Physician Assistant Program
20 year report
Letter from Ted Ruback

On August 12, 2016, the OHSU Physician Assistant Program held its first-ever alumni reunion to celebrate the 20th anniversary of the program. The celebration recognized the many accomplishments of the program, most significantly, the 576 graduates who have joined the ranks of the PA profession since the program’s inception. It was a wonderful evening, attended by more than 100 alumni, as well as members of the faculty and staff, family and friends.

The event included tours of the Collaborative Life Sciences Building, located on Portland’s South Waterfront; the new home of the program. Most importantly, the evening gave people a chance to reconnect with old friends, classmates, faculty and staff. One attendee put it best when he told me, “I haven’t seen most of these folks for many years, and yet we sat down together for dinner and we easily just started where we left off.”

A heartfelt shout-out was given to the inaugural Class of 1997, for having 11 of its 12 graduates in attendance. In fact, almost 20 percent of our grads attended.

As the evening progressed, I had the opportunity to introduce everyone to the current faculty and staff of the program starting with my co-founders, Colleen Schierholz and Pat Kenney-Moore. It was a delight for me to publicly acknowledge Colleen and Pat for their pivotal role in the development, implementation and initial, as well as ongoing, success of the program.

Colleen was my first hire as program director. Most graduates will fondly remember Colleen as the first person with whom they interacted. All students and graduates are well aware of how highly I value the process of admissions in maintaining the quality of our program and our profession. From the beginning, Colleen shared that value with me and, as director of admissions, she contributed to the success of our program by ensuring and maintaining a fair and deliberate admissions process.

Pat Kenney-Moore joined Colleen and me in April of 1995, five months before the matriculation of the first class. As academic coordinator, Pat worked closely with me in the design and implementation of the didactic curriculum. In 1999, I had the pleasure of promoting Pat to the position of associate director of the program. In her dual role, Pat has remained a loyal, reliable and valued partner in the leadership of the program.

Pat is recognized as a master teacher. She is lauded by faculty and students for her clear, organized and engaging instruction. She consistently adheres to very high standards while supporting students in their efforts to meet those standards. There is no stronger student advocate than Pat.

Colleen, Pat and I have remained loyal and committed partners in our efforts to optimize the success of our program and our graduates. I owe them both a great debt of gratitude for their friendship and dedication throughout the more than twenty years we have worked together. I will always be thankful for the wonderful team of creative, talented and devoted people I had the privilege of working with during my tenure.

In the summer of 2015, after nearly 22 years, I decided that it was time for me to step down as program director. Although difficult, the decision was the right one for both me and the program.

I came to OHSU in 1994, charged with developing and implementing the first PA Program in the state. I believed that with the support and resources available to me at OHSU, we could create a challenging and academically rigorous program that would rival any of the long-established and well-respected PA programs in the country at the time.

The selection of the first class was challenging. The first application cycle attracted more than 200 applications for 14 seats. I will always be beholden to the inaugural class for their trust and belief in me and their contribution to the creation of the OHSU PA Program.

Every student and graduate from that point forward has contributed to the overall success and reputation of the program. Our first 19 classes of graduates have a 99.3 percent first-time pass rate on our national certification exam.

Currently, our program is ranked fifth among PA programs by U.S. News & World Report.

The occasion of the 20th anniversary provides an opportunity for those of us who have dedicated our careers to the success of the OHSU Physician Assistant Program, to celebrate its significant contribution to the health care workforce. It’s a laudable achievement of which we are all exceedingly proud.
Physician assistants play a vital role in health care. As experts in general medicine, they work collaboratively with health care teams to provide patient-centered care. This care could include obtaining medical histories, performing physical examinations, diagnosing and treating illnesses, ordering and interpreting lab tests, performing medical procedures, assisting in surgical operations, counseling patients on preventive health and prescribing medications.

The PA profession was created to expand access to health care and to improve and extend patient care. The profession has grown since its start in the mid-sixties when it began as a creative solution to a recognized shortage and maldistribution of primary-care physicians. This was at a time when veterans with considerable medical training were returning from military service.

In 1965, Eugene A. Stead Jr. M.D., of Duke University Medical Center, selected four Navy Hospital Corpsmen to be the first class of PAs. After completing a curriculum based on the fast-track training of doctors during World War II, the first class graduated in 1967.

The Oregon Society of Physician Assistants was incorporated in 1982. In the early 1990s, the society along with the Oregon Office of Rural Health and other rural health constituencies lobbied for Senate Bill 607 which recognized that Oregon faced a shortage of primary care providers in rural areas and that PAs could play a role in addressing this problem.

The bill passed, and in 1991, the Oregon Office of Rural Health was charged with studying the requirements and opportunities for establishing a physician assistant program in the state. The resulting report supported creating a PA program in Oregon.

In 1993, the Oregon Legislature awarded $150,000 in Oregon State Lottery Funds to start the program and determined that OHSU would be the most appropriate host institution.

The OHSU Physician Assistant Program was established in 1995 and graduated its first class in September 1997. In the spring of 2001, the PA Program was recognized as a freestanding Division within the School of Medicine.
The program is a 26-month, full-time course of study leading to a Master of Physician Assistant Studies degree. The didactic phase of the program is 12 months; the clinical phase is 14 months.

The OHSU PA Program currently ranks fifth among graduate-level physician assistant programs in the nation according to the 2015 rankings of the U.S. News & World Report.

On August 12, 2016, the program celebrated its 20th anniversary.

Here are some memories of and reflections on those twenty years from three people who worked together to create and implement Oregon’s first physician assistant program.

The founders
Ted J. Ruback, M.S., P.A.-C., was hired as the founding director of the OHSU PA Program on October 1, 1994. He came to OHSU from the Emory University Physician Assistant Program where he was associate director and director of admissions.

“My wife was born and raised in Washington State,” he says. “We had met during my first year as a practicing PA in a small rural town in Central Washington. After 11 years in Atlanta, we were both interested in returning to the Northwest.”

At the time, he notes, the number of PA programs in the country was growing in response to the increasing interest in the profession. His experience as a program leader at Emory gave him the confidence to consider moving to the challenging role of program director for a new PA program.

Colleen Schierholtz was hired as an assistant to the director on November 28, 1994. Colleen was promoted in 2001 to the role of director of admissions. She came to the program from a part-time position elsewhere at OHSU and remembers that the PA program position attracted a competitive pool of candidates. “Once I was hired, I recall Ted was concerned about whether or not I could commit to staying with the program for at least five years. He was looking to build a program and wanted to get the right people on board. Well, I guess he needn’t have worried about my long-term commitment because here we are 21 years later.”

Pat Kenney-Moore, Ed.D., P.A.-C., was hired as the academic coordinator for the PA Program on April 1, 1995. She was promoted to the dual role of associate program director and academic coordinator in 1999. Kenney-Moore moved to Oregon from Los Angeles where she had transitioned from full-time clinical work in a primary care clinic to an academic role as an adjunct instructor at the University of Southern California Physician Assistant Program. Her role there included classroom teaching, curriculum and test development.

“My commute was three hours a day, so I had plenty of time to contemplate opportunities that did not involve such a terrible drive! I saw a flier on the bulletin board outside my USC office space advertising a new program starting in Oregon, and so I applied, never thinking I even had a chance. After traveling to Oregon and interviewing with Ted I fell in love with the idea of helping to start something new — and I was delighted and terrified to be offered the position of academic coordinator.”

Building a rigorous student-centered program
By the time Ruback arrived in Oregon in 1994, the state’s Office of Rural Health had created a list of more than 1,600 potential applicants interested in enrolling in a baccalaureate-level physician assistant program.

With an increasing number of programs at the time moving to the master’s degree, it was his intent to start the program as a graduate-level program, Ruback says, but with the high level of interest in an undergraduate degree, the program began at the baccalaureate level and was elevated to the master’s degree in 2000.

His goal was to “create a challenging program with a strong emphasis on basic and clinical sciences that would ensure our graduates would be well prepared to provide highly competent care to their patients.”

Because rural health constituencies played a key role in advocating for a PA program in Oregon, Ruback set goals for the program with their needs in mind. The program’s mission — to educate
physician assistants to provide primary care services to underserved populations, both rural and urban — has, he says, changed very little over time. For her part, Pat Kenney-Moore wanted to create early opportunities for students to get exposure to patients in hospital or clinic settings: “So that when they started their clinical phase they could focus on applying the medicine rather than trying to figure out what to say and how to act. I am proud,” she adds, “to have had the opportunity to help transform what could be a competitive sink or swim experience into a more humane, student-learning-centered experience.” Her aims for the program are also informed by her interest in observing students’ mood and morale over the course of the program’s didactic year as they learn how to assume a new professional identity. “Living this intense experience with a new class of students each year reminds me of the challenges that professional development programs present to their participants.” My goal,” says Colleen Schierholtz, “was to contribute as much as possible to the successful implementation of the program.” She had to reach out to the hundreds of people interested in becoming physician assistants and to manage “the creation of an application, a review process, an interview process, and a final selection process.” The program evolves along with the profession As program director, says Ruback, “I have encouraged faculty and staff to share ideas and to suggest new approaches, even when things were seemingly working well.” One example: three years ago, the program overhauled its highly successful curriculum. “Our teaching methodologies needed to change to keep up with the expectations and learning experience of a new generation of student,” says Ruback, explaining that today’s students work in groups and employ technology seamlessly in their learning processes. “The lecture-learner format is not their preferred method of learning.” Kenney-Moore observes that the students, “have gotten younger while I have gotten older!” The average student age in the program’s first class was 33. Today the average age is about 27. This follows a national trend toward younger PA applicants. While students 20 years ago tended to be on their second career, today’s students have often wanted to be a physician assistant since high school. The profession, she says, has become more visible. “At the start of this journey, I was one of only 600 licensed PAs in the state of Oregon. In the early years, we spent a lot of time educating people about the PA profession including the scope of practice and role of the PA. While that work still isn’t done, we do find that there is an increased awareness of the PA role. I still find it necessary to explain my professional role on a fairly regular basis.” Ruback, who has been a physician assistant for more than 37 years, agrees. While the role has certainly expanded, he says, “there are still too many people who don’t know who we are or what our role is in health care. “The scope of our practice has changed,” he continues, “and the scope and breadth of our education has changed along with it. Some programs early on were 12 months in length, the average program now is 27 months.” Kenney-Moore anticipates that “there will be wonderful varied opportunities for our current and future graduates — they will find niches in areas of medicine far beyond the role that was originally imagined for them when the profession was conceived by physicians in the 1960s.”
Advocating for the profession

The physician assistant profession is about to celebrate its 50th anniversary, says Ted Ruback, but he is dismayed that occasionally he still has to explain himself to people who don’t know the role of PAs in health care. “That’s the profession’s fault and something we all need to continue to focus on. In our program, from day one, we teach students how important it is to explain yourself to patients and others, to introduce yourself proudly and appropriately as a PA, an important member of the team in the health care delivery system of today.”

In 2001 the program was recognized as a freestanding Division within the School of Medicine. This meant that Ruback attended meetings of the clinical chairs of the School of Medicine. “My presence clearly enhanced our visibility among the school’s leaders,” he says. Additionally, “it provided opportunities for me to advocate for and raise issues important to PAs practicing clinically on campus as well as issues important to the program.”

Advocacy also happens at the state level. Kenney-Moore and Ruback have been active members of the Government Affairs Committee of the Oregon Society of Physician Assistants for nearly 20 years. They have supported legislation that allows PAs to practice to the full extent of their education and experience. “I’m very proud of the advances we’ve achieved at the state level in improving the practice for PAs in Oregon,” says Ruback.

Over the course of their careers, many PAs practice in two or three specialty areas. A PA can switch from working in internal medicine, to say, obstetrics and gynecology without getting additional training. This gives them the flexibility to meet the changing needs of their patients, employers and communities.

“This flexibility is what make us unique among health professions,” says Ruback. Recently, he says, the National Commission on Certification of Physician Assistants has moved in the direction of recognition of specialty credentials. Many in the profession feel, he says, that this trend runs counter to efforts to maintain the profession’s valuable flexibility.

Flexibility, “is the reason I chose to become a PA rather than going to medical school,” says Kenney-Moore. “I have provided primary patient care services since becoming a PA 25 years ago, but if I wanted to go into a different specialty tomorrow, I would be able to do so without being required to completely restart my education.”

A move to new facilities catalyzes change

In 2015, the PA Program moved from Gaines Hall on OHSU’s Marquam Hill Campus to its new home in the Collaborative Life Sciences Building on the developing South Waterfront Campus.

“It’s great to be part of such a growing, vibrant area. The mix of businesses and transportation, as well as the educationally collaborative space where we work, is invigorating,” says Colleen Schierholtz.

Staff and faculty from the PA Program now work down the hall from their counterparts in the School of Medicine, an arrangement that fosters the “sharing of our challenges, successes and common goals,” says Ruback.

Additionally, the new classroom space, which faculty helped design, supports varied forms of teaching and learning. Since the move, there has been an integration of more learning techniques including lecture, problem-based learning and team-based learning.

The new patient assessment rooms are furnished just like clinic rooms so students can practice skills in a realistic setting, says Kenney-Moore, who remembers the program’s old home in Gaines Hall with great fondness. Still, she says the new facilities are “nicer, more modern and provide new electronic resources.”

She feels that the move to the new facilities catalyzed change in both the M.D. and PA program curricula. “Our new curriculum aligns content in clinical medicine, basic science, laboratory science and pharmacotherapeutics and allows us to have an integrated theme for each week.”

Top specialties of practicing OHSU PA alumni

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<th>Specialty</th>
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The program has had a commitment to providing health care to rural Oregon since its inception, says Ruback. Two recent initiatives have strengthened and expanded this mission.

In 2013, the Combined M.D.-PA Rural Rotation was developed by faculty from the School of Medicine and the Physician Assistant Program. In it, medical and PA students spend a rural primary-care rotation together.

And in 2015, OHSU launched the Campus for Rural Health in Klamath Falls and Coos Bay.

“We were early supporters and adopters of the rural campus, welcoming the additional clinical training resources the campus provided for our clinical phase students,” says Ruback. “The vast majority of our clinical rotation sites occur outside of metropolitan Portland and have from the outset. Our students gain so much from spending time out in the community, off the hill and in rural parts of the state.”

During Ruback’s tenure as program director, “the class size has grown from 14 to 42. The faculty has grown as well, all of which has changed my job over the years but all for the better.”

His advice to someone developing a program today: Build strong relationships with university leadership. Ensure that adequate resources exist to meet the needs of the program and its students and advocate for as much local control of these resources as possible. Develop a good set of policies and procedures and understand that these are living documents that must constantly be updated and reviewed.

Over the course of the past two decades, Kenney-Moore has also had to adapt to changes, especially in the way education is delivered. “When I first arrived, we photocopied everything and used slide carousels and overhead projectors. These days, students take notes on computers, lectures are digitally recorded and no one buys textbooks! Everything is online.

“One of our biggest responsibilities is to make sure we assist students in becoming savvy consumers of medical information. It is no longer enough to memorize information in a book — today's students need to be able to read the medical literature with a discerning eye as treatment recommendations change in a lightning-fast manner.”

Schierholtz was involved in the development of the Central Application Service for Physician Assistants and served for six years on the CASPA Recruitment and Admissions Committee. “It’s been very satisfying to have the ability to impact the admissions process through a centralized application process and to contribute to the creation of a mechanism for gathering the wealth of information we have about those applying and matriculating into PA school.”

The future of the profession

After 25 years of involvement in PA education Ruback assumes teaching methodologies will continue to evolve as students change. He thinks it likely that the profession could turn to a doctoral preparation “although I hold fast to the idea that the doctorate in medicine is still the M.D. or D.O.”

Kenney-Moore predicts “a leveling off and an increasing stratification of PAs across specialties as the push to create more health care providers comes to fruition. I see our graduates working in primary care medical homes as well as specialties, and anticipate shifts in the M.D.-PA relationship, particularly as more physicians move to the employed physician role rather than becoming small business owners.

And, she continues, “I would like to see more PAs in administrative roles so that policies and procedures in large and small health care and governmental organizations take into account the PA profession and its contribution to the health care of America. As a profession we are only 50 years old. We are still defining ourselves in the many arenas of health care.”

With 210 PA programs currently accredited and more being established, Schierholtz emphasizes the need to maintain quality by collaborating more with other programs and by tapping into the support and resources offered by organizations such as the Physician Assistant Education Association.

Moving forward

“After more than 20 years, Ted Ruback says, “I am happy to turn over the leadership of the program to Glenn Forister and let him set a new vision for the future of the program. My goal is to continue to engage with the program although at this point perhaps more as a hobby than a job.”
Pat Kenney-Moore is now at a point in her career where she is starting to see retirement on the distant horizon. “But I can’t imagine a day that doesn’t involve teaching. My goal is to continue teaching for as long as the program will have me. I am looking forward to finding more time for researching and writing about the student experience of medical education — a topic that has been underemphasized in the past and one that I think is hugely important to our current and future students.”

And Colleen Schierholtz who has taken a few courses towards her master’s degree over the last 20 years, plans now to work consistently towards an M.S. in Postsecondary Adult and Continuing Education at Portland State University. “The master’s degree will allow me to continue to better inform best practices in our admissions and recruitment efforts.”

Interprofessional education

Interprofessional education in focus

In the past, graduates of the health care professions often started their careers with very little practice working as members of an interprofessional team and very little understanding of the defined role of the various members within the team. Interprofessional education happens when students from two or more professions in health care learn about each other by working together, learning together and collaborating to provide patient-centered care. It is critically important to the future of health care delivery.

The Collaborative Life Science Building has enhanced opportunities for students from all programs to interact and collaborate. Interprofessional education classes that focus on patient safety and interprofessional team practice are curriculum requirements in all OHSU programs. Extending interprofessional education beyond the classroom to the clinic setting is supported by OHSU and has been a priority for the PA Program.

The rural rotation

The Combined M.D.-PA Rural Rotation was developed jointly by PA and medical school faculty members in 2013. Pairs of M.D. students and PA students spend a rural primary care rotation together. During the rotation, students share both clinical and living environments as well as a common curriculum that involves implementing a community-based project. Students reflect on their experience and how the rural team-based experience has impacted their interest in living and practicing in a rural community.

The Campus for Rural Health

In September 2015, OHSU launched the Campus for Rural Health in Klamath Falls and Coos Bay, Oregon. Students from six different health care professions (medicine, physician assistant, dentistry, pharmacy, nursing and public health) live together, train together, and experience rural life as a shared and meaningful aspect of their health care education. The mission of the OHSU rural campus is to “develop innovative approaches to optimize the health of individuals who reside in rural communities” while “creating an interprofessional workforce competent to improve the health of rural populations.”

Launch of the rural track

In January of 2016 the PA program broadened its role in serving rural and underserved populations in Oregon, by launching a rural track for students. The rural track is designed to provide students who wish to practice medicine in rural areas with enhanced opportunities to train in such settings. Through a specified clinical year curriculum, students spend time at each of the rural campus locations in addition to having the majority of their clinical experiences scheduled in rural settings. Students enrolled in the PA Program Rural Track are also eligible to apply for the Oregon Primary Care Loan Forgiveness Program. This state-funded program provides tuition forgiveness to students who commit to spending at least their first year of clinical practice in a rural community.
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