	56
BA Political Science	297	389
RBA Regents Bachelor of Arts	400	892
BA Sociology and Anthropology	601	1,078
BS Accounting	246	531
BS Economics	46	114
BS Finance	220	534
BS General Business	114	84 (4 years)
BS Management Information Systems	94	189
BS Marketing	211	506
MAcc Professional Accountancy	33	136
MBA Business Administration	211	561
PhD Business Administration	21	3
MA Economics	2	14
PhD Economics	38	34
MS Finance	14	99
MS Industrial Relation	63	186
MLS Legal Studies	54	101
MA History	39	82
PhD History	36	34
MS Chemistry	1	14
PhD Chemistry	76	47

Program	Average Enrollment	Total Graduates
MA Geography	15	21
PhD Geography	23	8
MS Geology	30	59
PhD Geology	18	12
MS Physics	2	43
PhD Physics	70	43
MA Political Science	16	54
PhD Political Science	39	17
MA Sociology	12	28
LLM Energy Law and Sustainable Development	7	10

Highlights:

- Chemistry was recognized as a Program of Excellence.
- Several programs were recommended to enhance assessment efforts - BA Political Science, Regents Bachelor of Arts, BA Sociology and Anthropology, BS Economics, and BS Marketing.
- Accounting was recommended to provide pass rates for the CPA exam.
- History experienced a 50 percent enrollment drop over the review period.
- New programs initiated during the review period include the PhD in Business Administration and the LLM in Energy Law and Sustainable Development.
- In the graduate program in Physics and Chemistry, students are primarily accepted into the PhD program and transition to the Master's program based on performance or personal reasons.
- Specific action was requested for Legal Studies to explain how long-term viability can be maintained in the wake of the retirement of the program director.
- Recognition as a Program of Excellence was bestowed on the PhD in History, MA in Geography, and PhD in Geography.

Potomac State College of West Virginia University:

Program	Average Enrollment	Total Graduates
AAS Business and Economics	93	98
AAS Business Management Technology	39	59

Highlights:

- The two business programs are requested to provide follow-up reports that demonstrate how assessment results are being used for program improvement. In addition, learning outcomes must be updated in the catalog.
 - Business Management Technology is requested to provide graduation numbers for 2018 and 2019.
 - Transfer opportunities have been identified through articulation with the Morgantown campus.
-

West Virginia University Institute of Technology:

Program	Average Enrollment	Total Graduates
BS Business Management	53	43
BS Accounting	29	33
BA History and Government	15	12
BS Chemistry	5	4

History:

- The development and implementation of an improved assessment plan was recommended for Business Management and Chemistry. Follow-up reports are requested.
- Due to concerns over viability, History and Government and Chemistry were requested to provide follow-up reports on strategies and efforts to increase enrollment.

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Approval of Fiscal Year 2019 Capital Project Priorities

INSTITUTIONS: All

RECOMMENDED RESOLUTION: *Resolved*, That the West Virginia Higher Education Policy Commission approves the prioritized capital project list for Fiscal Year 2019 and directs staff to report the capital project priorities to the Legislative Oversight Commission on Education Accountability in January as statutorily required.

STAFF MEMBER: Ed Magee

BACKGROUND:

West Virginia Code §18B-1B-4(a)(10) requires the Commission to establish a formal process for identifying needs for capital investments and for determining priorities for those investments. The Commission must also report annually its priorities for capital investment for consideration by the Governor and Legislature as part of the appropriation request process.

The Commission's appropriation request submitted to the State Budget Office on September 1, 2018, once again included a one-time request of \$10 million for high priority code compliance and deferred maintenance projects. If the appropriation is authorized, it will be distributed between the two systems. Of the total appropriation, 80 percent or \$8 million will be distributed to the Commission's institutions and the remainder will be distributed to Council for Community and Technical College Education institutions. Consistent with prior practice, institutions will be required to match the State's capital investment with institution or private funds.

Staff used the code compliance and deferred maintenance projects from the institutions' capital appropriation requests received in late August to prepare the proposed list of projects for funding. Table 1 summarizes \$16 million in projects which have been identified. If approved by the Commission, this list of prioritized projects will be submitted to the Legislative Oversight Commission on Education Accountability (LOCEA) in January.

The following process was used to select the projects:

As described in the Commission's System Facilities Master Plan, projects were prioritized in the following order:

- 1: Structural Demolition
2. Reliability
3. Safety/Code
- 4 Asset Preservation
5. Program Improvement
6. Economic Operations
7. New Construction

To create a project list within the appropriation request dollar amount, additional criteria were applied:

1. Projects that were funded and underway were eliminated.
2. Auxiliary projects were eliminated.
3. Projects costing less than \$100,000 were eliminated.
4. Projects in excess of \$1 million were eliminated.
5. Projects identified by institutions as lower priorities were eliminated.

Table 2 contains the entire capital appropriation requests from the institutions which includes both Educational and General (E&G) and Auxiliary Enterprise code compliance, deferred maintenance, renovation (building renewal) and new building projects. Auxiliary Enterprise projects are typically funded from user fees, such as room and board and parking fees, and include residence halls, dining halls, student unions, parking garages, etc. Major E&G projects, large renovations, additions and new facilities have been funded in the past by Lottery revenue bonds, or a combination of Lottery bond proceeds and institution E&G capital fees. Table 2 also identifies the projects that are fully funded and will be under design or construction in Fiscal Year 2019, as required by the State Budget Office.

Table 1


Institutional and Project Priority 		Budget Request Name	Project Class	Total Requested	Institutional Match	HEPC Match
BLUEFIELD STATE COLLEGE				\$1,200,000	\$600,000	\$600,000
7		ROOF REPLACEMENTS-MULTIPLE BUILDINGS	Reliability	500,000	250,000.00	250,000.00
11		Campus Key Replacement	Reliability	700,000	350,000.00	350,000.00
FAIRMONT STATE UNIVERSITY				1,740,000	870,000.00	870,000.00
1		Hunt Haught Hall HVAC Replacement Vet Tech Area	Reliability	200,000	100,000.00	100,000.00
3		Hardway Hall Roof Renewal & Waterproofing	Reliability	640,000	320,000.00	320,000.00
7		Kiln Building Upgrades	Reliability	250,000	125,000.00	125,000.00
8		Colebank Hall Membrane Roof Replacement	Reliability	150,000	75,000.00	75,000.00
18		Hunt Haught Hall Roof Renewal	Reliability	500,000	250,000.00	250,000.00
SHEPHERD UNIVERSITY				3,920,000	1,960,000.00	1,960,000.00
1		Knutti Hall Foundation Repairs	Reliability	550,000	275,000.00	275,000.00
7		Snyder Hall Heating	Reliability	300,000	150,000.00	150,000.00
8		White Hall Roof	Reliability	375,000	187,500.00	187,500.00
9		Knutti Hall Roof	Reliability	325,000	162,500.00	162,500.00
14		Emergency Power Systems - 2 residence halls [Shaw and Thach	Reliability	580,000	290,000.00	290,000.00
15		McMurrin Hall Roof	Reliability	400,000	200,000.00	200,000.00
18		White Hall Exterior Masonry	Reliability	100,000	50,000.00	50,000.00
21		Butcher Center Roof	Reliability	550,000	275,000.00	275,000.00
25		Frank Ctr Theater General Upgrades	Reliability	200,000	100,000.00	100,000.00
33		Reynolds Hall Roof	Reliability	290,000	145,000.00	145,000.00
37		Interior / Ext Door Locks Upgrades	Reliability	250,000	125,000.00	125,000.00
WEST LIBERTY UNIVERSITY				500,000	250,000.00	250,000.00
8		Shotwell Hall Renovation	Reliability	500,000	250,000.00	250,000.00
WEST VIRGINIA SCHOOL OF OSTEOPATHIC MEDICINE				643,000	321,500.00	321,500.00
4		Main Building C - Roof replacement	Reliability	243,000	121,500.00	121,500.00
5		Main Building B - Roof replacement	Reliability	400,000	200,000.00	200,000.00
WEST VIRGINIA STATE UNIVERSITY				4,263,500	2,131,750.00	2,131,750.00
3		REPLACE WATER LINES AND FIRE HYDRANTS	Reliability	650,000	325,000.00	325,000.00
4		Upgrade Campus Elevators to ADA and Fire Marshall Standard	Reliability	175,000	87,500.00	87,500.00
8		Ferrell Hall HVAC Upgrades and Boiler	Reliability	576,000	288,000.00	288,000.00
9		Drain-Jordan Library HVAC Upgrades	Reliability	450,000	225,000.00	225,000.00
10		Davis Fine Arts HVAC Upgrades	Reliability	637,500	318,750.00	318,750.00
11		Hamblin Hall HVAC Upgrade	Reliability	475,000	237,500.00	237,500.00
12		Underground Electrical Upgrade	Reliability	650,000	325,000.00	325,000.00
14		Physical Facilities Boiler Replacement	Reliability	150,000	75,000.00	75,000.00
15		Buildings Weather Proofing	Reliability	500,000	250,000.00	250,000.00
WEST VIRGINIA UNIVERSITY				3,585,000	1,792,500.00	1,792,500.00
2		Rooftop Air Handlers (HSC)	Reliability	600,000	300,000.00	300,000.00
7		ENGINEERING RESEARCH ROOF REPLACEMENT	Reliability	575,000	287,500.00	287,500.00
8		HVAC FOR ACADEMIC INSTRUCTIONAL GYMNASIUM (PSC)	Reliability	250,000	125,000.00	125,000.00
22		Ground Floor Air Handler Replacement (HSC)	Reliability	450,000	225,000.00	225,000.00
23		Basement Floor Air Handler Replacement (HSC)	Reliability	650,000	325,000.00	325,000.00
25		Replace AHU Glycol Heater System (HSC)	Reliability	240,000	120,000.00	120,000.00
27		LIBRARY CHILLER AND AIR HANDLER REPLACEMENT (PSC)	Reliability	250,000	125,000.00	125,000.00
28		WVU BECKLEY - ROBERT C. BYRD LRC ROOF	Reliability	300,000	150,000.00	150,000.00
33		Replace Secondary Chilled Water Pump (HSC)	Reliability	270,000	135,000.00	135,000.00
HIGHER EDUCATION POLICY COMMISSION				148,500	74,250.00	74,250.00
1		Other Capital Projects	Reliability	148,500	74,250.00	74,250.00
Grand Total				\$16,000,000	\$ 8,000,000	\$ 8,000,000

Table 2

Institution and Project Priority	Capital Project Name	Total Requested
BLUEFIELD STATE COLLEGE		\$64,700,000
1	Residential Housing/Garage Plaza	16,800,000
2	LEASE OF GAS COMPANY LOT/UPGRADE	500,000
3	Parking Garage and Campus Quad	16,500,000
4	Sidewalk/Step Repairs	850,000
5	Site lighting & Control Upgrade	500,000
6	Institutional Energy/Electrical HVAC Evaluation and Upgrade	3,000,000
7	ROOF REPLACEMENTS-MULTIPLE BUILDINGS	500,000
8	Campus Window Replacement Phase 1	1,000,000
9	Campus Restroom Renovation	1,300,000
10	ADA Compliance Basic/Dickason	600,000
11	Campus Key Replacement	700,000
12	Roadway Property Upgrade	4,300,000
13	Hardway Library Renovation	4,000,000
14	Electrical/HVAC Upgrade Phase II	3,500,000
15	Student Center Elevator	650,000
16	Student Center Air Conditioning	600,000
17	Athletic Fields Upgrade	1,000,000
18	Campus Window Replacement Phase I	900,000
19	Repainting Campus Buildings	500,000
20	Electrical/HVAC Upgrade Phase III	3,500,000
21	Cultural/Convention/Cyber Center	3,500,000
CONCORD UNIVERSITY		31,346,265
1	Window Replacement Fine Arts	160,000
2	North & South Towers Renovations	16,460,000
3	Roof Replacement Carter Center	500,000
4	SIDEWALKS, STEPS, CURBING, AND PAVING UPGRADES FOR ADA	22,000
5	Carter Cntr - E&G HVAC/Electrical/Plumbing/ADA Elevator Impr	1,571,990
6	ADMINSCIENCE BUILDING RENOVATIONS PHASE II	4,000,000
7	STORAGE BUILDING REPLACEMENT	300,000
8	ELECTRICAL UPGRADE STUDENT CENTER	210,000
9	Student Center Roof	817,275
10	SARVAY HALL NEW WINDOWS	300,000
11	Student Center Boilers	1,375,000
12	WILSON HALL NEW WINDOWS	520,000
13	DIESEL GENERATOR STUDENT CENTER	135,000
14	STOREFRONT REPLACEMENT CATER CENTER	1,260,000
15	STUDENT CENTER ELECTRICAL UPGRADE	3,000,000
16	Renovate Game Room Student Center	110,000
17	Woodell Hall - New Windows & HVAC Electrical Renovations	520,000
18	RESURFACE GYM FLOOR CARTER CENTER	85,000
FAIRMONT STATE UNIVERSITY		35,137,173
1	Hunt Haught Hall HVAC Replacement Vet Tech Area	200,000
2	Feaster Center Roof Replacement	750,000
3	Hardway Hall Roof Renewal & Waterproofing	640,000
4	Infrastructure Parking Lot Paving	1,000,000
5	Infrastructure - Hardway Sidewalk Upgrades	175,000
6	Falcon Center Elevator Addition	180,000

7	Kiln Building Upgrades	250,000
8	Colebank Hall Membrane Roof Replacement	150,000
9	Parking Garage Elevator Addition	300,000
10	Feaster Center Fire Alarm Upgrade	200,000
11	Physical Plant Window Replacement	100,000
12	Colebank hall Exterior Cleaning & Waterproofing	300,000
13	Feaster Center HVAC (Lobby)	250,000
14	Feaster Center Window & Door Upgrades	200,000
15	Jaynes Hall Windows	610,000
16	Engineering Technology Window Replacement (1st & 2nd Floor)	100,000
17	Physical Plant Annex - Roof Renewal	100,000
18	Hunt Haught Hall Roof Renewal	500,000
19	Jaynes Hall Exterior Cleaning & Waterproofing	370,000
20	Infrastructure Development South Locust Avenue (Drainage)	1,000,000
21	Musick Library Exterior Cleaning & Waterproof	300,000
22	Morrow Hall Renovations	10,375,859
23	Morrow Hall Roof Renewal	450,000
24	Pence Hall Renovations	7,272,292
25	Pence Hall Roof Renewal	250,000
26	Prichard Hall Renovations	8,864,022
27	Prichard Hall Roof Renewal	250,000
GLENVILLE STATE COLLEGE		3,900,000
1	Replace Stage Lights & Curtains in Fine Arts Building	350,000
2	CAMPUSWIDE COMMUNICATION AND EMERGENCY NOTIFICATION SYSTEM	100,000
3	Pickens Hall Renovation	200,000
4	North Entrance	100,000
5	Campus Paving and Parking Upgrades	200,000
6	Roof Replacements; Clark Hall and several other campus bldg	200,000
7	Campus-wide Electrical Upgrade and Power Redistribution	150,000
8	Campus Signage	100,000
9	Sidewalk and Paver Replacements	200,000
10	Elevator Upgrade/Replacements	350,000
11	Retaining Wall Replacement	150,000
12	Handrail Replacement	100,000
13	Upgrade Conrad Motel	1,300,000
14	Upgrade to MCCC and Fitness Center	400,000
MARSHALL UNIVERSITY		455,255,000
1	Memorial Student Center Renovations	25,000,000
2	COLLEGE OF BUSINESS BUILDING	40,000,000
3	Baseball Field	21,000,000
4	MARSHALL PLAZA - HAL GREER	7,900,000
5	Classroom Renovations (Campus-Wide)	2,000,000
6	Innovation and Discovery Complex	20,000,000
7	SUBSTANCE ABUSE and Recovery Center	18,500,000
8	Intramural Field Space	900,000
9	Prichard Hall ADA/Renovations	5,600,000
10	JC Edwards Stadium Structural Improve/Upgrades	1,000,000
11	TECHNOLOGY ENHANCED CLASSROOM INITIATIVE	1,500,000
12	Henderson Center HVAC	3,000,000
13	Erma Ora Byrd Clinical Ctr Skills Equipment	500,000
14	OBESITY RESEARCH CENTER	5,000,000
15	Gullickson Gymnasium HVAC	1,000,000

16	High Technology/Academic Instructional Facility	29,750,000
17	Science Building and Annex Renovation Project	15,000,000
18	Forensic Science Center Annex Build-Out	1,200,000
19	Old Main Repairs	4,235,000
20	Emergency Generators/Safety	1,040,000
21	Church Demolition/PARKING EXPANSION-5TH AVE AND 21ST STREET	500,000
22	LAIDLEY HALL DEMOLITION	350,000
23	Land Purchase/Demolition	2,000,000
24	Twin Towers Bathroom Renovations	3,500,000
25	Rural Health & Residency Education Center(s)	1,500,000
26	Student Career Center	6,000,000
27	Corbly Hall Renovations	10,000,000
28	Coon Medical Education Building Renovation (Phase III)	3,500,000
29	STORMWATER IMPROVEMENTS PHASE I	325,000
30	Campus-Wide Wireless Build-Out 263 Units	1,500,000
31	IT INFRASTRUCTURE UPGRADES	2,000,000
32	Center for Music/Music Education	40,300,000
33	Tennis Complex - Indoor Courts	6,000,000
34	Joan C. Edwards Football Stadium Expansion	24,000,000
35	MEMORIAL GARDEN	525,000
36	Drinko Renovations	1,000,000
37	HENDERSON CENTER ELEVATOR REPLACEMENT/Safety	900,000
38	JOAN C. EDWARDS STADIUM RESTROOM RENOVATION	6,170,000
39	Basketball Practice Facility	14,000,000
40	Outdoor Track Facility	6,000,000
41	SHOP STORAGE of ATHLETIC /BLDGS /GROUNDS EQUIPMENT STORAGE	350,000
42	Teays Center	7,000,000
43	Elevator Modernization	1,800,000
44	Holderby Hall Demolition	750,000
45	RESIDENCE HALL 1A	8,600,000
46	RESIDENCE HALL 1B	22,300,000
47	SMITH HALL ELEVATORS	1,400,000
48	Swimming Locker Room Renovations	125,000
49	LOCKER ROOM RENOV-CROSS COUNTRY M/W GOLF	500,000
50	AUX SWIMMING LOCKER ROOMS RENOVATIONS	250,000
51	EAST HALL ADDITION	2,500,000
52	PRICHARD HALL ROOF REPLACEMENT	250,000
53	HENDERSON CENTER SOUTHSIDE ROOF	250,000
54	CDC BUILDING MECHANICAL RENOVATIONS	500,000
55	CDC BUILDING ARCHITECTURAL RENOVATIONS	1,000,000
56	FINE ARTS RENOVATIONS	1,500,000
57	WAYFINDING	385,000
58	REPLACE GULLICKSON GYM FLOOR	350,000
59	Baseball Locker Room Renovations	350,000
60	Gullickson Gym Renovations	2,225,000
61	DOUGLASS CENTRE RENOVATION	1,900,000
62	RCBI ROOF REPLACEMENT	500,000
63	DRINKO LIBRARY ROOF REPLACEMENT	500,000
64	Morrow Library ADA Updates	750,000
65	SCIENCE HALL ROOF REPLACEMENT	500,000

66	INTRAMURAL FIELD TURF REPLACEMENT	400,000
67	JOAN C. EDWARDS STADIUM CONCOURSE GATES EXPANSION	300,000
68	COON EDUCATION BUILDING CHILLER REPLACEMENT	175,000
69	MARSHALL MEDICAL CENTER RENOVATIONS	750,000
70	FORENSIC SCIENCE MECHANICAL UPDATES	500,000
71	Jenkins Hall Renovations/Roof Repair	3,750,000
72	Old Main ADA Elevator	1,000,000
73	OLD MAIN ROOF REPLACEMENT AND EXTERIOR REPAIRS	950,000
74	MUMC HVAC	200,000
75	School of Pharmacy/Education Building	17,900,000
76	Student Housing For Medical Professionals	38,600,000
SHEPHERD UNIVERSITY		98,712,500
1	Knutti Hall Foundation Repairs	550,000
2	Miller Hall HVAC	125,000
3	Student Center Roof Replacement	350,000
4	Telephony Upgrade	375,000
5	Football Field Artificial Turf	550,000
6	Burkhart/Moler/Yost HVAC	75,000
7	Snyder Hall Heating	300,000
8	White Hall Roof	375,000
9	Knutti Hall Roof	325,000
10	Athletics Weight Room	1,750,000
11	Burkhart Hall MEP	350,000
12	Yost Hall MEP	350,000
13	Shaw Hall MEP & ADA Restrooms	200,000
14	Emergency Power Systems - 2 residence halls [Shaw and Thach	580,000
15	McMurrin Hall Roof	400,000
16	Thacher MEP & ADA Restrooms	200,000
17	Butcher Center Arena light LED	100,000
18	White Hall Exterior Masonry	100,000
19	Stutzman-Slonaker Parapets	500,000
20	Butcher Ctr A/C Units	1,100,000
21	Butcher Center Roof	550,000
22	Gardiner Hall MEP & ADA Restrooms	2,500,000
23	Frank Ctr Theater Lighting Upgrades	20,000
24	Frank Ctr Renovation & Performance Space	16,000,000
25	Frank Ctr Theater General Upgrades	200,000
26	Moler Hall MEP	350,000
27	Yost Hall MEP	350,000
28	Boteler Hall MEP	350,000
29	Lurry Hall MEP	350,000
30	Martin Hall MEP	350,000
31	Miller Hall Ext Masonry	125,000
32	Miller Hall Roof	250,000
33	Reynolds Hall Roof	290,000
34	Student Center HVAC	400,000
35	Student Center Exterior Masonry	75,000
36	Security Cameras System	250,000
37	Interior / Ext Door Locks Upgrades	250,000
38	New Student Center/ Dining Facility	31,000,000

39	Gardiner Hall Window Replacements	50,000
40	Gardiner Hall Ext. Doors Replacements	7,500
41	Gardiner Hall Roof	450,000
42	Ram Stadium East Side Seating Replacement	900,000
43	Dining Hall Plumbing Upgrade	100,000
44	Dining Hall Boiler Replacement	200,000
45	Dining Hall Electric Upgrade	180,000
46	Turner Hall Renovation & Infrastructure Upgrades	6,000,000
47	Turner Hall Exterior Masonry	100,000
48	Turner Hall Roof	450,000
49	Kenamond Hall Renovation & Infrastructure Upgrades	4,000,000
50	Parking Garage	10,000,000
51	New Maintenance Facility	4,600,000
52	New Motor Pool Facility	525,000
53	Demo Existing Trailers	525,000
54	Facilities Building Renovations	800,000
55	King Street Pedestrianization	2,450,000
56	Campus Entrances / Borders	500,000
57	New Field Houses/ Restrooms for Softball and Baseball	200,000
58	Kenamond Hall Roof	450,000
59	Byrd Sci & Tech Ctr lighting upgrade	100,000
60	Byrd Sci & Tech Ctr Boiler Replacement	250,000
61	Byrd Sci & Tech Ctr Lab Upgrades	1,200,000
62	Dunlop Hall Chiller Replacement	75,000
63	Printz Hall Chiller Replacement	75,000
64	Schindler House Ext. Masonry	100,000
65	HR Building Roof	150,000
66	New Storage Bins	265,000
67	Entler Weltzheimer House Interior Renovation	500,000
68	Popodicon Roof	150,000
69	Popodicon Ext Masonry	100,000
70	Facilities Building Roof	175,000
71	CCA 1 Gutters	10,000
72	Snyder Hall Roof	310,000
73	Equipment Screen Frank Ctr Roof	200,000
74	Street/Parking Lot Paving	250,000
WEST LIBERTY UNIVERSITY		14,725,000
1	Library Elevator Replacement	140,000
2	Elevator Replacements Hughes, Krise, Beta Halls	725,000
3	ADA Compliance Grounds	60,000
4	ADA Compliance Buildings	25,000
5	Arnett Hall Renovation	3,500,000
6	Campbell Hall 4th Floor Buildout	2,000,000
7	Sidewalks in front of campus	75,000
8	Shotwell Hall Renovation	500,000
9	Blatnik Hall Window Replacement	250,000
10	Library Windows	250,000
11	Hughes Hall Windows	250,000
12	Krise Hall Windows	450,000
13	Market Place Generator	150,000

14	Myers Maintenance Roof	150,000
15	Student Recreation & Dining Facility	3,000,000
16	Main Hall Renovation	800,000
17	Library Parking Lot	400,000
19	Student Union Renovation	2,000,000
WEST VIRGINIA SCHOOL OF OSTEOPATHIC MEDICINE		8,793,000
1	Library/OMM Lab Roof Replacement	300,000
2	Campus energy, lighting, & Beautification	1,600,000
3	Technology Building Expansion Project	6,250,000
4	Main Building C - Roof replacement	243,000
5	Main Building B - Roof replacement	400,000
WEST VIRGINIA STATE UNIVERSITY		60,698,500
1	EDUCATION BUILDINGS ROOF REPLACEMENT	2,500,000
2	Lighting Upgrade of Plazas, Sidewalks, and Parking Lots	375,000
3	REPLACE WATER LINES AND FIRE HYDRANTS	650,000
4	Upgrade Campus Elevators to ADA and Fire Marshall Standard	175,000
5	Upgrade Existing Parking Lots	650,000
6	Upgrade Existing Sidewalks	125,000
7	UPGRADE ACADEMIC CLASSROOM TECHNOLOGY IN BUILDINGS	450,000
8	Ferrell Hall HVAC Upgrades and Boiler	576,000
9	Drain-Jordan Library HVAC Upgrades	450,000
10	Davis Fine Arts HVAC Upgrades	637,500
11	Hamblin Hall HVAC Upgrade	475,000
12	Underground Electrical Upgrade	650,000
13	Storm Water Management	110,000
14	Physical Facilities Boiler Replacement	150,000
15	Buildings Weather Proofing	500,000
16	Ferrell Hall ADA Accessibility	3,500,000
17	Wallace Hall Window Replacement	2,500,000
18	Building Upgrades for Energy Conservation	325,000
19	Lakin Field Upgrades	2,300,000
20	Sullivan Hall East Elevator Replacement	500,000
21	Sullivan Hall HVAC Upgrade	575,000
22	Sullivan Hall Air Handler	175,000
23	Campus Wide Classroom Furniture Upgrades	250,000
24	West Campus Land Acquisition & Parking Lot	1,100,000
25	East Campus Land Acquisition & Parking Lot	1,000,000
26	Research/Science Building	18,000,000
27	Academic/Technology Classroom Building	11,000,000
28	Natatorium	11,000,000
WEST VIRGINIA UNIVERSITY		422,490,000
1	STEM/LAB BUILDING (PSC)	20,000,000
2	Rooftop Air Handlers (HSC)	600,000
3	HODGES RENOVATION	35,000,000
4	WVU BECKLEY - STEM & INNOVATION BUILDING	40,000,000
5	Multiple Sections of Roof Replacement (HSC)	2,700,000
6	ADMISSIONS & RECORDS FIRE ALARM & SPRINKLER SYSTEM	450,000
7	ENGINEERING RESEARCH ROOF REPLACEMENT	575,000
8	HVAC FOR ACADEMIC INSTRUCTIONAL GYMNASIUM (PSC)	250,000
9	North/South Electrical Feed (HSC)	530,000

10	IT INFRASTRUCTURE (HSC)	5,000,000
11	IT NETWORK REVITALIZATION	25,000,000
12	STEWART HALL SPRINKLERS	600,000
13	CHARLESTON DIVISION BUILDING INFRASTRUCTURE (HSC)	10,000,000
14	CHITWOOD FIRE ALARM UPGRADE	500,000
15	AG Science Annex Roof replacement	550,000
16	CHURCH MCKEE ARTS CENTER STAGE FIRE CURTAINS (PSC)	350,000
17	WVU BECKLEY - BACKFILL ACADEMIC & OFFICE SPACES	1,000,000
18	PURITAIN HOUSE FIRE ALARM UPGRADE	300,000
19	CHARLESTON CENTER LIFE SAFETY AND ADA ISSUES	3,000,000
20	ENGINEERING SCIENCES BRICK FACADE REPAIRS	12,000,000
21	RESEARCH LABORATORIES BMRC (HSC)	6,000,000
22	Ground Floor Air Handler Replacement (HSC)	450,000
23	Basement Floor Air Handler Replacement (HSC)	650,000
24	WVU BECKLEY - RESA BUILDING RENOVATION	1,000,000
25	Replace AHU Glycol Heater System (HSC)	240,000
26	ENGINEERING SCIENCE FIRE ALARM REPLACEMENT	1,200,000
27	LIBRARY CHILLER AND AIR HANDLER REPLACEMENT (PSC)	250,000
28	WVU BECKLEY - ROBERT C. BYRD LRC ROOF	300,000
29	CONNECTOR BRIDGE RENOVATIONS AND WINDOWS (HSC)	560,000
30	UPGRADE SPRINKLER/FIRE ALARM AG SCIENCE ANNEX	400,000
31	KNAPP HALL FIRE ALARM SYSTEM UPGRADE	500,000
32	WISE LIBRARY WV COLLECTION PASSENGER ELEVATOR MODERNIZATION	350,000
33	Replace Secondary Chilled Water Pump (HSC)	270,000
34	CAMPUS DRIVE AND PARKING AREA PAVING (PSC)	300,000
35	CANCER CENTER LAB (HSC)	10,000,000
36	WVU BECKLEY - DEVELOPMENT FACILITY	35,000,000
37	ELEVATOR ENCLOSURE AT MING HSIEH HALL	200,000
38	ENGINEERING SCIENCES BLDG PASSENGER ELEVATOR MODERNIZATION	900,000
39	CAMPUS EXTERIOR LIGHTING GROUNDS LIGHTING (PSC)	225,000
40	ADMISSIONS AND RECORDS RENOVATION	3,000,000
41	STEWART HALL CHILL WATER TIE IN	800,000
42	HOSTLER AUDITORIUM (HSC)	500,000
43	DOWNTOWN CHILLER PLANT ADD 4TH CHILLER	1,500,000
44	EVANS DALE PARKING GARAGE	42,000,000
45	Replace Heat Exchangers (HSC)	1,260,000
46	New Air Handler Units (HSC)	11,100,000
47	REPLACE 1 CHILLER (HSC)	1,000,000
48	Motor Controls (HSC)	470,000
49	Replace Lab Exhaust Fans (HSC)	675,000
50	EQUINE EDUCATION FACILITY FIRE PUMP, SPRINKLER, AND FIRE AL	300,000
51	Upgrade Access Control (HSC)	580,000
52	New Electrical Transformer, fuses and breakers (HSC)	6,700,000
53	WVU BECKLEY ADMINISTRATION & EXTENSION SERVICE ROOF & PARAPET	400,000
54	E-MOORE HALL WINDOW REPLACEMENT	750,000
55	KNAPP HALL BUILDING WINDOW UPGRADES	1,100,000
56	White Hall Hot Water Boiler for Reheat System	150,000
57	BUSINESS AND ECONOMICS BUILDING FACADE REPAIRS	3,000,000
58	CAMPUS EMERGENCY ALERTING SYSTEM (PSC)	100,000
59	Downtown Steam Tunnel Cable Tray Replacement	500,000

60	AIRPORT HANGAR INSTALL FIRE ALARM AND SPRINKLER SYSTEM	155,000
61	WVU BECKLEY - ROBERT C. BYRD LRC HVAC UNITS & BALANCING	350,000
62	EMOORE HALL REPLACE FIRE ALARM SYSTEM& INSTALL SPRINKLER SYS	700,000
63	CAMPUS SUPPORT SERVICES INSTALL SPRINKLER SYSTEM	400,000
64	ESB RELACE AHU E1 AND E2	800,000
65	CLARK HALL REPLACE SF1	750,000
66	DOWNTOWN LOOP BUILDINGS	120,000,000
67	CLARK HALL REPLACE 12 AIR HANDLERS	1,800,000
68	REPLACE STEAM AND CONDENSATE LINES FROM VAULT #3 TO CAC	350,000
69	WVU BECKLEY - ROBERT C. BYRD LRC ROOF	300,000
70	REPLACE STEAM AND CONDENSATE LINES FROM ENGINEERING TO MRB	500,000
71	REPLACE STEAM AND CONDENSATE LINES FROM NRCCE TO ENGINEERING	500,000
72	REPLACE 1 OF 7 AIR HANDLERS IN ROOM 4616A (HSC)	400,000
73	WVU BECKLEY - CLASSROOM BUILDING WATER INFILTRATION	150,000
74	WVU BECKLEY - BURY UTILITIES ON S. KANAWHA	700,000
75	WVU BECKLEY - LED INTERIOR LIGHTING REPLACEMENT	100,000
76	WVU BECKLEY ADMINISTRATION & EXTENSION SERVICE FREIGHT ELEVA	150,000
77	ROOF REPLACEMENT (HSC)	1,000,000
78	FIRE DOOR REPLACEMENT (HSC)	100,000
79	FIRE ALARM UPGRADES (HSC)	200,000
Grand Total		\$1,195,757,438

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Fiscal Year 2018 Consolidated Audit Presentation

INSTITUTIONS: All

RECOMMENDED RESOLUTION: *Resolved*, That the West Virginia Higher Education Policy Commission accepts the audited financial report for the Higher Education Fund for the Fiscal Year ending June 30, 2018.

STAFF MEMBER: Ed Magee

BACKGROUND:

The Commission is statutorily charged with the preparation of audited financial statements for West Virginia's Higher Education Fund (Fund). The Fund is made up of all activity related to institutional operations of Commission and Council member institutions. Each institution is independently audited as part of the Fund Statement. The Commission is charged only with approving the Fund Statement. The Fund audit is completed by CliftonLarsonAllen, LLP under a contractual arrangement with the Chancellor's Office.¹

Staff compiled this report with three goals in mind:

1. To provide the Commission with an understanding of the audit process;
2. To provide information on audit findings contained within the fund; and,
3. To provide ratio analysis of data contained within the Fund Statement and the statements of the member institutions.

Staff believes that the overall status of the fund is sound, although there are areas that should be monitored to ensure its continued viability. Financial ratios for several institutions indicate deterioration in their financial status. A discussion of these ratios is provided below.

The Audit Process

Independent Auditors' Reports on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in

¹ CliftonLarsonAllen, LLP subcontracted with Hayflich and Steinberg, PLLC, and Suttle and Stalnaker, PLLC, to complete audits for several institutions. The ultimate responsibility for performance is with CliftonLarsonAllen, LLP.

Accordance with Governmental Auditing Standards were issued for all financial reports. The reports included management comments, which identify significant deficiencies that left unchecked, could rise to the level of a “material weakness.”

The combined financial statements, as well as the financial statements for each institution, the Commission, and the Council can be viewed on the Commission’s website at <http://www.hepc.wvnet.edu/finance>.

Summary of Financial Results

A summary of the financial information for the Fund is provided in this section. As a point of reference, the dollar amounts numbers are presented in thousands.

Net Position

The Net Position is the total assets and deferred outflows of resources less the total liabilities and deferred inflows of resources of the Fund. The net position of the Fund increased in Fiscal Year 2018 by \$51.9 million. This follows an increase of \$18 million in Fiscal Year 2017. The majority of this change is attributable to changes in the OPEB liability and its accounting, as well as changes in Accounts Receivable and long-term liabilities. Depreciation and Capital Asset disposals offset Capital Asset additions.

Net Assets (Dollars in Thousands) - FY 2018	
	Change
Net Position	\$51,927
Cash and cash equivalents	\$6,970
Accounts Receivable	\$40,678
Noncurrent cash and cash equivalents	-\$17,057
Investments	\$19,224
Capital assets - Net	-\$19,469
Deferred Outflows of Resources	\$24,148
Accrued Liabilities	\$6,405
Notes Payable	-\$14,581
OPEB liability	\$33,982
Bonds Payable	\$24,617
Deferred Inflows of Resources	-\$52,026

Bond and Capital Lease Activity

The Total Bonds, Capital Leases, and Notes Payable held by public higher education institutions is about \$1,328.7 million as of June 30, 2018. Included in this amount is the \$330.8 million in bond debt carried by the Commission. The Commission has pledged

institutional capital fees to repay about \$61.8 million of this balance. Except for the 2017 Community and Technical College Bonds, the Commission has pledged institutional capital fees as a secondary pledge to the lottery revenues. The remaining balance related to this pledge is about \$178.8 million. By making a pledge of capital fees to be available for the repayment of the Commission's bond debt, the Commission has agreed to perform a fiduciary duty to ensure that sufficient capital fees will be available to pay debt service over the life of the bonds. The Commission has approved the majority of the institutional debt.

During FY 2018 and FY 2017, Bonds Payable decreased \$24.6 million and \$20.5 million primarily because debt service payments were made. On November 7, 2017, The West Virginia Higher Education Policy Commission issued Series 2017 West Virginia Higher Education Policy Commission Community and Technical Colleges Capital Improvement Revenue Refunding Bonds to advance refund the outstanding principal amount of the State of West Virginia Higher Education Policy Commission Community and Technical Colleges Capital Improvement Revenue Refunding Bonds, 2009 Series A and to provide funds to finance the acquisition, construction, equipping or improvement of community and technical college facilities located in the state of West Virginia. The bonds refunded \$66,340,000 in outstanding 2009 Series A bonds.

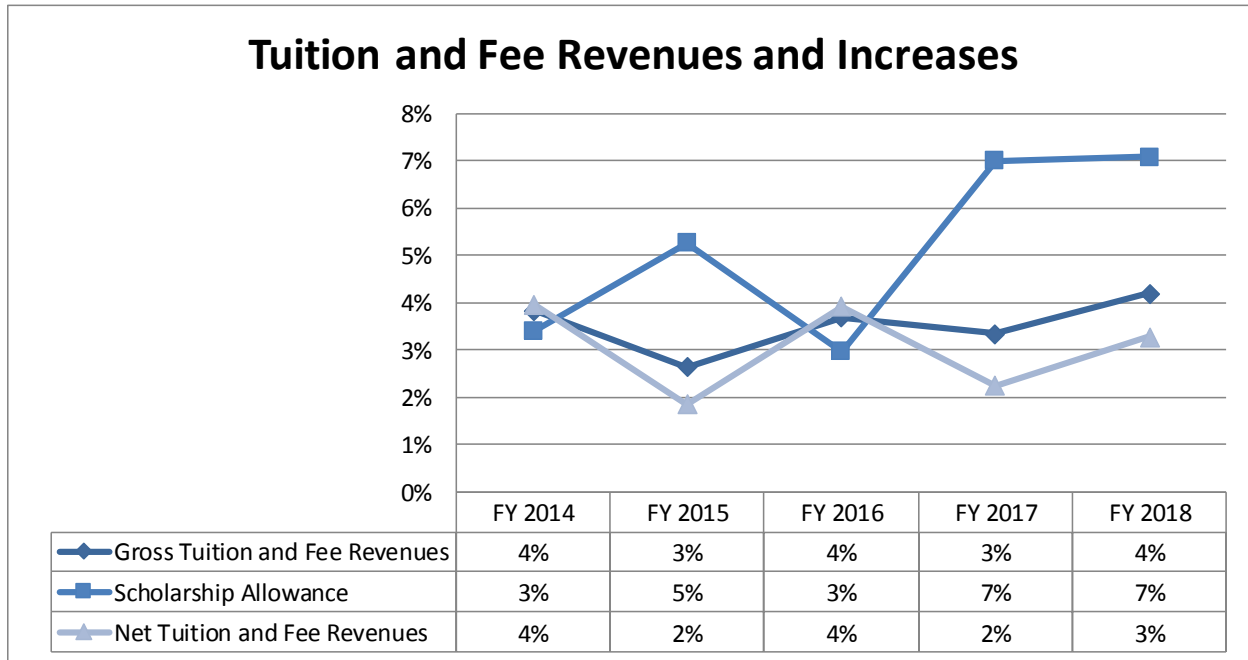
On December 21, 2017, the Commission issued the State of West Virginia Higher Education Policy Commission Revenue Refunding Bonds (Higher Education Facilities Series 2017). The bonds were issued to provide funds to advance refund the West Virginia Higher Education Policy Commission Revenue Bonds (Higher Education Facilities) 2007 Series A bonds ("the 2007 Series A Bonds"), and a portion of the West Virginia Higher Education Policy Commission Revenue Bonds (Higher Education Facilities) 2010 Series A bonds (the "2010 Series A Bonds") to reduce debt service payments and to pay the costs associated with the bonds. The bonds refunded and defeased the \$15,765,000 in outstanding 2007 Series A Bonds and \$12,880,000 of the 2010 Series A Bonds.

In December 2017, the WVU Research Corporation closed a loan from Wells Fargo for \$42 million. The loan proceeds were used to pay the United Bank loan and provide additional funds for projects at the campus in Beckley, West Virginia.

In June 2016, the WVU Research Corporation received a short-term (90-day note) loan in the principal amount of \$12 million from United Bank, Inc. The loan proceeds were used to reimburse the University for the acquisition and start-up costs of the new campus in Beckley, West Virginia. The note would have ended on September 27, 2016 but was extended until December 27, 2016 for the same amount under the same terms. On December 15, 2016, the West Virginia University Research Corporation closed on a note with United Bank for \$36.1 million. The proceeds of the loan were used to pay the 90 day note in full and to reimburse WVU for the purchase of the Beckley campus as well as for capital improvements to the campus. During FY 2017, West Virginia University Innovation Corporation (WVUIC), a blended component of WVU, received a loan for \$3 million to pay the WVUIC's equipment lease/purchase agreement in full.

Tuition and Fee Revenue

As a result of increases in fee rates that offset the negative effect of enrollment declines, total student tuition and fee revenues net of the scholarship allowance increased \$20.1 million in FY2017. The \$33.9 million increase in gross tuition and fees revenues was offset by a \$13.8 million increase in the scholarship allowance.



Operating Expenses

Operating expenses decreased \$20.5 million over FY 2017. The decrease in benefits was related to the change in the OPEB liability and the related accounting changes. Supplies and other services expenses decreased over the previous year. The Utilities increase was related to the utilization of new facilities funded by recent debt issues. Scholarships and Fellowships decreased because students used a greater portion of their financial aid to pay tuition and fees. The Depreciation decrease is related to disposals of capital assets offset by an increase in depreciation on construction projects completed and placed into service during the year.

Operating Expenses			
	FY 2017	FY 2018	Change
Salaries and Wages	\$866,409	\$868,270	\$1,861
Benefits	255,542	251,119	-\$4,423
Supplies and Other Services	419,698	411,415	-\$8,283
Utilities	62,755	64,534	\$1,779
Student Financial Aid- Scholarships and Fellowships	106,164	100,969	-\$5,195
Depreciation	138,312	135,879	-\$2,433

Operating Expenses Percent Changes		
	FY 2017	FY 2018
Salaries and Wages	1.83%	0.21%
Benefits	3.75%	-1.73%
Supplies and Other Services	-5.33%	-1.97%
Utilities	6.32%	2.83%
Scholarships and Fellowships	-2.31%	-4.89%
Depreciation	-0.52%	-1.76%

Reporting Entities

The institutional financial statements include data from affiliated organizations under their control. The financial statements for organizations that are not controlled by an institution, but are significant to the fund, are discretely presented. If an institution is not its only significant beneficiary, an affiliated organization's data are not presented. The following organizations are controlled by their affiliated college or university:

- Concord University Research and Development Corporation
- Glenville State College Research Corporation
- Glenville State College Housing Corporation
- Marshall University Research Corporation (MURC)
- Shepherd University Research and Development Corporation
- West Virginia State University Research and Development Corporation
- West Virginia University Research and Development Corporation

The following affiliated organizations are not controlled by an institution:

- Institutional foundations
- Bluefield State College Research and Development Corporation
- Provident Group-Marshall LLC

Because they do not entirely or almost entirely benefit one organization or are not material to the fund, the following organizations' financial data was excluded:

- West Virginia University Foundation, Inc.
- The Bridgemont Community and Technical College Foundation, Inc.
- The Eastern West Virginia Community and Technical College Foundation, Inc.
- The Higher Education Foundation, Inc.
- The Kanawha Valley Community and Technical College Foundation, Inc.
- Mountwest Foundation, Inc.

Other Post Employment Benefits

Beginning in Fiscal Year 2008, the Fund adopted GASB Statement No. 45, *Accounting and Financial Reporting by Employers for Postemployment Benefits Other than Pensions*. This statement provides standards for the measurement, recognition, and reporting of other postemployment benefit (OPEB) expenditures, assets, and liabilities. To address the issues raised by this Statement, the legislature created a postemployment trust fund for all State agencies. The Fund participates in this multiple employer cost-sharing plan, administered by the Public Employee's Insurance Agency (PEIA). The liability is estimated to be funded by 2034.

In FY 2018, the Fund implemented GASB Statement No. 75, *Accounting and Financial Reporting for Postemployment Benefits Other Than Pensions*. Statement No. 75 requires the Fund to report its share of the defined benefit other postemployment benefits (OPEB) liabilities and expenses, as well as the related deferred outflows or resources and deferred inflows of resources, allocated to it by the West Virginia Health Benefit Trust Fund (RHTB). The July 1, 2017, balance of the net OPEB liability and related deferred outflows of resources is reported in the statement of revenues, expenses, and changes in net position as a restatement to the 2017 net position at beginning of year. The RHTB was not able to provide sufficient information to restate the June 30, 2017 financial statements.

Net Position - Beginning of the Year, as Previously Restated	\$	1,973,969
Balance of the OPEB Liability and Related Deferred Outflows of Resources		18,671
Net Position - Beginning of Year, Restated	\$	1,992,640

Analysis: Ratios and Financial Information

The purpose of this section is to provide a summary and analysis of the data included in the financial statements. Only financial information is provided; therefore, this information should be combined with key performance indicators in other areas such as academics, and student and faculty satisfaction to acquire a more complete understanding of institutional strength.

To ascertain the financial health of a college or university, four questions should be asked:

1. Are resources sufficient and flexible enough to support the mission?
2. Does financial asset performance support the strategic direction?
3. Do operating results indicate the institution is living within available resources?
4. Is debt managed strategically to advance the mission?

To answer these questions, objective financial data should be analyzed within the context of the institutions' strategic plans. These plans are often influenced by the political and economic environment within which the institutions operate. In West Virginia, state

appropriations as well as tuition and fee levels are below national averages. Instead of funding capital improvements with state appropriations, projects have been funded primarily by student fees. These economic factors discourage the accumulation of reserves and promote the acquisition of debt to build facilities.

To address the four questions listed above, a financial analysis is presented using the Composite Financial Index (CFI) and several other ratios.²The CFI calculation uses the primary reserve, net operating revenues, return on net position, and viability ratios. These ratios are converted into strength factors which, in turn, are weighted to allow summing of the four resulting ratio scores into a single, composite value. The strength factors are limited to a scale of -4 to 10.

The primary reserve ratio and viability ratio are measures of financial condition based on expendable net position. These ratios are each weighted 35 percent in the calculation. The net operating revenues ratio measures an institution's ability to live within its means on a short term basis, and it is assigned a weight of 10 percent. The return on net position assesses a school's capacity to generate overall return against all net resources, and its weight is 20 percent. The West Virginia School of Osteopathic Medicine has no capital project-related debt and Bluefield State College does not have significant capital project-related debt; consequently, a viability score was not calculated for these schools.

The primary reserve, net operating revenues and return on net position ratios for both institutions were assigned weights of 55 percent, 15 percent and 30 percent respectively. Because its scores were unusually high, a separate chart was completed for the West Virginia School for Osteopathic Medicine. Because the liability was substantial, the CFI was calculated without the OPEB information, as well as the pension liability and its related expenses.

Other ratios were calculated to provide additional insight into the schools' financial health. Because the CFI primary reserve indices for some institutions were relatively low, the number of day's cash on hand was also determined. The age of the physical plant for each institution was estimated to assess the physical resources available to advance the schools' missions.

The CFI is designed to measure financial performance (income statement) and financial position (Statement of Net Position). The Statement of Net Position components comprise 70 percent of the index, focusing primarily on debt and reserves. The operating margin and net position return are highlights of the income statement analysis.

Although the CFI is a very useful tool for analysis, its limitations should be considered. The index only describes financial health and does not provide an indication of an institution's success in realizing its mission. A high score may indicate that an institution is not taking advantage of opportunities to invest in operations and facilities or use debt

²The CFI methodology is described in the *Strategic Financial Analysis for Higher Education* (Seventh Edition), jointly developed and sponsored by Prager, Sealy & Co., LLC, KPMG, LLP and BearingPoint, Inc.

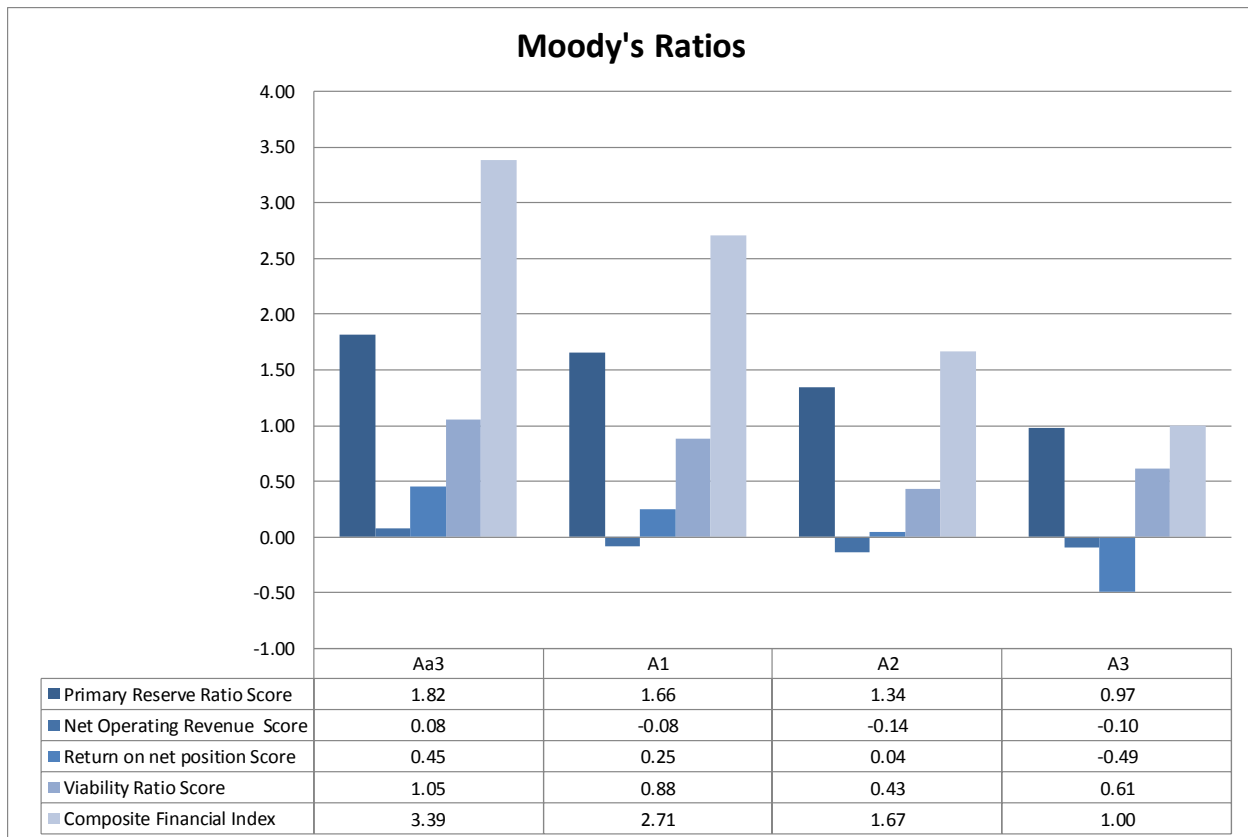
to leverage the institution's assets. Note: The component unit data has been excluded for this analysis; therefore, the scores will differ from those provided to the Higher Learning Commission which requires the inclusion of component units.

Because colleges and universities have unique missions, funding compositions and phases of growth, inter-institutional comparisons may not be valid. West Virginia institutions primarily self-fund capital needs while other public institutions receive direct state funding for these needs.

The *FY 2016 U.S. Public College and University Medians* published by Moody's Investors Service was utilized to provide benchmark data for comparison purposes. The report includes median ratios for each rating category and provides data for the following entities:

Institution/Agency	Rating
Concord University	Baa3
Fairmont State University	A2
Marshall University	A1
Shepherd University	Baa1
West Virginia Higher Education Policy Commission	Aa3
West Virginia State University	B1
West Virginia University	Aa3

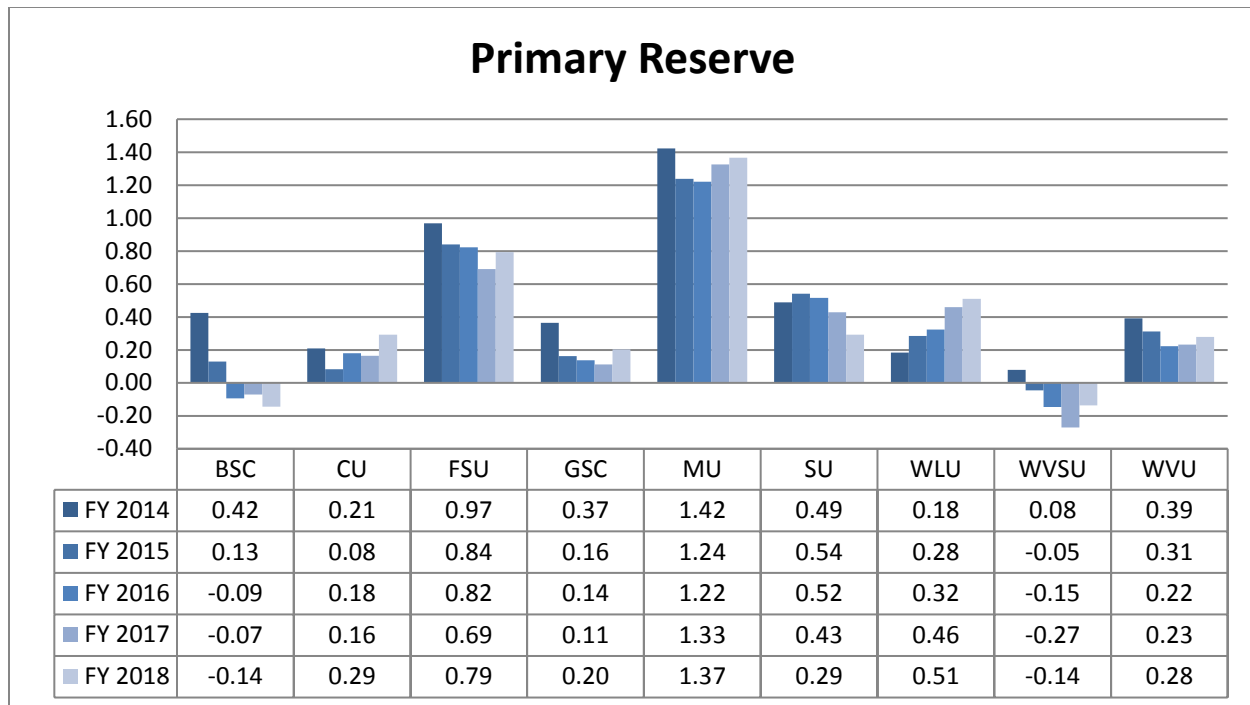
The rating categories Aa3, A1, A2, Baa1, Baa3 and B1 included 53, 62, 33, 9, 1, and 1 and institutions, respectively. Glenville State College and West Virginia State University were the only institutions that were rated B1. It should be noted that Moody's reviews many additional institutional characteristics, such as management performance, and market factors to determine their ratings. Moody's did not calculate median ratios for the Baa1, Baa3 and B1 categories. The CFI strength factors were applied to the Moody's median ratios to derive scores for the ratings assigned to West Virginia institutions.



Primary Reserve Ratio

The primary reserve ratio is used to calculate the primary reserve score. It is determined by dividing expendable net position into expenses and applying the appropriate strength factor. The results indicate that, excluding the OPEB and pension liabilities, amounts held in reserve did not keep pace with increases in expenditures for most of the colleges and universities.

All of the institutions experienced increases for FY 2018 in reserves as a percentage of operating expenses, excluding the OPEB and pension liabilities except for Bluefield State College and Shepherd University. The primary reserve score for the majority of the institutions were below the scores calculated for the schools included in the Moody's report. The scores calculated for all of the institutions are significantly less than their associated rating level scores calculated from the Moody's data.

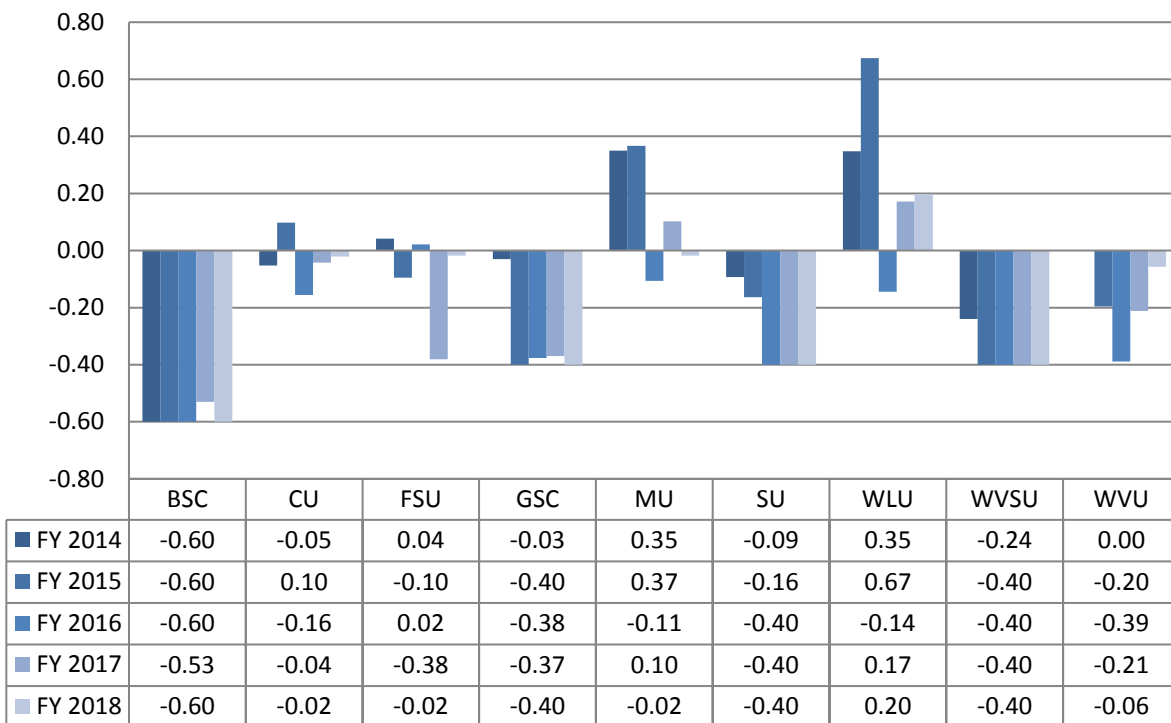


Net Operating Revenue

The increase or decrease in net position resulting from on-going operations is divided into the revenues from ongoing operations to determine the net operating ratio. Excluding the OPEB and pension liability related expenses, all of the institutions except for Bluefield State College, Glenville State College, Marshall University, and Shepherd University, experienced an increase in net operating revenues over FY 2017.

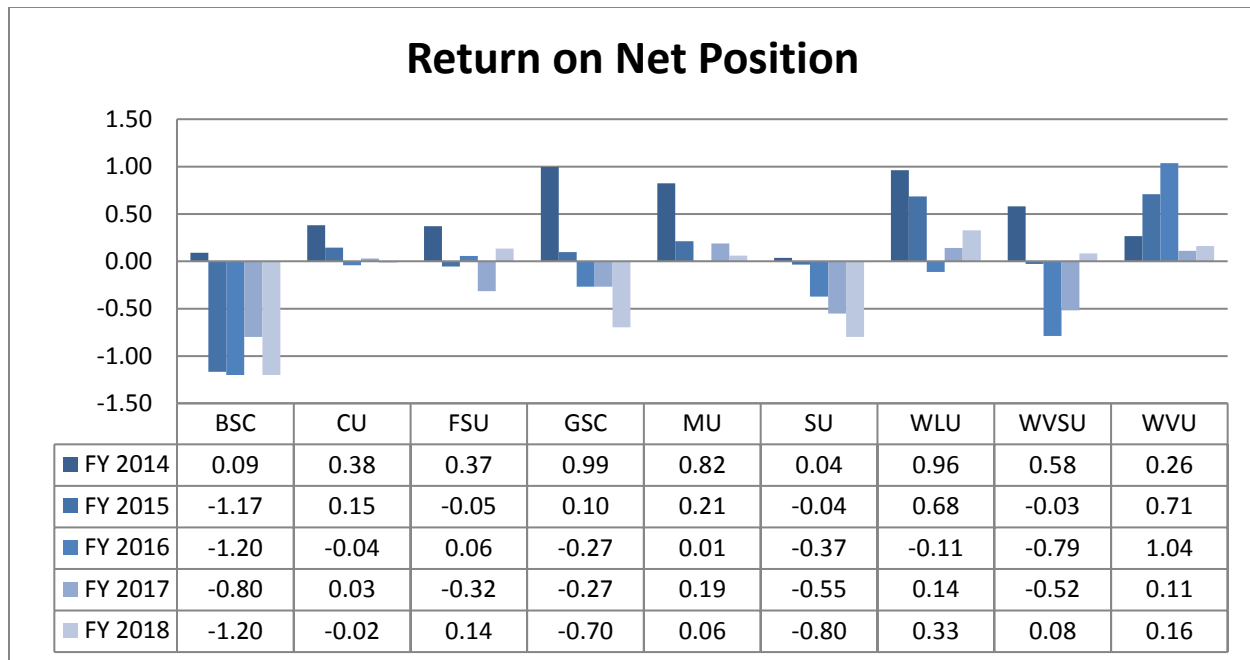
The majority of the institutions have net operating revenue scores that are significantly below the scores calculated for the Moody's report after the exclusion of the OPEB and pension liability related expenses. The operating results indicate most of the institutions are not generating enough resources and are depleting reserves.

Net Operating Revenue



Return on Net Position

The return on net position ratio is calculated by dividing the change in net position by the beginning net position. The resulting ratio is used to determine the return on net position score. This score is influenced by income, capital grants and gifts, and capital bond proceeds. The scores excluding the OPEB and pension liability related expenses decreased for all institutions in FY 2018 except for Fairmont State University, West Liberty University, West Virginia State University, and West Virginia University. For the majority of institutions across the system, the performance of financial assets provides insufficient support for their respective core missions.

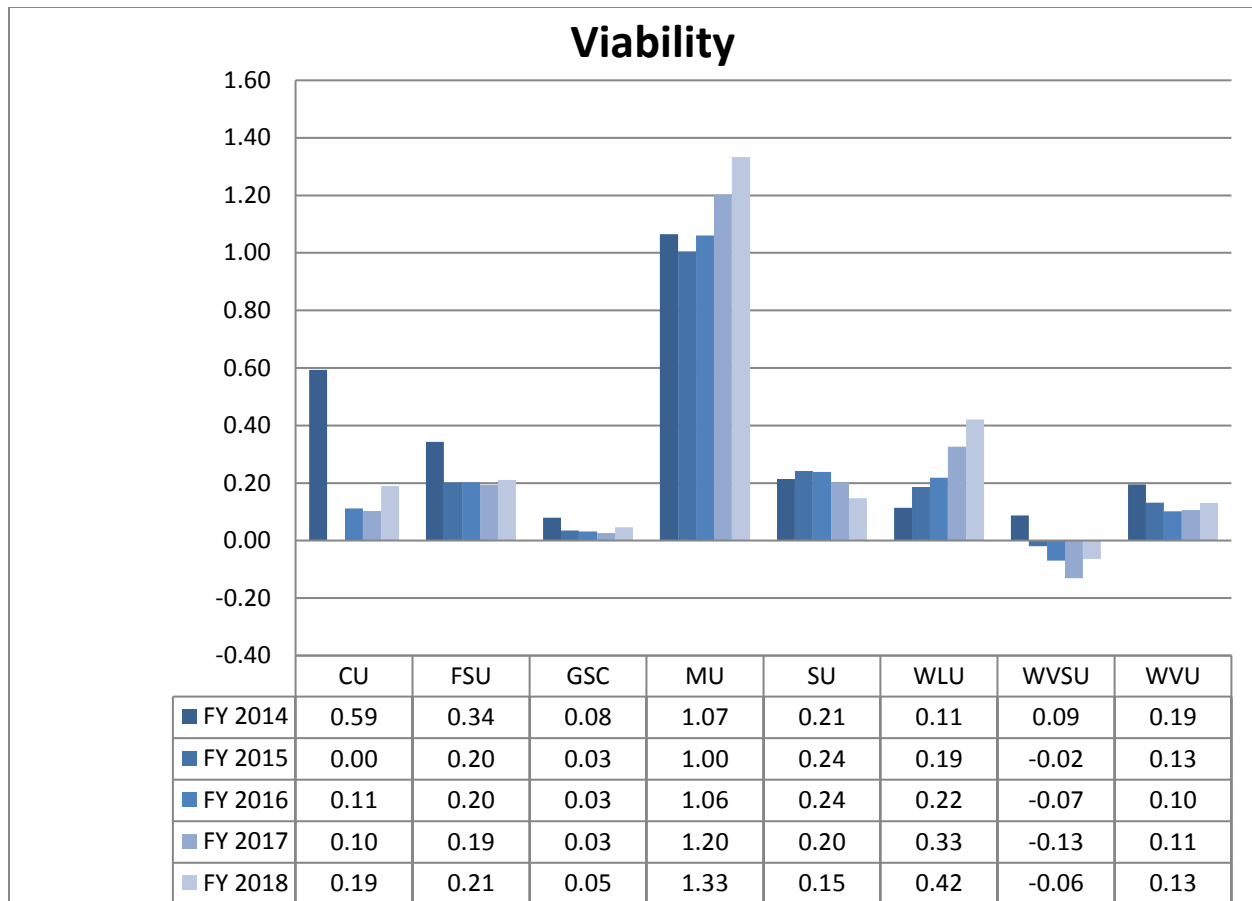


Viability

To determine the viability ratio, the expendable net position is divided into capital project-related debt. The result of this calculation is used to determine the viability score for each institution. Bluefield State College is not included because it has minimal debt. An institution's market position and capacity to raise fees to support debt service will influence its level of debt.

For most institutions, a high level of debt is required to maintain adequate facilities because the State has not consistently supported capital funding. Tuition and fee rates for resident students are limited; consequently, some institutions are not in a position to incur additional debt.

Without the ability to incur debt, aging facilities are not renewed or replaced. The excessive dependency upon student fees for capital improvements reduces institutions' debt capacity for strategic mission advancement. All of the institutions, except for Marshall University, have net viability scores that are significantly less than the scores calculated for the Moody's report after the exclusion of the OPEB and pension liability related expenses.



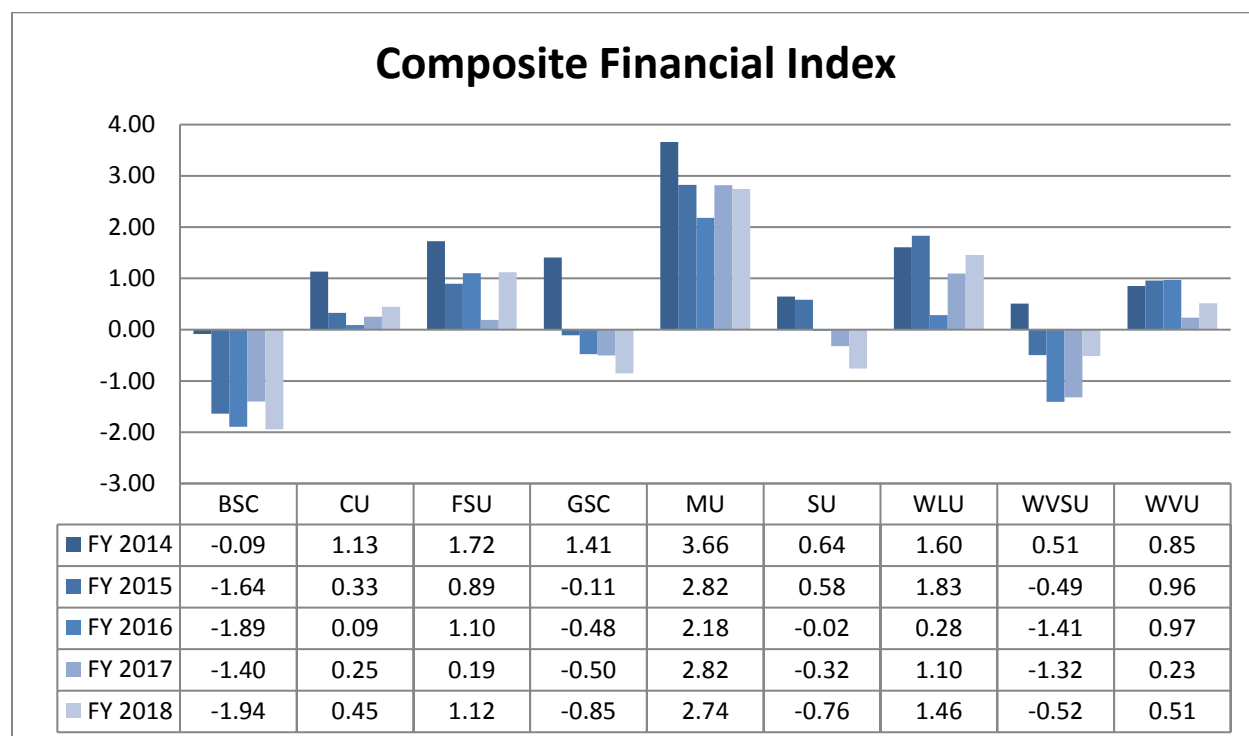
Composite Financial Index

The four ratio scores were combined to determine the CFI. A composite value of 1.0 is equivalent to weak financial health. A value of 3.0 signifies relatively strong financial health and scores above 3.0 indicate increasingly stronger financial health

The CFI must be assessed in light of the strategic direction for each institution. Strong financial results are not beneficial unless resources are deployed effectively to advance mission specific goals and objectives. These indices are best used to track institutional performance, both historically and as a planning tool, over a long time horizon, rather than compare to other institutions as each institution is unique in terms of specific goals, objectives and funding composition.

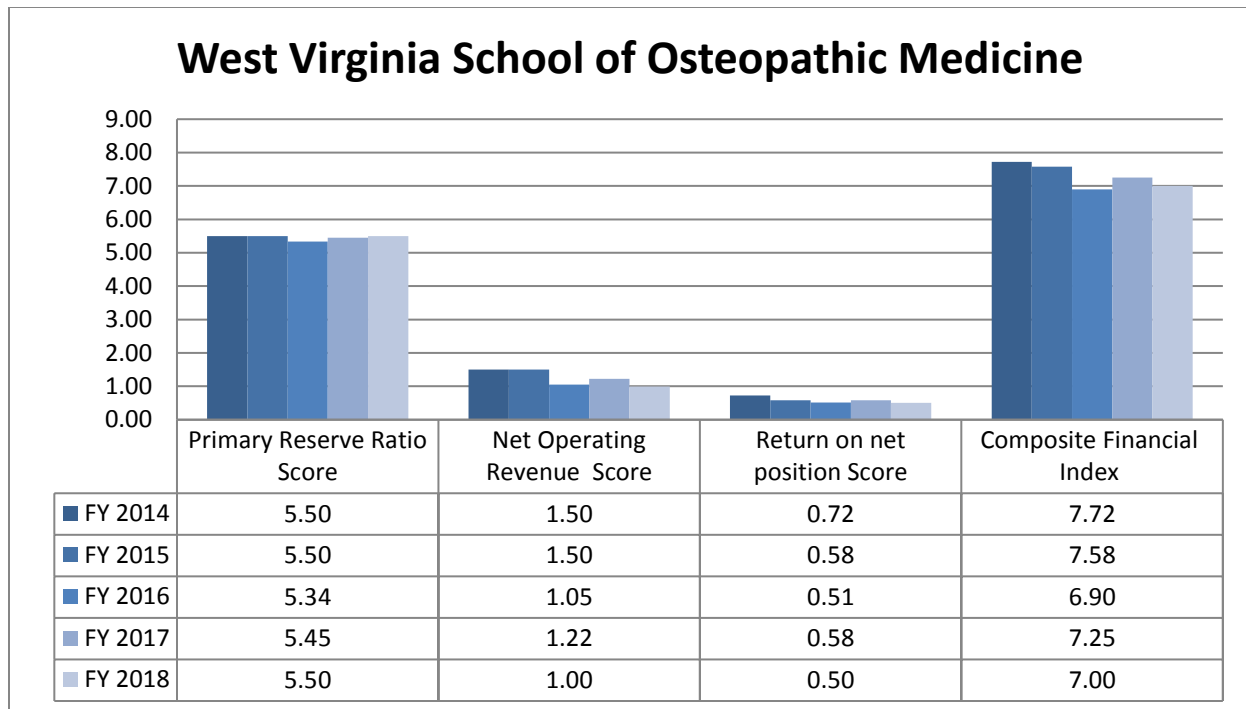
In the chart below, the impact of the OPEB liability on the CFI is clear. All of the institutions experienced increases in the CFI calculated for FY 2018 without the OPEB and pension related expenses and liabilities except for Bluefield State College, Glenville State College, Marshall University, and Shepherd University. The inclusion of the OPEB and pension liabilities results in scores that indicate poor financial health for the institutions except for Marshall University.

The Composite Financial Indices for most of the institution demonstrate that resources are not sufficient and flexible enough to support the schools' missions. In addition, their missions are not adequately supported by financial asset performance. Operating results do not support the accumulation of adequate financial resources. Because capital costs are primarily funded by student fees, the accumulation of significant debt loads is common. The financial strength for all institutions has deteriorated under the strain imposed by continuous state budget cuts.



West Virginia School of Osteopathic Medicine

The scores for all components of the CFI for the West Virginia School of Osteopathic Medicine indicated unusual financial strength. Its exceptional financial health must also be reviewed in light of its strategic mission.

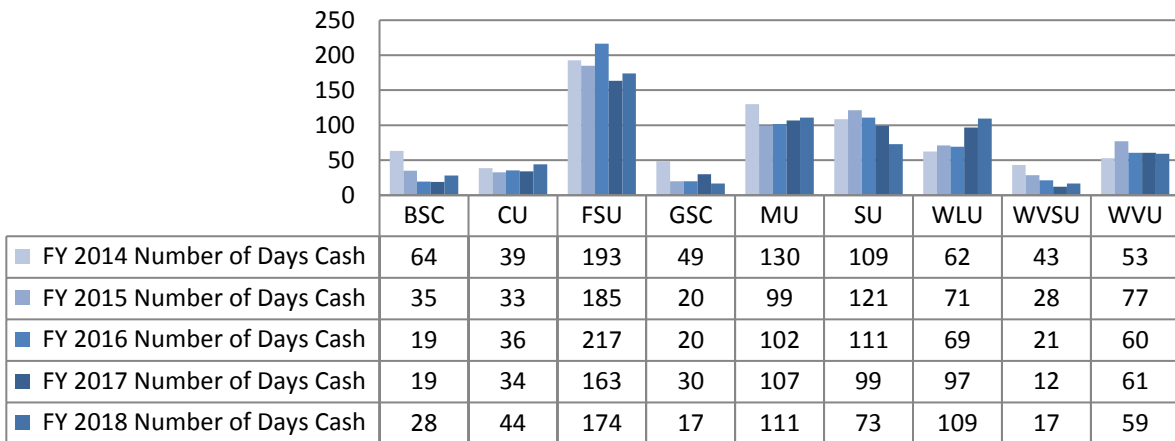


Number of Days Cash

The number of day's cash ratio was calculated to provide additional liquidity analysis. This ratio is calculated by multiplying the institutions' June 30 cash balances by 365 and dividing the result into total expenses less depreciation and the OPEB and pension liability related expenses. Data for discrete component units was not included in this calculation. Bluefield State College, Concord University, Glenville State College, West Virginia State University and West Virginia University have comparatively low ratios. The Moody's number of day's cash ratios for ratings Aa, A, and Baa are 174, 157, and 103 respectively. Fairmont State University exceeds the amount for the A Moody's ratio.

The West Virginia School of Osteopathic Medicine is not included in the chart because its characteristics as an outlier distort the presentation. With 282 days cash as of June 30, 2018, it could fund more than three quarters of a year of operating expenses at FY 2018 levels from its cash reserves.

Number of Days Cash

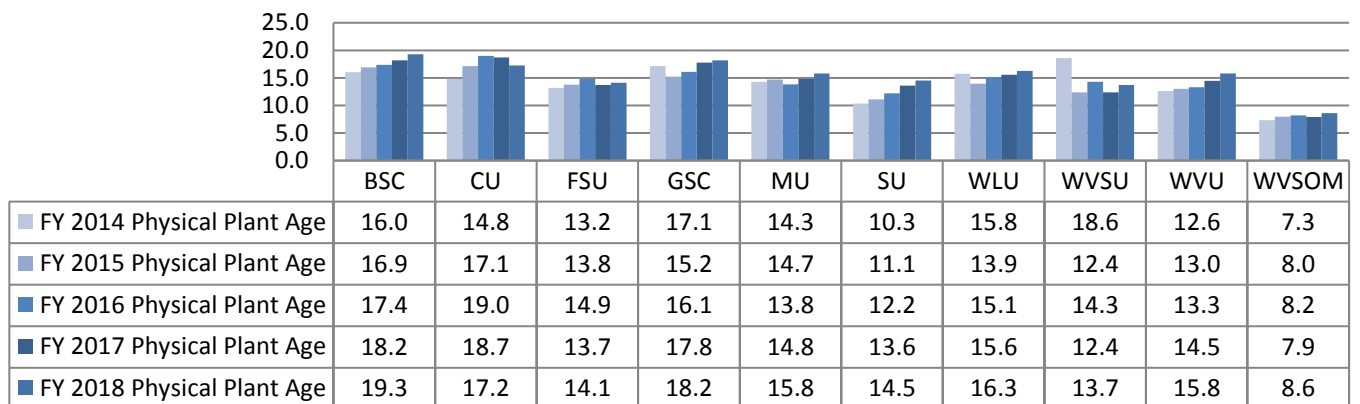


Physical Plant Age

The physical plant age was calculated to estimate the adequacy of institutions' physical resources. This ratio is computed by dividing the annual depreciation expense by the accumulated depreciation. Generally, institutions that have received capital appropriations, borrowed funds or used institutional resources for capital projects reflect a lower physical plant age. The Moody's ratios for ratings Aa, A, and Baa are 13.47, 14.26, 14.91. As mentioned above, institutional borrowing capacity is related to market position and the ability to increase fee revenues to pay debt service.

The results of this calculation demonstrate that dependency upon student fees for capital improvements does not produce adequate facilities. Schools that do not have the capacity to increase student fees to pay debt service are not in a position to improve their facilities.

Physical Plant Age



Conclusion

The net position of the West Virginia Higher Education fund increased over FY2018. Because most of the colleges and universities under the Commission exhibit poor or limited financial health, the adequacy of financial resources is a significant concern.

Appropriations as well as tuition and fee revenues are relatively low; consequently, the ability to build adequate reserves is limited. The dependency upon student fees for capital needs has produced aged facilities at some institutions. If state funding continues to decline, the negative impact on the institutions' financial viability will persist.

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Approval of Sole Record-Keeper Model for West Virginia Higher Education Retirement Plan

INSTITUTIONS: All

RECOMMENDED RESOLUTION: *Resolved*, That the West Virginia Higher Education Policy Commission approves changing plan administration for all sponsored retirement savings options of the West Virginia Higher Education Retirement Plan to a sole record-keeper model.

STAFF MEMBER: Patricia Humphries

BACKGROUND:

In November 2016, after a two-year review process of retirement plan economics and services, the Commission approved multiple modifications related to plan economics, administration/investment services and plan document amendments for the Qualified 401(a) Plan, the 403(b) Supplemental Plan and 457(b) Supplemental Plans. The two-year review resulted in a decrease in cost of administering the plans from 16.5 basis points to 10.5 basis points. The changes were made in an effort to continue to reduce the cost of plan administration and improve probability of investment growth for participants.

Staff have continued to work with the Teachers Insurance and Annuity Association (TIAA) to further improve efficiencies and reduce plan administration costs. The result is a further reduction in the plan revenue requirement from 10.5 basis points to 7.0 basis points effective November 2018. The plan revenue requirement covers expenses for plan recordkeeping, plan sponsor support and participant support.

The next step in our attempts for further reduction in the cost of plan administration while increasing services to participants and improving plan sponsor compliance is to transition the higher education retirement plan to a sole record-keeper. The current multivendor record-keeping set up makes federal and state compliance very complex and unnecessarily increases liability for the Commission as plan sponsor for the West Virginia Higher Education Retirement Plan totaling \$3.3 billion in investment assets.

The attached “Benefits of Sole Recordkeeping” document was prepared to inform and help Commissioners gain understanding of the benefits of a single record-keeper for the programs for which the Commission has fiduciary responsibility. Listed below is a summary of the various benefits to the Commission in moving to a single record-keeper

for the West Virginia Higher Education Retirement Plan.

- Address compliance and fiduciary obligations
- Ease plan administration responsibilities
- Manage costs and investment expenses
- Help employees retire with guaranteed lifetime income choices
- Choose investments from one open-architecture platform
- Get objective advice on the plan's investment choices
- Work with a stable provider; experienced since 1918

TIAA has the ability to accommodate alternative investment options through the open architecture of their existing record-keeping platform. This includes self-directed brokerage option currently available through the supplemental 403(b) and 457(b) programs.

With Commission approval, staff are prepared to work with TIAA to announce the changes, prepare participant communications, rollout restated plan documents, implement employee education programs, provide plan sponsor support and train institutional plan benefit counselors on the new and improved employee services and options.

Benefits of sole recordkeeping

West Virginia Higher Education Policy
Commission

August 29, 2018



Photo: facebook.com/FairmontState

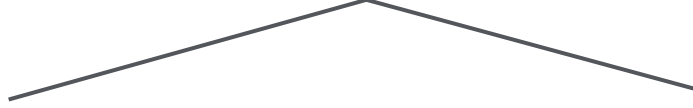
Key industry trends and implications

1	Fiduciary/compliance <i>Evolving regulations have increased fiduciary obligations</i>
2	Investment menu structure <i>Pressure to simplify plans and administration</i>
3	Plan design/operational efficiency <i>Ongoing budget pressure on plan providers</i>

Implications/Key Conditions	Incorporate a strategic approach to help manage risk and maximize outcomes: <ul style="list-style-type: none">▪ Establish a plan governance process▪ Revisit plan design to promote better outcomes▪ Conduct annual plan, investment and fee review▪ Leverage services to meet transaction compliance requirements (loans/hardship withdrawals)
	Manage investments to help simplify administration and maximize participation: <ul style="list-style-type: none">▪ Simplify investment menus (no more than 20 diversified choices); too much choice can lead to employee confusion and inertia▪ Streamline menu to minimize risk and oversight responsibilities
	Implement cost-effective products and services to meet institution budgets: <ul style="list-style-type: none">▪ Streamline plan administration▪ Reduce investment expenses▪ Leverage economies of scale

Key industry trends and implications (continued)

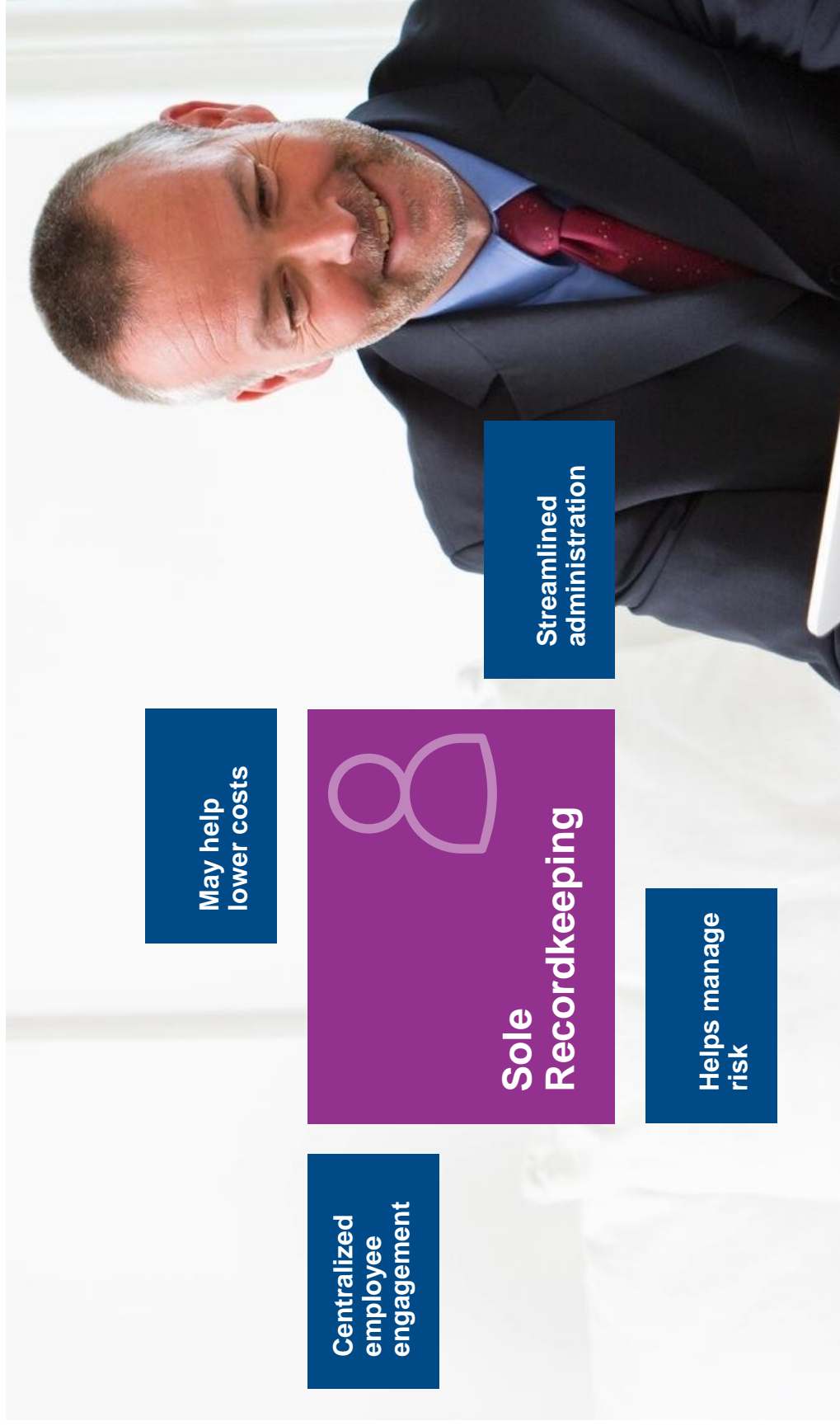
4	Trend/Challenge Employee engagement and savings <i>Americans are not saving enough for retirement</i>
5	Post-65/retirement income solutions <i>Managing the shift from wealth accumulation to retirement income</i>




Implications/Key Conditions Offer integrated programs to help educate, engage and maximize retirement outcomes: <ul style="list-style-type: none">▪ Provide personalized advice through a variety of channels to meet employee preferences▪ Encourage contributions of 10% to 15% of annual income during wealth-building years▪ Motivate employees to enroll early in their careers▪ Create a savings culture that promotes savings beyond the plan▪ Adopt automated services (e.g., auto enroll)	Help employees transition to, and live well in, retirement: <ul style="list-style-type: none">▪ Promote annuitized payments for guaranteed income that can't be outlived¹▪ Provide comprehensive distribution planning▪ Offer opportunities for employees to save for healthcare costs
---	--

1. All guarantees are subject to the claims-paying ability of the issuing company.

The attributes of sole recordkeeping




Comparing retirement plan recordkeeping models: plan sponsors

	Sole Recordkeeper	Multivendor Coordinator	Multivendor
	Least complex to more complex 		
Oversee and coordinate investments	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Meet mandatory reporting and compliance requirements	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Meet mandatory participant fee disclosure requirements	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
Meet required 404(c) disclosure requirements	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ease of administration and data coordination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maximum cost reduction	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comprehensive reporting and analytics	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

☒ Yes
 ☐ Partial
 ☐ No

Comparing retirement plan recordkeeping models: employees

	Sole Recordkeeper	Multivendor Coordinator	Multivendor
	Least complex to more complex 		
Consolidated statement	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Objective, actionable advice for all funds in plan ¹	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
End-to-end online contribution and investment elections	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Centralized loan and hardship withdrawal distribution	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Single point of contact—web and phone	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comprehensive and targeted education programs	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Spanish-language support	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

☒ Yes
 ☐ Partial
 ☐ No

1. Objective advice refers to the third-party advice we deliver to plan participants with respect to their employer-sponsored plan options under applicable Department of Labor guidance where approved by the plan fiduciary/sponsor.

Sole recordkeeping with TIAA



Sole Recordkeeper for approximately 16,000 plans

TIAA's sole recordkeeper product has been built specifically for the 403(b) market.

170 institutions have consolidated to TIAA as their sole provider since 12/31/2010.¹

One recordkeeping platform with access to thousands of mutual funds.

Greater access to employee and institutional data can help promote better outcomes.

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Data as of 3/31/2018, unless otherwise indicated.

1. Source: TIAA institutional data for seven years ended 12/31/2017.

For institutional investor use only. Not for use with or distribution to the public.



Benefits of sole recordkeeping with TIAA

Address compliance and fiduciary obligations

Ease plan administration responsibilities

Manage costs and investment expenses

Help employees retire with guaranteed lifetime income choices¹

Choose investments from one open-architecture platform

Get objective advice on the plan's investment choices²

Work with a stable provider; experienced since 1918

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1. Guarantees are subject to the issuer's claims-paying ability.

2. Objective advice refers to the third-party advice we deliver to plan participants with respect to their employer-sponsored plan options under applicable Department of Labor guidance where approved by the plan fiduciary/sponsor.

Important considerations when evaluating plan fees

Comparing the Weighted Average Expense Ratio for each provider’s investment lineup plus any additional plan fees, i.e., loan fees, fees for distributions, QDROs, etc., is an effective means to evaluate and compare your total plan cost.



Consider the impact of differences in Weighted Average Expense Ratios:		
5 basis points	Assets of \$50M = \$25,000	Assets of \$100M = \$50,000
10 basis points	Assets of \$50M = \$50,000	Assets of \$100M = \$100,000
20 basis points	Assets of \$50M = \$100,000	Assets of \$100M = \$200,000

When annualized over 5 or 10 years, the impact on the retirement accumulations for participants could be significant.



The TIAA group of companies does not provide legal or tax advice. Please consult your legal or tax advisor.

This material is for informational or educational purposes only and does not constitute investment advice under ERISA. This material does not take into account any specific objectives or circumstances of any particular investor, or suggest any specific course of action. Investment decisions should be made based on the investor's own objectives and circumstances.

Investment, insurance and annuity products are not FDIC insured, are not bank guaranteed, are not bank deposits, are not insured by any federal government agency, are not a condition to any banking service or activity, and may lose value. Investment products may be subject to market and other risk factors. See the applicable product literature, or visit TIAA.org for details.

You should consider the investment objectives, risks, charges and expenses carefully before investing. Please call 877-518-9161 for product and fund prospectuses that contain this and other information. Please read the prospectuses carefully before investing.

TIAA-CREF Individual & Institutional Services, LLC, and Nuveen Securities, LLC, Members FINRA and SIPC, distribute securities products. Annuity contracts and certificates are issued by Teachers Insurance and Annuity Association of America (TIAA) and College Retirement Equities Fund (CREF), New York, NY. Each is solely responsible for its own financial condition and contractual obligations.

TIAA.org

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BUILT TO PERFORM.

CREATED TO SERVE.

**West Virginia Higher Education Policy Commission
Meeting of November 16, 2018**

ITEM: Approval of West Virginia Regional Technology Park Deed Conveyance

INSTITUTION: West Virginia Regional Technology Park

RECOMMENDED RESOLUTION: *Resolved*, That the West Virginia Higher Education Policy Commission approves execution of the Deed which conveys to the City of South Charleston certain roadways of the West Virginia Regional Technology Park, and delegates authority to the Chancellor to approve the final documents and execute said Deed.

STAFF MEMBER: Candace Kraus

BACKGROUND:

When the West Virginia Regional Technology Park (Tech Park) was acquired in 2010, the Commission and City of South Charleston (City) agreed to transfer the Tech Park roadways to the City. The City assumed ownership and since then has maintained the roadways including snow removal and inclusion on its paving schedule. For unknown reasons, the 2010 Deed was never executed and legally recorded so the transfer was not accomplished. Therefore, it is necessary to execute a Deed to accomplish a legal conveyance of the roadways.

The Deed will convey to the City all the roadways within the Tech Park, including the main employee entrance lanes, all of which are highlighted on the attached map. In addition to receiving Commission approval, the Deed also must be adopted by Ordinance of the South Charleston City Council in order to be fully executed.

Staff recommends approval of the Deed for final execution following adoption by the City.

DEED

THIS DEED is made and entered into this ____ day of _____, 2018, between the **WEST VIRGINIA HIGHER EDUCATION POLICY COMMISSION**, an agency of the state of West Virginia, (“HEPC” or “Grantor”) and the **CITY OF SOUTH CHARLESTON**, a West Virginia municipality (“Grantee”).

WHEREAS, pursuant to Ordinance No. 2138, introduced before the City Council of the City of South Charleston (the “City”) on December 2, 2010, and thereafter read on December 16, 2010, and adopted December 16, 2010, the City agreed to accept the public dedication of certain roadways located upon the real property owned by Grantors situate at 3200-3300 Kanawha Turnpike, South Charleston, West Virginia (the “Technology Park”); and

WHEREAS, pursuant to Ordinance No. _____, introduced before the City Council of the City of South Charleston on _____, and thereafter read on _____, and adopted _____, Grantee ratified, affirmed, and amended Ordinance No. 2138 and agreed to accept the public dedication of the fee of certain roadways located in the Technology Park; and

WHEREAS, HEPC received a financial award from the Economic Development Administration, United States of America (“EDA”) and, as a result, entered into a Covenant of Purpose, Use and Ownership dated March 31, 2014, of record in the Office of the Clerk of the County Commission of Kanawha County in Deed Book 2884, page 249 (the “Covenant”); and

WHEREAS, the Covenant provides, in part, that Grantors will not “sell, lease, mortgage, or otherwise alienate, any right to or interest in the property” and that “EDA is not authorized to . . . lease, transfer, convey, mortgage or hypothecate the Project to any party without prior approval from EDA . . .;” and

WHEREAS, the EDA has executed a Release of Covenant and Approval of Dedication of Roads, attached hereto as Exhibit A, which (i) releases the Covenant which prohibits the sale or transfer of any property within Technology Park, to the extent, and only to the extent, it prohibits the dedication or conveyance of the roadways, as herein described, in the Technology

Park to the City of South Charleston and (ii) approves the dedication of the roadways in the Technology Park as described below and depicted on Exhibit B attached hereto.

WITNESSETH:

That for and in consideration of the sum of One Dollar (\$1.00) paid by Grantee to Grantor, the receipt of which is hereby acknowledged, in accordance with Ordinance Nos. 2138 and _____, Grantor hereby **DEDICATES, GRANTS, CONVEYS AND TRANSFERS**, subject to all matters of record, to Grantee for public road purposes, its successors and assigns the roadway easement, depicted as part of Tract "D" on the Map (as hereinafter defined), and all those certain fee tracts or parcels of land situate in South Charleston District, Kanawha County, West Virginia ("Roadways"), more particularly shown on the "Map Showing Street Rights-of-Way in South Charleston Tech Park To Be Dedicated To The City of South Charleston Located in The City of South Charleston Kanawha County, West Virginia 3200 Kanawha Turnpike," ("Map") surveyed by Field Surveying Co., Inc. dated October 18, 2010, Revised November 22, 2010, recorded June 1, 2018, in the Office of the Clerk of the County Commission of Kanawha County, West Virginia, in Map Book 79, page 73, a copy of which is attached hereto as Exhibit A . Such roads being designated thereon as: Union Carbide Drive, Hendrickson Drive, Commission Drive, Science Drive and Research Drive. This Dedication and Conveyance also includes the connector road between Kanawha Turnpike and Union Carbide Drive, designated as the Employee Entrance and located at the Northwest corner of aforesaid map.

Grantor, on its own behalf and on behalf of its permittees, lessees, successors, assigns and transferees reserves the right to enter upon the property, to inspect, repair, or replace any utility lines or components thereof existing upon the property hereby conveyed upon date hereof.

Grantee further acknowledges and accepts that any buildings or other structures which currently encroach upon the property herein conveyed shall be entitled to remain in place, until removed by the Grantor, its Successors, or Assigns.

Grantor makes no warranty as to the title of the property herein conveyed.

DECLARATION OF CONSIDERATION OR VALUE: Grantor and Grantee hereby declare that this transfer is from an Agency of the State of West Virginia and therefore **EXEMPT** from the excise tax imposed by § 11-22-2 of the Code of West Virginia.

DECLARATION OF EXEMPTION FROM NON-RESIDENT WITHHOLDING TAX: The Grantor declares that it is an Agency of the State of West Virginia and therefore not subject to Non-Resident Withholding Tax.

IN WITNESS WHEREOF, Grantors and Grantee have caused this Deed to be executed by their respective duly authorized officers as of the day and year first above written.

**WEST VIRGINIA HIGHER
EDUCATION POLICY COMMISSION**

By: _____

Its: _____

Title: _____

**STATE OF WEST VIRGINIA,
COUNTY OF KANAWHA, to-wit:**

Before me, a Notary Public in and for Kanawha County, personally appeared _____, the _____ of West Virginia Higher Education Policy Commission, who acknowledge the execution of the foregoing **Deed** on behalf thereof.

Witness my hand and Notarial Seal this _____ day of _____.

My commission expires: _____.

CITY OF SOUTH CHARLESTON

By: _____

Name: _____

Title: _____

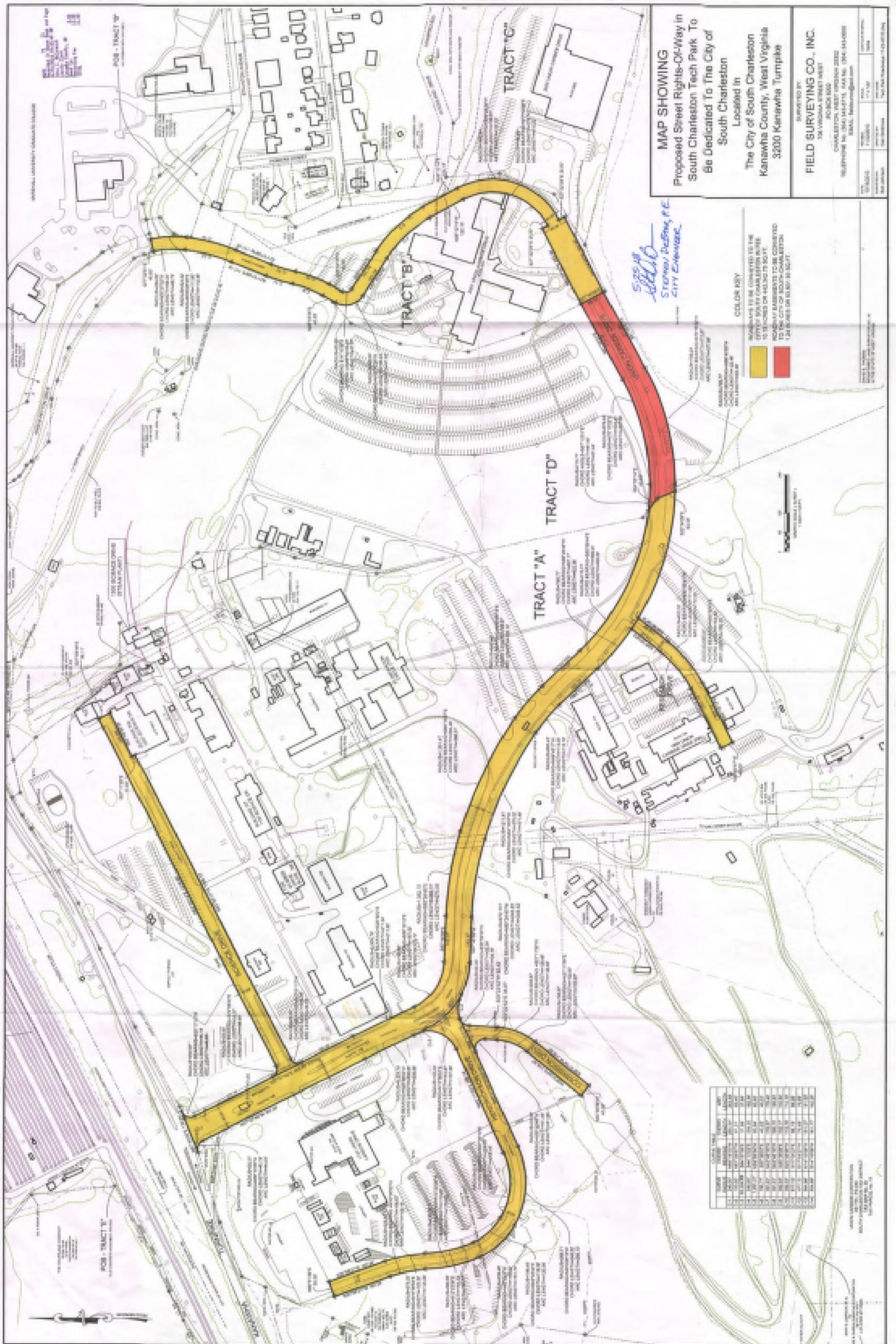
**STATE OF WEST VIRGINIA,
COUNTY OF KANAWHA, to-wit:**

Before me, a Notary Public in and for Kanawha County, personally appeared _____, the _____ of the City of South Charleston, who acknowledge the execution of the foregoing Deed on behalf thereof.

Witness my hand and Notarial Seal this _____ day of _____.

My commission expires: _____.

This document was prepared by: Scott E. Barnette, Bowles Rice LLP
600 Quarrier Street, Charleston, West Virginia 25301.



MAP SHOWING
Proposed Street Rights-Of-Way in
South Charleston Tech Park To
Be Dedicated To The City of
South Charleston
Located in
The City of South Charleston
Kanawha County, West Virginia
\$200 Kanawha Turnpike

SURVEYED BY:
FIELD SURVEYING CO., INC.
101 VIRGINIA STREET WEST
PO BOX 500
CHARLESTON WEST VIRGINIA 25302
TELEPHONE NO. (304) 344-4411 FAX NO. (304) 344-0088
EMAIL: info@fieldco.com

DATE	BY	FOR
10/1/2008	J. D. HARRIS	FIELD SURVEYING CO., INC.

TRACT	ACRES	OWNER	REMARKS
TRACT A	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT B	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT C	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT D	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT E	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT F	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT G	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT H	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT I	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT J	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT K	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT L	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT M	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT N	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT O	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT P	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT Q	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT R	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT S	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT T	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT U	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT V	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT W	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT X	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT Y	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT
TRACT Z	1.14	FIELD SURVEYING CO., INC.	100' BROADWAY STEAM PLANT

RELEASE OF COVENANT AND APPROVAL OF DEDICATION OF ROADS

This Release of Covenant and Approval of Dedication of Roads ("Release and Approval") is entered into this 17th day of September, 2018, by and between the **ECONOMIC DEVELOPMENT ADMINISTRATION, UNITED STATES OF AMERICA** (the "EDA"), and the **WEST VIRGINIA HIGHER EDUCATION POLICY COMMISSION**, an agency of the state of West Virginia (the "HEPC").

WHEREAS, the HEPC is the owner of certain real property situate at 3200-3300 Kanawha Turnpike, South Charleston, West Virginia, known as the Technology Park (the "Property"); and

WHEREAS, pursuant to Ordinance No. 2138, introduced before the City Council of the City of South Charleston (the "City") on December 2, 2010, and thereafter read on December 16, 2010, and adopted December 16, 2010, the City agreed to accept the public dedication of certain roadways located within the Property; and

WHEREAS, the HEPC received an award in the amount of \$5,250,000.00 from the EDA to assist in financing Core and Shell Renovations to Building 770, located on the Property, designated as EDA Project No. 01-79-14076 (the "Project"); and

WHEREAS, the HEPC and the EDA entered into a Covenant of Purpose, Use and Ownership dated March 31, 2014, of record in the Office of the Clerk of the County Commission of Kanawha County in Deed Book 2884, page 249 ("Covenant"), a copy of which is attached hereto as Exhibit A, and provides, in part, that the HEPC will not "sell, lease, mortgage, or otherwise alienate, any right to or interest in the Property," and that

the EDA is not authorized “to . . . lease, transfer, convey, mortgage or hypothecate the Project to any party without prior approval from EDA . . .”; and

WHEREAS, the HEPC and the City desire to execute a Deed of Dedication to complete the dedication of the roadways within Property to the City; and

WHEREAS, before the HEPC can dedicate the roadways within the Property to the City and execute a Deed of Dedication to the City, the Covenant prohibiting the sale or transfer of any property within the Property must be released as it applies to the roadways within the Property, and the dedication of the roadways from the HEPC to the City must be approved by the EDA; and

WHEREAS, the EDA has agreed to (i) release the Covenant which prohibits the sale or transfer of any property within the Property to the extent, and only to the extent, it prohibits the dedication and conveyance of the roadways within the Property to the City and (ii) approve the dedication of the roadways from the HEPC to the City.

NOW, THEREFORE, WITNESSETH: The EDA hereby RELEASES the Covenant which prohibits the sale or transfer of any property within the Property to the extent, and only to the extent, it prohibits the dedication and conveyance of the roadways, including the connector road between Kanawha Turnpike and Union Carbide Drive, designated as the Employee Entrance, located within the Property to the City, all being more particularly described on the “Map Showing Street Rights-of-Way in South Charleston Tech Park To Be Dedicated To The City of South Charleston Located in The City of South Charleston Kanawha County, West Virginia 3200 Kanawha Turnpike,” surveyed by Field Surveying Co., Inc. dated October 18, 2010, Revised November 22, 2010, recorded June 1, 2018, in the Office of the Clerk of the County Commission of

Kanawha County, West Virginia, in Map Book 79, page 73, attached hereto as Exhibit B. The EDA also hereby APPROVES the dedication of these roadways within the Property, as shown on Exhibit B, to the City and the execution of the Deed of Dedication from the HEPC to the City.

IN WITNESS WHEREOF, the Economic Development Administration, United States of America and the West Virginia Higher Education Policy Commission have caused their names to be hereunto signed as of September 11th, 2018.

[Signature Pages Follow]

ECONOMIC DEVELOPMENT ADMINISTRATION,
UNITED STATES OF AMERICA

By: Linda Cruz-Carrillo
Name: LINDA CRUZ-CARRILLO
Its: Regional Director

STATE OF Pennsylvania,
COUNTY OF Philadelphia, To-Wit:

I, Sancha Gomez, a Notary Public in and for the State and
County aforesaid, do certify that Linda Cruz-Carrillo as Regional Director
of the ECONOMIC DEVELOPMENT ADMINISTRATION, UNITED STATES OF
AMERICA, who signed the writing above, bearing date the 11th day of September, 2018,
on behalf of the ECONOMIC DEVELOPMENT ADMINISTRATION, UNITED
STATES OF AMERICA, has this day in my said County, before me, acknowledged the
said writing to be the act and deed of said banking association.

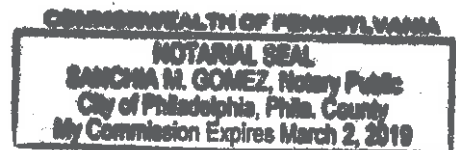
Given under my hand this 11th day of September, 2018.

My commission expires 3/2/2019

Sancha M. Gomez

Notary Public

(S E A L)



WEST VIRGINIA HIGHER EDUCATION POLICY COMMISSION

By: Carolyn Long
Name: Carolyn Long
Its: Interim Chancellor

STATE OF WEST VIRGINIA,
COUNTY OF Kanawha, To-Wit:

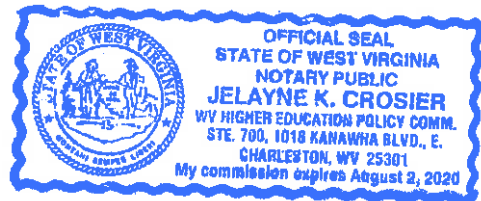
I, Jelayne Crosier, a Notary Public in and for the State and
County aforesaid, do certify that Carolyn Long, as Interim Chancellor
of WEST VIRGINIA HIGHER EDUCATION POLICY COMMISSION, who signed the
writing above, bearing date the 11 day of September, 2018, on behalf of WEST
VIRGINIA HIGHER EDUCATION POLICY COMMISSION, has this day in my said
County, before me, acknowledged the said writing to be the act and deed of said banking
association.

Given under my hand this 11 day of September, 2018.

My commission expires August 2, 2020

Jelayne K. Crosier

Notary Public



(S E A L)

Prepared by:
Scott E. Barnette, Esq.
BOWLES RICE LLP
P.O. Box 1386
Charleston WV 25325-1386
Phone: (304) 347-1753
sbarnette@bowlesrice.com