

FOR APPROVAL

PUBLIC

OPEN SESSION

TO: Executive Committee

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DATE: November 6, 2014 for December 1, 2014

AGENDA ITEM: 4 (a.)

ITEM IDENTIFICATION:

Proposal for a new professional graduate degree program, the Master of Professional Kinesiology (M.P.K.), Faculty of Kinesiology and Physical Education

JURISDICTIONAL INFORMATION:

Matters brought forward from the Academic Board's Committee which require Executive Committee confirmation include new graduate programs and degrees (*Academic Board Terms of Reference, Section 5.3.2.ii*)

The Committee on Academic Policy and Programs has the authority to recommend to the Academic Board for approval new graduate programs and degrees. (*AP&P Terms of Reference, Section 4.4.a.ii*)

GOVERNANCE PATH:

1. Committee on Academic Policy and Programs [for recommendation] (28 October, 2014)
2. Academic Board [for approval] (November, 13, 2014)
3. **Executive Committee [for confirmation] (December 1, 2014)**

PREVIOUS ACTION TAKEN:

The proposal for the Master of Professional Kinesiology received approval from the Faculty of Kinesiology and Physical Education Faculty Council on September 22, 2014.

HIGHLIGHTS:

This is a proposal for a new professional master's program in Professional Kinesiology. The program will be offered by the Faculty of Kinesiology and Physical Education and will confer the professional degree designation, Master of Professional Kinesiology (M.P.K.).

The M.P.K. is designed to provide advanced level research-informed educational and leadership experience in the field of professional kinesiology. Graduates of this program will acquire expertise in knowledge synthesis, translation and application and experience with inter-professional health care teams and diverse practice areas. They will develop the skills to evaluate clinical and program effectiveness, and the ability to conceptualise future practice. The faculty associated with the proposed program have expertise across a broad spectrum of clinical and research approaches in enhancing health and have strong linkages with premier clinical research facilities within the nine fully affiliated hospitals of the University of Toronto. There is no comparable program in Ontario that provides advanced training and leadership within the profession and practice of Kinesiology.

The proposed full-time, four-session, course-based 12.0 FCE program will be delivered in individually-customized, flexible modules with customizable paths to accommodate student interests and creativity. The curriculum is informed by a case-based approach to learning and features a strong experiential component within the framework of three practica consisting of a total of 600 hours. M.P.K. students will participate in the Interprofessional Education (IPE) program at the University of Toronto which gives students unparalleled access to, and experience working with, other health professions in hospitals and other clinical settings in a highly collaboration setting. The program culminates in a group capstone project.

The proposed program is the result of a highly consultative process involving faculty members from the Rehabilitation Sciences; Factor-Inwentash Faculty of Social Work; the Ontario Kinesiology Association and the College of Kinesiology Ontario.

Glenn Gaesser, PhD, Arizona State University and Robert Ross, PhD, Queen's University conducted an external appraisal of the proposed M.P.K. on August 29, 2014. The final report was very positive and contained a small number of specific suggestions and recommendations. The Dean's response to the review report dated October 6, 2014, includes the establishment of a working group to develop and implement the practicum. The final proposal received approval from the Faculty of Kinesiology and Physical Education on September 22, 2014.

In response to a question raised by a member of Committee on Academic Policy and Programs, section 8 - Assessment of Learning - in the proposal has been revised to include a more detailed section on evaluation of the program.

FINANCIAL IMPLICATIONS:

Any new/additional financial obligations resulting from this program will be met at the Faculty/Divisional level.

RECOMMENDATION:

Be It Confirmed

THAT the proposed Master of Professional Kinesiology program, which will confer the new degree of M.P.K., as described in the proposal from the Faculty of Kinesiology and Physical Education dated October 1, 2014 be approved effective for the academic year September 2016.

DOCUMENTATION PROVIDED:

Proposal for a new Master of Professional Kinesiology, Faculty of Kinesiology and Physical Education

University of Toronto

New Graduate Program Proposal

Name of Proposed Program:	Professional Kinesiology
Degree Name and Short Form: MPK	Master of Professional Kinesiology (MPK)
Program Name:	Kinesiology
Professional Program (yes/no)	YES
Unit (if applicable) offering the program:	Graduate Department of Exercise Science
Faculty / Academic Division:	Faculty of Kinesiology and Physical Education
Faculty / Academic Division Contact:	Scott Thomas
Graduate Unit Contact:	Marius Locke
Anticipated start date of new program:	August 2016
Version Date:	November 5, 2014

New Graduate Program Proposal

Master of Professional Kinesiology

Graduate Department of Exercise Sciences

Faculty of Kinesiology and Physical Education

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1 Executive Summary

Statement of purpose:

The proposed *Master of Professional Kinesiology* (MPK) program will be a 4-session course-based program delivered through the *Graduate Department of Exercise Sciences* within the *Faculty of Kinesiology and Physical Education*. **Its overarching purpose is to provide an advanced level of research-informed educational and leadership experience in the field of professional kinesiology.** The MPK advances the mission of the Faculty of Kinesiology and Physical Education to “develop, advance and disseminate knowledge about physical activity, health and their interactions through education, research, leadership and the provision of opportunity.”

The academic discipline of Kinesiology is an integrative and comprehensive study of physical activity, health, and their interactions from biophysical, sociocultural, and behavioural perspectives. The range of investigation in this field of study are varied, from studies of biochemical responses to specific exercise stimuli through integration of motor control and biomechanical analyses of shared activities to studies of societal perspectives on the impact of hosting mega-sport events. The proposed MPK will focus on specific aspects of the broader discipline, namely the development of students’ competencies in devising, implementing, and evaluating exercise strategies to improve health and physical performance. Students will develop the abilities to translate leading edge Kinesiology research findings into professional competencies through a mixture of classroom, case-based, laboratory, and experiential (i.e., professional placements) educational approaches. Graduates of this program will acquire expertise in knowledge synthesis, translation and application, experience with inter-professional health care teams, diverse practice areas, evaluation of clinical and program effectiveness, and conceptualising of future practice. The professional practice of Kinesiology is evolving in the province of Ontario, and the proposed MPK at the University of Toronto will contribute to the development of an important professional leadership cadre.

The MPK will be the first graduate degree program of its kind in Ontario and as a consequence, graduates will have an opportunity to be national leaders in the development of the profession of Kinesiology. At present, there are no other programs of this kind in Ontario; although other professional, course-based Master’s programmes exist, none focus on professional Kinesiology. Development of the profession of Kinesiology is important for the health of Ontarians. With the growing recognition of physical inactivity as a risk factor for a myriad of physical and psychological illnesses, and given the personal and socio-economic costs associated with such illnesses, the emphasis on the role and practice of those in Kinesiology has grown substantially. Concomitant with these societal shifts is a need to develop competencies for practising Kinesiologists, including clinical expertise, research-informed practice, and evaluation.

The Faculty of Kinesiology and Physical Education is uniquely positioned to offer this proposed program. Current faculty members have expertise across the spectrum of sociocultural, behavioural, and biophysical approaches to enhancing health and physical performance of

diverse populations, ranging from healthy, high-performance athletes to those with chronic diseases. The potential placement sites in the Greater Toronto Area include clinical sites, the Canadian Sport Institute Ontario and a large number of Kinesiology clinics which will provide unparalleled learning environments for students in placements. Furthermore, University of Toronto's strength in Interprofessional Education (IPE) will provide important and distinctive opportunities for students in the MPK program. IPE at University of Toronto affords opportunities for students in health care professions from different disciplines (e.g. physicians, nurses, physiotherapists and occupational therapists) to learn together and from one another.

2 Program Rationale

Overview and Rationale.

The academic discipline of Kinesiology draws upon knowledge from diverse fields of study, including the humanities, social sciences, natural sciences and human engineering. The breadth of knowledge developed in undergraduate programs enables students to pursue careers in diverse areas including education, recreation, policy development, exercise and sport sciences, and health care.

Undergraduate programs provide the basic foundation for students who wish to pursue the practice of Kinesiology in professional health care settings. Ontario has been leading the development of health care related Kinesiology as evidenced by the recognition of Kinesiology as a regulated health profession under the Regulated Health Professions Act (1991) and the Kinesiology Act (2007). As such, the expectations and standards for Ontario-based Kinesiologists to make evidence-informed decision to protect the public have increased. The proposed Master of Professional Kinesiology (MPK) will build upon the excellent undergraduate programs in Kinesiology in Ontario to provide advanced training and leadership for those who seek an enhanced knowledge base in their profession, be they new graduates or those who are already practising Kinesiologists.

The proposed MPK will enhance students' depth of knowledge, critical thinking skills, research capacity and ability to translate knowledge to patients and colleagues through advanced-level coursework. Graduate students will augment their expertise in addressing complex and diverse challenges through experiential education (~600 hours in practica). The proposed MPK will also focus on the development of leaders in clinical practice, clinical research, and program evaluation within Kinesiology. Given that the practice of professional Kinesiology is in its infancy, there will be ongoing developments of Kinesiology as a regulated health profession and therefore a need for leadership in the area. This leadership is urgently needed to address the growing "physical inactivity crisis" that has been linked with numerous health problems (e.g., obesity, cardiovascular disease, anxiety and depression, diabetes, osteoporosis, etc.), and towards the establishment of "proactive" or preventative health care practices.

Graduates will be able to employ cutting edge knowledge and concepts from movement sciences including anatomy, physiology, biomechanics, motor control and learning, behavioral sciences and sociocultural scholarship. Students will develop advanced skills in assessing factors influencing functional ability and health including health impairments, physical

capacities, physical demands, behavioral status, and broader health determinants. Students will develop management, prevention and performance intervention plans for clients based on current evidence, their assessments and through collaboration with the client. Graduates will develop advanced skills in providing ongoing feedback and health education to clients based on current behavioral science research.

Nomenclature

The degree nomenclature of Master of Professional Kinesiology is important in distinguishing this professionally focussed program from existing research master's programs. As indicated in Appendix C (p 34) research-based graduate programs are termed Master of Science in Kinesiology or Master's in Kinesiology or Human Kinetics across Canada. These programs have a primary focus on preparing graduates to conduct research rather than to lead development of the profession of Kinesiology as related to health care. Other course -based Master's programs focus on other aspects of the discipline of Kinesiology. For example, Western University's program is in Sport Management, the University of Windsor focusses on performance or sport management and the University of Ottawa's Master of Human Kinetics examines the behavioral aspects of exercise and physical activity.

Internationally, programs in the United States (State University Arizona Tempe, Michigan, Penn State) and Australia (University of Sydney, University of Queensland) are focussed on Clinical Exercise Physiology. The proposed MPK will expand beyond the focus of these programs to include qualitative and quantitative movement analysis and a repertoire of behavioural approaches, research skills, program evaluation and professional leadership. The nomenclature Master of Professional Kinesiology clearly identifies the proposed program as a professional program, distinguishing it from research programs. This nomenclature will assist in identifying the particular focus of the proposed program for prospective students, for career advisors, for current Kinesiology practitioners and for prospective employers. This nomenclature is in line with other professional programs at the University of Toronto and elsewhere including a variety of programs in fields such as accounting (see for example the Master of Professional Accountancy at UC Davis).

Program Delivery.

As illustrated in Figure 1 of Appendix A, this is a modular program composed of multiple compressed courses. The mixed modes of delivery are selected to emphasize development of knowledge, skills and competencies required for a leader in a health profession. The modular structure of the program will reinforce didactic material with laboratory and tutorial sessions. Approximately 280 hours will be devoted to classroom hours, another 240 to laboratory and tutorials and over 600 hours to three practica. Classroom hours will be balanced between lecture, problem solving and case based learning. This format will assist students in moving from knowledge through to expert application, to consideration of how to enhance practice. Practica will involve a structured program of experiential education with learning contracts established between students and field instructors. Students in practica will be supported through use of on-line discussions and interactions which will encourage reflection on their experiences as a practitioner.

The introductory full course unit (EXS4000Y) combines in classroom (lecture, laboratory) sessions with group experiential learning through providing kinesiology services to a low risk population (University athletes) to activate prior learning and promote formation of a learning community. As detailed in Appendix A Part 2 the introductory component of the MPK (EXS4000Y) will orient students to the profession and professionals and provide them with an opportunity to learn how fundamentals of Movement Science, current research, business and ethics are integrated and then applied to provide the highest level of practice. Students will draw on their previous movement sciences knowledge to provide athlete clients with appropriate assessments and provide an early active learning experience. Athlete clients are selected for the introductory session since as healthy, young adults with specific performance goals they represent a less complex set of initial cases. These practical sessions will be preceded by framework setting sessions and followed by reflective and analytical sessions. This pattern will be followed throughout the curriculum. Subsequent assessment (EXS4001H, EXS4002H and EXS4003H) and intervention courses (EXS 4004H, EXS4005H, EXS4006H) develop common clinical approaches, knowledge and skills through assignments, lecture, problem solving and case based learning and laboratory sessions. The following four week practicum (EXS8001H) will assist in consolidating and applying those knowledge and skills and checking theory against common practice.

Reflection on professional experiences, health care system roles and the opportunity to place practice in the context of equity, diversity and broader health determinants will be facilitated in two courses (EXS4007H, EXS4009H). The role of evidence in driving practice will be explored and research skills developed through lecture and problem based learning (EXS4008H). Reflective learning and through the second (EXS8002) and third practicums (EXS8003) will be facilitated by weekly contact in a hybrid professional practice courses (EXS4010H, EXS4014H).

Interprofessional Education (IPE) is the focus of the second professional practice unit (EXS4011H) and will be approached through assignments, lectures and joint experiences with other health care students and practitioners. The theme of interactions with other components of the health care system will be pursued through lectures, tutorials and case studies in three courses which focus on treatments (EXS4012H) and practice settings (EXS4013H) and in health care teams (EXS4015H). Development of leadership skills will be an important component of this course grouping. The final two courses (EXS4016H, EXS4017H) will assist the student in integrating Kinesiology with research and communication knowledge and skills through project based learning.

Context.

The academic discipline of Kinesiology approaches Kinesiology as a field of study and includes a broad range of academic interests encompassing the study of physical activity and inactivity, sport, exercise, play and dance. Scholarship in Kinesiology draws upon the biophysical and life sciences, the social sciences and the humanities. Our Faculty has broad and extensive expertise in examining the relationships among physical activity, sport, exercise and health for the individual, communities, and for society.

The proposed MPK will focus on particular aspects of the broader discipline of Kinesiology, namely the professional practice of Kinesiology. The MPK will focus on developing graduates' competencies in devising, implementing and evaluating exercise strategies to improve health, wellness and performance. Students in the MPK will receive education that will enhance their ability to define, formulate and apply excellent care across a spectrum of settings and populations. This graduate education will provide advanced training and a structured educational program to develop leaders of the profession who will graduate with expertise in knowledge synthesis and application and exchange, experience working in interprofessional health care teams, diverse practice areas, and evaluation of clinical and program effectiveness.

Recognition of the importance of physical activity and exercise for health has grown over the past five years as evidenced by epidemiological research (SN Blair Br J Sports Med 2009; 43:1-2). Physical inactivity, often referred to as the biggest public health problem of the 21st century, has been the focus of government supported guidelines (http://www.phac-aspc.gc.ca/media/nr-rp/2011/2011_0124-eng.php), popular press articles, and creation of a Regulated Health Profession of Kinesiology and the associated regulatory college in the province of Ontario. Ontario is the first Province in Canada to establish Kinesiology as a Regulated Health Profession (RHPA). The scope of practice of Kinesiology, as defined in the *Kinesiology Act 2007*, is the assessment of human movement and performance and its rehabilitation and management to maintain, rehabilitate, or enhance movement and performance.

There are several certifications available to graduates of Kinesiology programs, with the only one regulated by legislation being the Ontario Registered Kinesiologist accreditation from the College of Kinesiologists of Ontario. Others include the Canadian Society for Exercise Physiology (CSEP) Clinical Exercise Physiologist, the American College of Sports Medicine (ACSM) Registered Clinical Exercise Physiologist. The proposed program is structured such that graduating students meet the course and practice requirements of all of these bodies' designations. For example the ACSM requires 600 hours of supervised experience. As Ontario is currently the only jurisdiction in North America where Kinesiology is a Regulated Health Profession, it is important that graduates who may wish to practice in settings where other certifications are accepted can meet those other requirements.

Distinctiveness.

The MPK will be the first graduate degree program of its kind in Ontario and as a consequence our graduates have an opportunity to be national leaders in the development of the profession of Kinesiology. This program will be distinct in its content with an emphasis on integrated movement science, the importance of psychosocial interventions and access to diverse, sophisticated experiential education. We will build upon the students' strong undergraduate education by providing an enhanced depth and breadth of knowledge and approaches, and the development of professional competencies. And finally, the extraordinary resources within the Greater Toronto Area for potential health care and sport-related internship sites are strengths of the proposed program.

Case Based Learning

The structure of the program is distinctive with a focus on case based learning. Case based learning is critical to the development of student's ability to creatively apply previous knowledge to new situations and to engage with each other and course instructors. Case based learning provides opportunities for students to integrate material from biophysical, behavioral and social cultural perspectives. Case complexity will increase through the program moving from simple individually focused to consideration of complex cases within the context of the health care team and society.

Practica

The emphasis on experiential learning opportunities and diversity considerations for practice set this programme apart from others. The MPK will provide a structured program to move students through and beyond Millers Pyramid for clinical competency (Miller GE, Academic Medicine 65(9):S53-S, 1990). The significant time commitment to practica (600 hours) within the program allows for extraordinary exposure to working in clinical settings and for the application of Kinesiology-related knowledge to enhance health and function for clients with diverse functional and health statuses. Students will gain advanced knowledge across a broad range of health and functional conditions, increase their "know how" for movement science applications, demonstrate assessment and intervention skills, and practice the activities of a Registered Kinesiologist in laboratory and practica settings. Moreover, they will add to these skills by developing understanding of clinical and program research knowledge and skills enabling them to lead the ongoing development of professional Kinesiology. The practica will afford opportunities for application and weekly professional development sessions will assist in development of reflective practice. Practica experiences will be tailored for the student through development of learning contracts. This will allow new graduates and current Registered Professional Kinesiologists to focus their experiential education on aspects that are most relevant to their development.

Focus of the Program

In contrast to the Master of Science or Master of Arts in Kinesiology or the Master's in Human Kinetics degree programs which approach Kinesiology as a field of research, the proposed MPK will approach Kinesiology as a professional practice. The University of Toronto program differs from others in many respects. First, it adopts a multidisciplinary approach by including sociocultural, behavioural, and biophysical approaches to enhancing health and physical performance for a diverse range of clients. It also focuses on a broad range of clients from healthy, high-performance athletes, to those with chronic diseases.

Some other universities have professional masters programs but none focus on professional Kinesiology. For example, the University of Ottawa has a Master of Human Kinetics with a focus in Intervention and Counselling. This program is course based and focuses on 'cognitive skills for problem solving, critical thinking, analysis and synthesis and, most importantly, relating theory to practice.' The University of Calgary offers a course-based Master of Kinesiology which focusses on developing skills in providing services for high performance sport and in exercise

management of chronic disease conditions. Lakehead University launched a 12 month graduate diploma in the fall of 2013 which includes four online half-courses, four on-site practical half courses, and a full-course internship to prepare Registered Kinesiologists. The less extensive program and smaller number of internship hours (200) will likely attract a cohort of students with different career interests.

Location

The proposed MPK program at University of Toronto is also important because of the resources of the Greater Toronto Area including clinical sites, the presence of organizations such as the Canadian Sport Institute Ontario, Ontario College of Kinesiology, and the Ontario Kinesiology Association. The concentration of the clinical sites and professional bodies provides opportunities for educational input from community experts, a high quality and diverse experiential education and interaction with leaders of the profession. The Faculty of Kinesiology and Physical Education and its faculty members have ties with sites that can provide education in exercise and mental health, exercise and high performance sport, exercise and cardiovascular disease, exercise and metabolic impairments and exercise and physically demanding occupations.

Faculty Members

As documented in Section 12 and Appendices H and I, faculty have expertise across a broad spectrum clinical and research approaches to enhancing health with a myriad of client populations. Faculty members have expertise in several aspects of movement science including: clinical exercise physiology; biomechanics; motor learning and control; behavioural science; and social cultural aspects of health care. Faculty members also have research and applied experience in working with various client groups including elite athletes, those engaged in physically demanding occupations, physically inactive and overweight to obese adults and children, children with chronic disease (congenital heart disease, cystic fibrosis), adults with metabolic/endocrine conditions (heart disease, growth hormone deficiency and excess, diabetes), cardiovascular disease (CHF, MI, hypertension), musculoskeletal impairments (osteoarthritis, acute and chronic injuries, and mental health impairments (bipolar, schizophrenia, addictions).

Interprofessional Education

Furthermore University of Toronto's strength in [Interprofessional Education](#) (IPE) will provide important and distinctive opportunities for students in the MPK program. IPE at University of Toronto affords opportunities for students in health care professions from different disciplines (e.g. physicians, nurses, physio- and occupational therapists) to learn together in structured case or problem based sessions. The MPK curriculum includes a specific focus in one the modules (EXS 4011) but will be an important thread throughout the program. As a graduate program, the MPK will include critical evaluation of the health care team approach and identification of opportunities for research to enhance health care team function. The Interprofessional Education network at the University of Toronto will provide students with unparalleled access to and experience in working with those in other health professionals.

3 Need and Demand

Currently there are no programs in Canada which address the specific need for Master's level education in professional Kinesiology. The Profession of Kinesiology is important for the health of Ontarians. The Kinesiologist's focus on physical activity and exercise from the point of assessment and intervention through to the provision of expert behavioral support and consideration of social cultural determinants for continued participation is unique. With the growing recognition of physical inactivity as a risk factor for a myriad of physical and psychological illnesses, emphasis on the role and practice of those in Kinesiology has grown substantially. Concomitant with these societal shifts is a need to develop competencies for practising Kinesiologists, including clinical expertise, research-informed practice, and evaluation. Further, with a focus on research-informed practice and professional skills, graduates of the MPK will be well-positioned to contribute to the development of the practice of professional Kinesiology. Other regulated health professions (Occupational Therapy, Physical Therapy, Medicine) which have existed for many years have evolved leadership development routes that include mentors, educators, formal practice leaders, senior business and administrative leaders and well established relations between the professional community and academic centres. We will enhance existing Kinesiology leadership routes through the development of purposeful training of excellent practitioners with additional skills to fulfill those leadership roles. Student interest is evident from an on-line survey that was distributed to our current students and recent graduates (Appendix F). A large majority 73% (71/97 responses) indicated interest in a Master of Professional Kinesiology program. Sample comments from students include:

"I believe that having a masters program here at U of T is an excellent idea!" Entering 3rd yr of studies.

"Absolutely should be implemented." Graduated in 2013.

"This would be a great opportunity for those in our program to have more leeway in decisions for schools etc." Entering 4th year

We anticipate substantial demand for this program from those recently completing undergraduate degrees in Kinesiology at the University of Toronto or the other 40 equivalent programs across Canada. Approximately 2800 students graduate from Kinesiology and Recreation programs in Ontario each year. Of those, we estimate that at least 10% will invest in a career as a practising Kinesiologist for a pool of 280. We would need to capture less than 15% of these candidates to meet our targeted enrolment. In addition, Kinesiologists who may have been practising for several years will also seek opportunities to upgrade their knowledge, enhance their abilities to practice, and develop capacity for leadership of the profession. Practising Kinesiologists will benefit from the practica through developing expertise with new client groups and through developing additional skills in evaluation of practice, research and knowledge translation.

Societal need for Kinesiologists is demonstrated in part through creation of the regulated

health profession. Increased access to health professionals who have expertise in enhancing health through movement science is a critical goal of the legislation. Recent publications (e.g. Qualified Exercise Professionals Warburton et al., Canadian Family Physician 59:759-761, 2013) have identified the need for ‘advanced postgraduate education and clinical internships for those supervising higher-risk individuals’. The proposed MPK will provide graduates with expertise for a broad range of health conditions and with knowledge and skills to lead development of the profession. The MPK emphasis on experiential education and development of clinical research, program evaluation, and knowledge translation expertise in the context of provision of health and performance services is a critical distinguishing feature from undergraduate programs.

Directors of the professional advocacy body for Ontario Kinesiologists (Ontario Kinesiology Association, OKA) strongly support the creation of the MPK. They favour rapid establishment of the program because their consultations with Ontario Ministries and insurance companies reveal a need for Kinesiology leaders in Family Health Teams, in providing exercise therapy, and in the assessment of clients. The OKA is building increased opportunities in these areas for Registered Kinesiologists. Kinesiologists with graduate level education in professional Kinesiology will be readily accepted into these Health Teams. The OKA has committed to promoting opportunities for qualified Kinesiologists to serve as mentors for program internships.

It is likely that some students will consider applications to both the MPK and to the entry to practice programs in Occupational Therapy, Physical Therapy and Nursing. It is unlikely that this will affect enrolment in any of the programs given the high application and low acceptance rates for those programs (less than 1 in 10 applications accepted).

Table 1: Graduate New Enrolment Projections

Year in program	Academic year	Academic year	Academic year	Academic year	Academic year
	2016-17	2017-18*	2018-19	2019-20	2020-21
Year 1 (f/w)	40	40	40	40	40
Year 2 (s/f)		40	40	40	40
Total	40	80	80	80	80

*Steady State

4 Admission Requirements

This program is intended for applicants who understand the role of physical activity and exercise in enhancing the health and performance of individuals and communities. The ideal applicant will have demonstrated the ability to employ kinesiology to enhance health. They will be graduates from a recognized program in Kinesiology or the equivalent (see below). The MPK will accept recent graduates and those who have additional experience in providing Kinesiology services. Candidates must have a strong foundation in movement sciences, a desire to enhancing the health of individuals and communities and a passion for improving the profession of kinesiology.

Formal Requirements

Bachelor's degree in Kinesiology, Human Kinetics or a related degree, or equivalent from a recognized university, with a minimum mid-B average in the final year in upper division courses within the relevant major. This is required to ensure that the candidates have the requisite disciplinary knowledge and the intellectual ability to understand and apply that knowledge.

Students will be required to submit a resume and a letter of intent (1-2 pages) which identifies the areas of practice of interest and their reasons for pursuing the program.

Applicants must submit two letters of reference. The referees will address the applicant's knowledge base and aptitude for studies in a health care profession. At least one letter will come from an academic referee familiar with the applicant's academic performance. The second letter may be from an academic or from a professional source who can comment on the applicant's aptitude for health care. The ability to choose the nature of the second reference recognizes that some applicants may apply to the program directly after completing their undergraduate education while others may apply after some years of work experience.

Proficiency in the English language must be demonstrated by all applicants educated outside Canada whose primary language is not English and who graduated from a university where the language of instruction and examination was not English. The department prefers the Test of English as a Foreign Language (TOEFL), with minimum scores of:

Paper-based test: 600 with 5 on the Test of Written English (TWE) and 50 on the Test of Spoken English (TSE), Internet-based test: 100/120 overall and 22/30 on the writing and speaking sections.

5 Program Requirements

Please see Appendix B Part 1 for proposed calendar copy. Please see Appendix B Part 2 for a full list of the course numbers and titles of the MPK courses which are all new.

The curriculum will focus on developing graduates who will be expert practitioners and who will lead development of the profession of Kinesiology. As a consequence the program focuses on evidence supported approaches to effective interactions with clients to enhance their health, prevent and manage impairments, reduce activity limitations and enhance performance through movement science. Development of conceptual approaches to practice will include clinical reasoning, rehabilitation, health promotion, ergonomic, coaching and behavioral and advocacy approaches. Knowledge and skills in knowledge exchange with clients and colleagues, research skills for evaluation of clinical practice and

programs and conceptualising future practice will equip graduates to lead the profession.

The curriculum will develop students' ability to assess and intervene while considering the client's physical and social environment and the health care system. Therefore, developing skills in clinical reasoning, client education, in addition to intervention methods in the context of knowledge of the interaction of exercise and health are central to the curriculum.

In the MPK curriculum, students are required to complete 12 full course equivalents (FCEs) comprised of 9.5 FCEs of course work and 2.5 FCEs of practica. (See Appendix A Part 1 for summary). In these units, a variety of instructional approaches will be used including lectures, laboratories, case studies and tutorials. The curriculum integrates theory with application and builds students expertise in moving from knowledge to clinical action from simple to complex health conditions and settings. This development will be done in each mode of education but in particular will be employed in the case studies and the three practica. More details regarding the practica are provided in Section 6 below but briefly the practica will involve a total of 600 hours of experience in practice settings. The practica are designed to allow students to observe Kinesiological practice, to apply the knowledge and skills they develop in course and laboratories and to provide opportunities for integrating their knowledge and developing as a reflective practitioner. The students will identify their preferred placements from a list of locations and types of practice and then will be matched with a field instructor. Placements at several sites (more than 30 placements) have been identified.

Skills in knowledge translation to clients and colleagues and evaluation of clinical programs will be developed throughout the program and will be demonstrated in capstone courses (Clinical Reasoning and Case Study Research Project - EXS4016H and Selected Topics in Professional Kinesiology -EXS4017H: see Appendix A Part 2). Concepts for evidence supported practice will be woven throughout the program. Formal examination of the relation of research to practice will be carried out at approximately midway through the curriculum. Students will understand how to use research to advance Kinesiology practice and the boundaries of knowledge.

Leadership of the profession of Kinesiology will require both expertise in service delivery and in how to drive the evolution of a profession over time. We will equip graduates to become leaders through expertise in evidence based practice, research, knowledge exchange and through provision of opportunities to interact with bodies such as the Ontario Kinesiology Association and the College of Kinesiology Ontario. Practice Leaders are identified in other health care professions the MPK will equip our graduates to become practice leaders in Kinesiology as the discipline evolves.

6 Program Description

The MPK will be offered on a full-time basis only. The program design includes a progression of knowledge and skills through the program which precludes providing a part time program with a different rate of progression. As well, meshing a part-time program with scheduled placements is not feasible at this time in the development of a cadre of mentors.

The program length (four sessions - 16 months) is required to develop the learning outcomes and competencies for a professional Kinesiologist. The program length is similar to those for equivalent health care practitioners (Physical and Occupational Therapists). The combination of approximately 500 instructional hours and 600 hours of practical experience can be best accommodated in a 16 month

program.

Whereas the Province's Quality Assurance Framework requires that students complete a minimum of 2/3 courses at the graduate level, the University of Toronto requires graduate students to complete all of their course requirements from amongst graduate level courses. This proposed program complies with this requirement.

Field instructors will supervise one to three students for 4 or 8 weeks and will receive appointments as Adjunct Lecturers. Field instructors will be provided with training in the specific responsibilities of serving as a field instructor and further professional development opportunities. This will include training in development of learning contracts, mentoring students and opportunities for specialty sessions in identified clinical topics. We are in discussion with the College of Kinesiology about how these may fit within professional development requirements which are being specified over the next year. One half of the administrative staff position (see budget) will be dedicated to assisting the Program Director in managing the practica.

The practica requirements will involve the equivalent of 4 days per week (30 hours) for one 4 week and two 8 week sessions. All practica will involve developing learning contracts between the field instructor and the student. The contracts will identify learning outcomes which set the skills and knowledge the student will learn during the practicum. The learning outcomes will include development of the competencies of a Professional Kinesiologist but will progress to include leadership related criteria such as application of clinical research and knowledge translation. The learning contract will be comprised of several elements which will include: i) learning assignments and activities; ii) student observation of the instructor; iii) instructor observation of the student; iv) observation of the student by others (clients, other students). These occasions should be followed by reflection and discussion to identify what was learned, to relate the experience to a conceptual framework and assess the interaction. The learning contract will build on common evaluative methods (e.g. a clinical instructor feedback form) to identify practicum specific methods for evaluation. Formulating a learning contract is an ongoing process and new learning objectives may arise as the student develops. The written contract serves to formalize the expectations, assignments, resources, and evaluation procedures between the student and field instructor. The learning contract and objectives should be used as an ongoing tool in the practicum experience.

To maintain contact with the program and provide opportunities for reflective practice and integration of theory and science into practice throughout the practicums a faculty moderated, on-line discussion will be held for 2 hours once per week. The discussion will be structured to provide opportunities for reflection and focus on opportunities to discuss the application of classroom material, potential incongruences between theory and practice, common issues encountered by students, and information needs. Students will be supported in their placements by a field instructor, an academic advisor and program administrative staff.

Practica from several areas of Kinesiology practice will be available. We will endeavour to provide students with a range of placement experiences including those with clients needing to manage existing biomechanical, behavioral, cardiopulmonary, metabolic or musculoskeletal, neurological impairments, and wanting to improve physical performance, or health behavior changes and combinations of those interests. Discussions with several sites have been initiated including private clinics and sites associated with the University Health Network (Toronto Rehabilitation Institute, Toronto General Hospital) the Centre for Addiction and Mental Health, Sick Kids Hospital, Bridgepoint Health, the Canadian Sport Centre Ontario, and the MacIntosh Sport Medicine Clinic. Practica experience will be tailored for the

student. For example practicing Kinesiologists will take up practica in new areas of practice and will be encouraged to work with field instructors to develop and employ additional areas of knowledge (e.g. behavioral science, physical cultural studies) and skills (e.g. clinical research, knowledge translation) in their practica. To further develop the practica we will establish a working group to identify more placement sites, develop a training module for the placement mentors, and the evaluation tools for students and mentors. This working group will consult broadly with other health and education-related divisions.

Students will be matched with placement sites through a three step process:

- 1) student identification of preferences from letter of intent and interest in possible sites;
- 2) matching of site and student following interview (in person or virtual) with input from the program;
- 3) confirmation requirements (e.g. immunizations, emergency, CPR training etc.) are met (site in conjunction with MPK administration).

On completion of the matching process students and instructors will complete a learning contract as described above. Learning contracts will be reviewed by academic advisors.

7 Degree Level Expectations, Program Learning Outcomes and Program Structure

Table 2: Master's DLEs

MASTER'S DEGREE LEVEL EXPECTATIONS (based on the Ontario Council of Academic Vice Presidents (OCAV) DLEs)	MASTER'S PROGRAM LEARNING OBJECTIVES AND OUTCOMES	HOW THE PROGRAM DESIGN AND REQUIREMENTS SUPPORT THE ATTAINMENT OF STUDENT LEARNING OUTCOMES
<p>EXPECTATIONS:</p> <p><i>This Master of Professional Kinesiology is awarded to students who have demonstrated:</i></p>		
<p>1. Depth and Breadth of Knowledge</p> <p>A systematic understanding of knowledge, and a critical awareness of current problems and/or new insights, much of which is at, or informed by, the forefront of the academic discipline, field of study, or area of professional practice.</p>	<p>Depth and breadth of knowledge is defined in the Master of Professional Kinesiology as being able to understand at an advanced level Kinesiology related aspects of anatomy, exercise physiology, biomechanics, motor learning and control, behavioral aspects of health, social and cultural influences on health and physical activity participation, clinical reasoning and health care professional relations. This is reflected in students who are able to: Appreciate/recognize that</p>	<p>The program design and requirement elements that ensure these student outcomes for depth and breadth of knowledge are:</p> <p>i) Admission criteria require students from programs (Kinesiology and equivalent) who have course work in the required disciplines. Expert knowledge in how Kinesiology may be used to improve health and function in specific populations. Examples of the specific populations will include those who pursue physically</p>

MASTER'S DEGREE LEVEL EXPECTATIONS (based on the Ontario Council of Academic Vice Presidents (OCAV) DLEs)	MASTER'S PROGRAM LEARNING OBJECTIVES AND OUTCOMES	HOW THE PROGRAM DESIGN AND REQUIREMENTS SUPPORT THE ATTAINMENT OF STUDENT LEARNING OUTCOMES
	<p>real and perceived barriers to achieving sufficient movement quality and quantity are many, varied (i.e., physical, psychological, cognitive, emotional, social, and cultural constraints), and interactive/complex in nature.</p>	<p>demanding occupations (firefighters, police, military, athletes) and people with health impairments (in particular chronic conditions such as osteoarthritis, type 2 diabetes, and mental health impairments).</p> <p>Enhanced depth and breadth of information will be developed throughout the program but with particular focus in the initial courses.</p> <p>ii) The integrated Assessment and Intervention material in the following courses: EXS's 4001 to 4006 are particularly relevant.</p>
<p>2. Research and Scholarship</p> <p>A conceptual understanding and methodological competence that:</p> <p>i) Enables a working comprehension of how established techniques of research and inquiry are used to create and interpret knowledge in the discipline; ii) Enables a critical evaluation of current research and advanced research and scholarship in the discipline or area of professional competence; and iii) Enables a treatment of complex issues and judgments based on established principles and techniques; and, on the basis of that competence, has shown at least one of the following: i) The development and support of a sustained argument in written form; or ii) Originality in the application of knowledge.</p>	<p>Research and Scholarship is defined in the Master of Professional Kinesiology degree program as expertise in using research to support and extend evidence supported professional practice.</p> <p>This is reflected in students who are able to:</p> <p>i) critically evaluate current research in movement science;</p> <p>ii) locate, critically evaluate and employ professional and clinical practice guidelines;</p> <p>iii) identify gaps in current knowledge and propose methods of inquiry to address those gaps.</p>	<p>The program design and requirements that ensure these student outcomes for research and scholarship are:</p> <p>i) <i>EXS4008H Evidence Supported Practice (0.5)</i></p> <p>Role of research in practice, stages of clinical research, sources of evidence to support practice, meta-analyses, systematic reviews, practice guidelines, knowledge translation to clients and colleagues. Understanding of the strengths of qualitative, quantitative and mixed methods and program research.</p> <p>ii) <i>EXS4016H Clinical Reasoning and Case Study Research Project</i></p> <p>Full session project starting from a particular case, employ research skills to give evidence base to assessment, intervention and on-going management recommendations. Identify what additional research may be required but have the ability to reason given the current state of knowledge.</p>

MASTER'S DEGREE LEVEL EXPECTATIONS (based on the Ontario Council of Academic Vice Presidents (OCAV) DLEs)	MASTER'S PROGRAM LEARNING OBJECTIVES AND OUTCOMES	HOW THE PROGRAM DESIGN AND REQUIREMENTS SUPPORT THE ATTAINMENT OF STUDENT LEARNING OUTCOMES
<p>3. Level of Application of Knowledge</p> <p>Competence in the research process by applying an existing body of knowledge in the critical analysis of a new question or of a specific problem or issue in a new setting.</p>	<p>Application of Knowledge is defined in the Master of Professional Kinesiology degree program as ability to employ the knowledge identified in Section 1. to prevent and manage health limitations and to enhance the ability to physically perform in valued life roles. This is reflected in students who are able to:</p> <ul style="list-style-type: none"> i) synthesize and present (oral and written formats) a summary of current knowledge of movement science as applied to provision of professional Kinesiology services. ii) to create management and intervention plans that are based in current knowledge and creatively address the needs of the client. iv) evaluate clinical programs and propose methods of improving current programs or new develop programs 	<p>The program design and requirements that ensure these student outcomes for level and application of knowledge are:</p> <ul style="list-style-type: none"> i) EXS4017H Selected Topics in Professional Kinesiology Students will employ research skills to develop expertise in a particular setting or with respect to a specific client or patient population. They will communicate their expertise through presentations and written products. Students will employ concepts of the knowledge translation cycle to identify how practice and programs may be improved ii) Case Based Learning in all courses. The case based approach will assist students in further developing their knowledge base and in applying knowledge to particular situations. iii) The Introduction to Professional Kinesiology course (EXS4000Y) and the Practica (EXS8001H, 8002Y, 8003Y) are specific instances where students will apply their knowledge to practice. In these settings student will apply their knowledge of movement science (biophysical, sociocultural and behavioral) in employing assessment and intervention approaches, with specific clients who differ in health status and goals. iv) students will apply their knowledge of knowledge exchange strategies through their practica and through the capstone courses (EXS4016H Clinical Reasoning & Case Study Project, EXS4017H Selected Topics in Professional Kinesiology)

MASTER'S DEGREE LEVEL EXPECTATIONS (based on the Ontario Council of Academic Vice Presidents (OCAV) DLEs)	MASTER'S PROGRAM LEARNING OBJECTIVES AND OUTCOMES	HOW THE PROGRAM DESIGN AND REQUIREMENTS SUPPORT THE ATTAINMENT OF STUDENT LEARNING OUTCOMES
<p>4. Professional Capacity/Autonomy</p> <p>a. The qualities and transferable skills necessary for employment requiring i) The exercise of initiative and of personal responsibility and accountability; and ii) Decision-making in complex situations; b. The intellectual independence required for continuing professional development; c. The ethical behavior consistent with academic integrity and the use of appropriate guidelines and procedures for responsible conduct of research; and d. The ability to appreciate the broader implications of applying knowledge to particular contexts.</p>	<p>Professional Capacity/Autonomy in the Master of Professional Kinesiology degree program includes serving the needs of clients through providing evidenced supported management, rehabilitation and performance enhancement services, and contributing to their own and the professions development.</p> <p>This is reflected in students who are able to:</p> <p>i) make appropriate decisions for management, rehabilitation or enhancement of the health and physical capacity of clients</p> <p>ii) advance the profession of Kinesiology through developing, advancing, disseminating and exchanging knowledge about physical activity, health and their interactions through provision of care, education, research, and leadership.</p>	<p>The program design and requirements that ensure these student outcomes for professional capacity/autonomy are:</p> <p>i) EXS4008H Evidence Supported Practice. Students will develop expertise in critical evaluation of current evidence and develop learning and research skills applicable to continuing professional development.</p> <p>ii) EXS4015H Professional Practice 3</p> <p>Understand principles of managing a team of health care providers. Identify how to develop and maintain safe and effective physical facilities; engage in self-assessment and professional development. Understand how to use research in combination with knowledge translation/exchange practices to drive change in practice.</p> <p>Develop approaches to business management and promotion of practice. Understand how and why to lead development of the profession.</p>
<p>5. Level of Communications Skills</p> <p>The ability to communicate ideas, issues and conclusions clearly.</p>	<p>Communications Skills is defined in the Master of Professional Kinesiology degree program as the ability to receive information and feedback and to present information and feedback to peers, field instructors and clients/patients and health care funders.</p> <p>This is reflected in students who are able to: receive information and feedback and to present information and feedback to peers, field instructors and clients/patients. Skills in persuasive communication as part of leadership</p>	<p>The program design and requirements that ensure these student outcomes for level of communication skills are: written assignments including case presentations, written reports suitable for various audiences. Oral presentations to peers and role playing patients will be required. Communication using electronic media will be developed through experience in Professional Practice courses EXS4010H and EXS4014H.</p> <p>Development of knowledge translation approaches for</p>

MASTER'S DEGREE LEVEL EXPECTATIONS (based on the Ontario Council of Academic Vice Presidents (OCAV) DLEs)	MASTER'S PROGRAM LEARNING OBJECTIVES AND OUTCOMES	HOW THE PROGRAM DESIGN AND REQUIREMENTS SUPPORT THE ATTAINMENT OF STUDENT LEARNING OUTCOMES
	will be developed.	communicating with clients and with colleagues.

8 Assessment of Learning

See evaluation rubrics for course, laboratory, practica and the program itself below.

Course Work. Course work will be evaluated with a mixture of assignments (oral and written responses to Case Studies; literature reviews, reflections, communication pieces), demonstrations of techniques, written tests and examinations. A mixture of short answer and multiple choice will be employed on tests and examinations. Case learning will be assessed using the approaches which recognize the learner's development from a novice to an expert practitioner. A mixture of self, peer and faculty assessment of case-based learning will be employed for group and individual presentations and care plans.

Laboratory components of courses will be evaluated using both traditional lab reports and evaluation using structured practical skills demonstrations. In which students will demonstrate competency in performing laboratory skills (e.g., performing a movement screen, graded exercise testing with pulmonary gas exchange; body composition assessment, motivational interviewing).

Practica will be evaluated as Credit/No Credit. Participation in the routine On line discussion forum will be a part of the evaluation. Credit will be awarded for students who fulfill the elements of the learning contract. No credit will be indicated for repeated failures throughout the placement to successfully complete agreed upon elements of the learning contract. No credit will also be indicated for students who engage in ethically inappropriate behaviour. Students are expected to adhere to the Standards of Professional Practice Behaviour for all Health Professional Students established through Governing Council at the University of Toronto. Students who consistently exceed learning contract expectations including demonstrating exemplary performance of identified competencies will be recognized through a Clinical Excellence award.

Assessment of the Program Effectiveness

The overarching goals of the program are to provide an advanced level of research-informed educational and practical skill development in the field of professional kinesiology and to build leadership skills so graduates may advance the discipline. To assess our success in attaining these goals we will employ a series of metrics based on annual and ongoing program assessment.

1. Students engaged in the program will provide through an on-line, anonymous questionnaire ongoing feedback about the quality of the educational experience and the extent to which articulated learning outcomes are met.
2. Faculty instructors will be surveyed by the Program Director to identify opportunities for quality improvement and to provide summative ratings of the program success in assisting students to

achieve learning outcomes.

3. At the end of each practicum session field instructors will be asked by the Program Director for feedback on the development of practice skills and suggestions for program changes to enhance student learning and performance.
4. We will consult with the College of Kinesiologists of Ontario, which is the relevant statutory regulatory body, and the Ontario Kinesiology Association to access additional metrics that they may make available to universities, such as markers of success for our students in the profession and the participation of our graduates in College and Association leadership (professional committees, conferences, continuing education).
5. Key performance indicator data at the program level on the number of applicants to the program, acceptance of entrance offers, retention of students and graduation rates will indicate our reputational success and the success of our selection and student support processes. These indicators are available annually and are also assessed at the time of the regular review of the program under the UTQAP process.
6. One year and five years following completion we will survey graduates to determine their employment status and their assessment of the strengths and weaknesses of the program and suggestions for program development. This will include the key performance indicator questions (e.g. If you were to start your graduate/professional career again, would you select this same university? Would you recommend this university to someone considering your program?).

9 Consultation

Through the program development process we have been in contact with the Office of the VP Academic Programs and the School of Graduate Studies. The working group met with faculty members from Rehabilitation Sciences and have a representative on the working group which developed the proposal. We have consulted with faculty members from Social Work, the Ontario Kinesiology Association and the College of Kinesiology Ontario. In development of the MPK we met with representatives from Occupational Science and Therapy and from Physical Therapy. A representative of the departments was part of the proposal development working group

The MPK will have two possible impacts on entry to practice programs offered by the Occupational Therapy & Occupational Science and Physical Therapy Departments. Some students may choose to complete a MPK who might enrol with those Departments. However given the very high numbers of applicants and low acceptance rate to those programs the impact of 20-40 students will be minimal. The second possible impact is on clinical placements. Students from the MPK will complete practica at a wide range of sites including some clinical sites where OT and PT students complete internships. We have attempted to minimize this impact through choice of timing for the practica and will work to develop new field instructor partners who will be with Kinesiologists and therefore should not impact placements within other disciplines.

10.0 Resources:

10.1 Faculty Complement

The Faculty of Kinesiology and Physical Education will allocate two new tenure stream faculty positions

to the MPK program. The positions will be financially supported by program revenues. One full time administrative staff position will be allocated to support the program operations in house and the academic director. Not all faculty members will be directly involved as course instructors and assignments will be finalized at a later date. Practica will also be supported through existing resources from the Faculty's academic administrative group.

Graduate faculty in the Faculty of Kinesiology and Physical Education have demonstrated expertise in research and practice around the intersection of exercise with health and performance. The faculty listed in Table 3 below will contribute to the program through development of course materials, consulting and through direct course teaching. While the MPK is a course based program and therefore students will not have individual supervisors they will have an academic advisor from among the faculty members who have extensive experience in mentoring graduate students which will be employed in guiding students through the program and with capstone courses.

As documented in Appendix H faculty provide expertise in a wide range of relevant topic areas as a consequence of their teaching, research and service activities. Faculty members are engaged with organizations which provide health and performance related services. Collectively the faculty have on-going linkages with the Toronto Academic Health Science Network, Centre for Addiction and Mental Health, Greater Toronto Area School boards, Canadian Sport Institute Ontario, Defense Research and Development Canada, PARTCIPaction, the Heart and Stroke Foundation, Sport Governing Bodies, Institute for Work and Health. Faculty associations with these organizations will provide opportunities for placements and engagement with leaders in health, physical performance.

Curriculum Vitae are found in Appendix I (p 49).

Table 3: Faculty Complement (please list alphabetically)

Name	Home Department / Unit	Rank	Graduate Faculty Membership Status	Commitment to other programs (please list)	Contribution to this program (CI, TS, C/PS)*
Tenured					

Name	Home Department / Unit	Rank	Graduate Faculty Membership Status	Commitment to other programs (please list)	Contribution to this program (CI, TS, C/PS)*
Caroline Fusco, PhD	Fac. Kin & PE	Assoc. Prof.	Full		CI
Jack Goodman, PhD	Fac. Kin & PE	Professor	Full		CI
Ira Jacobs, DrMedSc	Fac. Kin & PE	Professor	Full		
Gretchen Kerr, PhD	Fac. Kin & PE	Professor	Full		
Margaret MacNeill, PhD	Fac. Kin & PE	Professor	Full	Grad Dept Ex Sci Public Health	
Lynda Mainwaring, PhD	Fac. Kin & PE	Assoc. Prof	Full		
Scott Thomas, PhD	Fac. Kin & PE	Professor		Grad Dept Rehab Sci: Dept Physiol.	CI
Tenure-Stream					
Kelly Arbour-Nicitopolous, PhD	Fac. Kin & PE	Assistant Prof.	Associate		
Tyson Beach, PhD	Fac. Kin & PE	Assistant Prof.	Associate		CI
Dan Moore, PhD	Fac. Kin & PE	Assistant Prof.	Associate		
Catherine Sabiston, PhD	Fac. Kin & PE	Associate Prof	Full		CI
Katherine Tamminen, PhD	Fac. Kin & PE	Assistant Prof.	Associate		
Greg Wells, PhD	Fac. Kin & PE	Assistant Prof.	Full		
Non-Tenure Stream					
Richards, Doug, MD	<i>Fac. Kin & PE</i>	<i>Assistant Prof.</i>	<i>Associate</i>		CI
Teaching Stream					
David Frost, PhD	<i>Fac. Kin & PE</i>	<i>Assistant Prof.</i>	<i>Associate</i>		<i>CI</i>
Ashley Stirling, PhD	<i>Fac. Kin & PE</i>	<i>Lecturer</i>	<i>Associate</i>		
Taha, Timur, PhD	<i>Fac. Kin & PE</i>	<i>Senior Lecturer</i>	<i>Associate</i>		
Sessional Lecturer					

Name	Home Department / Unit	Rank	Graduate Faculty Membership Status	Commitment to other programs (please list)	Contribution to this program (CI, TS, C/PS)*
To Be Identified					
Others (please specify – i.e., Adjunct, status only, clinical faculty, visiting or other)					
To Be Identified					C/PS

* CI: course instructor; TS: thesis supervisor; C/PS: clinical or practice supervisor

10.2 Learning Resources

Please see the following Appendices

Appendix D: Library statement confirming the adequacy of library holdings and support for student learning

Appendix E: Standard statement concerning student support services

10.3 Financial Support for Graduate Students

This is a professional master's program and as such, students are not eligible for the funding.

As is the case for any professional program, graduate students in this professional program will be eligible to apply to the Ontario Graduate Scholarship pool. Student bursaries are a component of the Faculties Advancement plans for the next two years and we plan on providing support to 3 -4 students on the basis of combined need and merit. Tuition fees are on par with those for equivalent professional health science graduate programs.

10.4 Address any Space/Infrastructure

The MPK will require a mixture of classroom, laboratory and seminar meeting spaces sufficient to accommodate up to 40 students in a cohort. The MPK will require a mixture of active laboratory, seminar meeting space, breakout rooms and socialization space sufficient to accommodate a cohort of 40 mature students who attend continuously over a period of 16 months. In the mid-long term these space requirements will be more than adequately met through new space in the development stage. From the outset, the program will have access to the facilities of the Goldring Centre for High Performance Sport which will be an unparalleled resource.

During Year 1 of the program, the Faculty will allocate space for a cohort of 40 in its current facilities, including the newly built Goldring Centre for High Performance Sport. During Year 2, particularly during the fall term when the first and second cohorts overlap, additional classroom space (for 80 students) will be scheduled in other University facilities through the office of Academic and Campus Events if the new academic tower on Site 12 is not ready for occupancy by then.

Going forward the new program will be housed in the academic tower to be built on Site 12, contiguous to the Goldring Centre for High Performance Sport, where some of its 4th floor common testing areas and laboratories can be accessed readily. Envisioned to occupy one full floor of the tower are three faculty offices, one of which is shared; an office for the program administrator; a reception area; two seminar/meeting rooms for up to 40 students each; 4-6 breakout rooms for 6-8 people each; washrooms and change rooms with lockers; kitchenette and lounge; and a multipurpose room for lab demonstrations and physical activity exercises. Co-located in this tower will be executive and professional graduate programs associated with the Rotman School of Management and the Munk School of Global Affairs; the synergies with students in those programs would be mutually beneficial. The new construction will provide space that is dedicated to the program, with the administration, faculty members and services located in a common area and accommodations that will allow for strong group dynamics.

Facilities for computer based conferencing will be required to maintain weekly contact with all students who are in placements. The program budget identifies funds to equip the teaching laboratories.

11 Quality and Other Indicators

Expertise in the Faculty of Kinesiology and Physical Education extends across the spectrum of factors that determine how exercise may influence health and performance. Two ways of describing the range of expertise will be employed.

The first classification is based on the expertise demonstrated in the broad determinants of health and function from sociocultural (Atkinson, Donnelly, Fusco, MacNeill) through behavioral (Arbour-Nicitopolous, Faulkner, Kerr, Mainwaring, Sabiston, Stirling, Tamminen) and biophysical (Beach, Frost, Goodman, Jacobs, Locke, Moore, Richards, Taha, Thomas, Tremblay, Welsh) perspectives.

The second classification is based on the health impairments and performance groupings that Professional Kinesiologists may encounter. Faculty have expertise in assessing and intervening with apparently healthy individuals including athletes who wish to improve physical capacity and performance (Arbour-Nicitopolous, Faulkner, Kerr, Sabiston, Stirling, Tamminen, Beach,

Frost, Richards, Goodman, Jacobs, Locke, Moore, Taha, Thomas, Tremblay), individuals with injuries (Beach, Frost, Mainwaring, Richards), behavioral and mental health impairments (Arbour-Nicitopolous, Faulkner, Kerr, Mainwaring, Sabiston, Stirling, Tamminen), and those with chronic disease(s) (Arbour-Nicitopolous, Sabiston, Goodman, Thomas, Tremblay).

Our faculty has strong linkages with premier clinical research facilities within the fully-affiliated hospitals of the University of Toronto, including: Baycrest Centre for Geriatric Care, Holland Bloorview Kids Rehabilitation Hospital, Centre for Addiction and Mental Health, Mount Sinai Hospital, St. Michael’s Hospital, Sunnybrook Health Sciences Centre, The Hospital for Sick Children, University Health Network, Women’s College Hospital. Our expertise in Professional Kinesiology is also evident in connection with groups such as the Heart and Stroke Foundation, ParticipACTION, and Cancer Care Ontario. Furthermore faculty (Arbour-Nicitopolous, Beach, Frost, Richards, Thomas) have links with the Canadian Sport Institute Ontario which provides services to high performance athletes.

Our graduate faculty are engaged in a wide breadth of research activities including: examining the emerging public health position on children’s play (Fusco); studying how health-risk behaviour and psychological distress interact in adolescence (Arbour-Nicitopolous & Faulkner); developing educational programs for physical demanding occupations (Beach & Frost); assessing a model for managing sports concussions (Mainwaring, Richards); exploring breast cancer survivors’ experiences of the Curves for Women physical activity program (Sabiston); assessing the impact of cardiac rehabilitation on physical activity years later (Thomas); and quantifying the cardiovascular risks of physical activity in apparently healthy individuals (Goodman & Thomas). This array of examples demonstrates that faculty have expertise across a spectrum of Professional Kinesiology.

Behavioral and mental health aspects of Kinesiology are a particular strength of the Faculty. We have recently won CFI funding to create the Mental Health and Physical Activity Research Centre (MPARC) and established a Canada Research Chair in Physical Activity and Mental Health. This group is the strongest in Canada and this strength will support the development of MPK graduates who are experts in supporting long term behavioral change to enhance health through exercise and physical activity.

12 Governance Process:

	Levels of Approval Required
Consultation with Provost	
Decanal and Provostial Sign-Off	
	Graduate unit approval
	Faculty/Divisional Governance

Submission to Provost's Office	
	AP&P
	Academic Board
	Executive Committee of Governing Council
<i>Program may begin advertising as long as any material includes the clear statement that "No offer of admissions will be made to the program pending final approval by the Quality Council and the Ministry of Colleges Training and University (where the latter is required)."</i>	
	Ontario Quality Council
	Submitted to MTCU (in case of new graduate degrees and programs, new diplomas)

10 Appendix A: Courses - Curricular Structure /Schedule Master of Professional Kinesiology

Place in Sequence	Course Number	Title	FCE & Total Hours	Grades	Timing
1 (4 wks)	EXS4000Y	Introduction to Professional Kinesiology	1.0 72 h	CR/NCR	Late August early Sept
2 (8 wks)	EXS4001H	Clinical Aspects of Assessment	0.5 36 h	Letter Grade	Sept to Nov
	EXS4002H	Biophysical Assessments	0.5 36 h	Letter Grade	
	EXS4003H	Behavioral Assessment	0.5 36 h	Letter Grade	
3a (5 wks)	EXS4004H	Clinical Interventions	0.5 28 h	Letter Grade	Nov-Dec
	EXS4005H	Biophysical Interventions	0.5 36 h	Letter Grade	
	EXS4006H	Behavioral Interventions	0.5 36 h	Letter Grade	
December Break (~2 weeks)					
3b (3 wks)		Continue courses (EXS 4004H, 4005H, 4006H) as above			Early Jan
4 (4 wks)	EXS8001H	Practicum 1	0.5 120 h	CR/NCR	Late Jan -Feb
5 (8 wks)	EXS4007H	Professional Practice 1a	0.5 24 h	Letter Grade	Late Feb-April
	EXS4008H	Evidence Supported Practice	0.5 36 h	Letter Grade	
	EXS4009H	Health & Performance Status: Determinants & Consequences	0.5 36 h	Letter Grade	
6 (8 wks)	EXS4010H	Professional Practice 1b	0.5 24 h	Letter Grade	April –June
	EXS8002Y	Practicum 2	1.0	CR/NCR	

			240		
June Break (2 weeks)					
7 (8 wks)	EXS4011H	Professional Practice 2a	0.5 24 h	Letter Grade	July-August
	EXS4012H	Treatment Interactions	0.5 28 h	Letter Grade	
	EXS4013H	Practice Setting Considerations	0.5 28 h	Letter Grade	
8 (8 wks)	EXS4014H	Profess. Practice 2b Practicum 3	0.5 36 h	Letter Grade	August-October
	EXS8003Y		1.0 240	CR/NCR	
9 (8 wks)	EXS4015H	Profess. Practice 3 Clinical Reasoning & Case Study Research Project	0.5 24 h	Letter Grade	Oct-Dec
	EXS4016H	Selected Topics in Professional Kinesiology	0.5 24	Letter Grade	
	EXS4017H		0.5 24 h	Letter Grade	
Total FCEs Required			12.0 FCE		64 wks 16 months

Appendix A. Figure 1. Proposed Master of Professional Kinesiology Curriculum Schedule

With First Year = 2016.

August 2016	Sept	Oct	Nov	Dec	Jan 2017	Feb	March	Apr	May	June	July	August
Introduction to Professional Kinesiology EXS 4000 <i>17 Aug-11 Sept 4 weeks</i>	Assessments: Clinical(4001) Biophysical(4002) Behavioral (4003) <i>14 Sept – 6 Nov 8 wks</i>		Interventions a : Clinical(4004) Biophysical(4005) Behavioral (4006) <i>9 Nov – 20 Dec 6 Wks (plus 2)</i>	B R E A K Dec 21 Jan 4 2 w	Interventions b: <i>5 Jan -15 Jan 2wks</i>	Practicum 1. EXS 8001 <i>18 Jan – 12 Feb 4 wks</i>	Prof Prac. 1a EXS 4007 Evid. Supp'ed Prac EXS4008 Health Determ'ts EXS4009 <i>15 Feb – 8 April 8 wks</i>	Practicum 2 EXS8002 Professional Practice.1b EXS4010 <i>11 April – 3 June 8wks</i>	B R E A K June 6-17 2wk	Prof. I Prac. 2a EXS4011 Treatment Inter EXS4012 Prac. Settings EXS4013 <i>June 20- Aug 12 8 wks</i>		
1 FCE	3 x 0.5 = 1.5 FCE		3 X 0.5 = 1.5 FCE		Cont.	0.5 FCE	3 X 0.5 = 1.5 FCE	1 + 0.5 = 1.5 FCE			3 x 0.5 = 1.5 FCE	

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August	Sept	Oct	Nov	Dec
Practicum 3 EXS8003 Professional Practice 2b EXS4014 <i>August 15 Oct 7 8 weeks</i>		Profession Prac 3 EXS4015 Case Study Project EXS4016 Selected Topics EXS4017 <i>Oct 10 Dec 2 8 weeks</i>		TOTAL
1 + 0.5 = 1.5 FCE		3 X 0.5 = 1.5 FCE		12 FCE

Appendix A. Part 2: Course Descriptions – Master of Professional Kinesiology

EXS4000Y Introduction to Professional Kinesiology (1.0 FCE)

This course will assist students in developing an advanced understanding of how Kinesiology can be applied in a professional context to improve the health and functional capacity of clients. Students will learn how fundamentals of movement science, current research, business and ethics are integrated to provide the highest level of practice. Students will draw on their previous knowledge of anatomy, biomechanics, motor learning and control, exercise physiology, behavioral sciences and ethics in developing a patient centred approach to providing clients with integrated assessments, interventions, and ongoing management of their health and performance and advocacy.

A mixture of lecture, laboratory and practical sessions will be used to aid in development of knowledge and skills related to movement science practice. Each week this compressed course will include 8 hours classroom activity and 10 hours of afternoon laboratories, tutorials and service learning and/or fieldtrips. Course duration 4 weeks. Total course time 72 hours.

EXS4001H Clinical Aspects of Assessment (0.5 FCE)

Students will develop expertise in clinical reasoning and increase the depth and breadth of their knowledge of clinical assessment. Clinical reasoning can be defined as thinking through the various aspects of patient care to arrive at a reasonable decision regarding the prevention, diagnosis, or treatment of a clinical problem in a specific patient. Client assessment in Kinesiology includes history taking, observation of movement, conducting a physical exam, performing tests, and using questionnaires. This course will assist in developing the critical thinking skills required for skillful clinical reasoning. A mixture of lecture, problem and case based learning sessions, and assignments will be used to aid in development of knowledge and skills related to Clinical Assessments. 2 hours per week of lectures and 2 of laboratory/tutorials. Course duration 8 weeks. Total course time 36 hours.

EXS4002H Biophysical Assessments (0.5 FCE)

Students will learn when and how to employ movement sciences assessment techniques appropriate to field and laboratory settings including: a) observation of movement, film/photo, EMG, ambulatory assessments such as accelerometers for assessment and testing, biomechanical analyses; b) estimation and measurement of energy system capacities (questionnaire based, critical power curve, respiratory gas exchange); c) muscle force and movement characteristics (range of motion, velocity and loading).

Lectures will stress principles of measurement and consideration of how underlying anatomy, physiology and pathology will affect choice of assessment. Approaches to ongoing monitoring of fitness and performance changes over time will be developed. A combination of lecture and case based learning will be employed. Laboratory session will focus on development of skill

and interpretation of results for clients with various health statuses. 2 hours of lecture and 2 hours of laboratory per week. Course duration 8 weeks. Total course time 36 hours.

EXS4003H Behavioral Assessment (0.5 FCE)

Understand and be able to carry out and employ health and behavior assessment procedures to identify the behavioral, emotional, cognitive, and social factors important to the prevention, treatment, or management of health and performance. This course will focus on the role of people's self-perceptions and assessing goals, needs, barriers, facilitators as precursors to individualized programming. Students will learn current theories of health psychology, psychometrics and assessment tools. Students will develop cutting edge assessment skills. This course will include 2 hours per week of lectures and 2 of laboratory/tutorials. Course duration 8 weeks. Total course time 36 hours.

EXS4004H Clinical Interventions (0.5 FCE)

Develop understanding of how pathology of musculoskeletal, neurological, cardiorespiratory, metabolic and immune system conditions influence function and the response to exercise interventions. Understand the sequence of interventions employed through injury healing process and through the progression of health conditions. Advocate for the health and wellness of patients/clients in health care systems. Develop ability to apply program planning, design and adaption approaches to enhancing function and health through movement science. A mixture of lecture, case based learning, laboratories and assignments will be used to aid in development of knowledge and skills. This course will include 2 hours per week of lectures and 1.5 hours of laboratory/tutorial. Course duration 8 weeks. Total course time 28 hours.

EXS4005H Biophysical Interventions (0.5 FCE)

Students will develop their knowledge and skill in providing individualized prescriptions for flexibility, muscular strength power and endurance, balance and cardiorespiratory fitness to a wide range of clients/patients. They will learn about prevention and treatment of diseases related to exercise and sports. Students will gain skill in creating programs for clients with chronic conditions such as mental health impairments, musculoskeletal disorders, cardiovascular diseases and diabetes. Students will gain skill in creating programs for clients who meet high physical demands (workplace, sport). 2 hours of lecture and 2 hours of laboratory per week. Course duration 8 weeks. Total course time 36 hours.

EXS4006H Behavioral Interventions (0.5 FCE)

Students will develop skill in applying behavioral interventions to modify the psychological, behavioral, emotional, cognitive, and social factors affecting patient/client function, health status and performance. Students will apply learning theory and behavior modification approaches through counselling, interviewing and prescription. Students will learn to communicate with empathy and using appropriate language with clients. They will develop the ability to relate client goals to possible interventions and provide appropriate feedback during the course of interventions. Students will become able to effectively deliver education to

clients/patients. Students will learn to use counseling skills and interviewing techniques with clients. Lectures, case studies and role playing will be employed.

This course will include 2 hours of lectures and 2 hour of laboratory/tutorials per week. Course duration 8 weeks. Total course time 36 hours.

EXS8001H Practicum 1 - 4 weeks 120 practicum hours

(See below for description of practica)

EXS4007H Professional Practice 1a (0.5 FCE)

Students will understand professional and ethical practice issues including respect for diversity, issues of access and practicing within the limits of professional knowledge, competence and skills. Students will develop skill in communicating effectively with patients/clients through oral, written and non-verbal means. Students will show respect for the beliefs and backgrounds of patients/clients. Students will practice skills in communication with clients/patients and colleagues.

They will be able to apply safety techniques and procedures (universal precautions, emergency procedures, work place standards. Students will learn the relevant Codes (e.g. Duty to Report) related to Kinesiology practice.

Section 1a of the course will comprise standard didactic classroom and tutorial sessions. 2 hours of lecture/1 hour tutorial per week. Course duration 8 weeks. Total course time 24 hours.

EXS4008H Evidence Supported Practice (0.5 FCE)

The focus of these units is on developing student's advanced research skills in critical appraisal, critical thinking and problem solving. Students will enhance their understanding of the roles of research in practice, stages of clinical research, sources of evidence to support practice, systematic reviews, practice guidelines, knowledge translation to clients and colleagues.

Students will be able to employ concepts of measurement properties (reliability, validity, generalizability, rigour, norms) in selecting measures. Students will develop knowledge and skills to integrate practice with research and program evaluation.

Students will practice skills for communication of research and knowledge to various audiences (researchers, practitioners, clients and public) through writing, formal presentation and use of electronic media. At the completion of this unit, students complete and submit a draft of their final paper and a poster that they will use for knowledge exchange.

A mixture of lecture, problem and case based learning sessions, and assignments will be used to aid in development of knowledge and skills.

2 hours per week of lecture and 2 hours of tutorial. Course duration 8 weeks. Total course time 36 hours.

EXS4009H Health and Performance Status: Determinants & Consequences (0.5 FCE)

Students will understand models which encapsulate how health is influenced by biological, pathology, behavioral, social and cultural factors and how health influences those factors. Students will understand models which examine the relations among pathology, impairment, functional capacity, disability and handicap. Students will understand models which identify the determinants of physical performance in the work place and in sport. Models of health and disability to pathophysiology will be examined. Students will examine how broader determinants of health impact the client/patient and the practice of health care. Students will be able to apply concepts from these models in developing assessment, intervention and monitoring plans. Students will develop their ability to conceptualize the relations among health, health care practice and broader health determinants.

A mixture of lecture, problem and case based learning sessions, and assignments will be used to aid in development of knowledge and skills.

This course will include 2 hours per week of lectures + 2 hour tutorial. Course duration 8 weeks. Total course time 36 hours.

EXS4010H Professional Practice 1b (0.5 FCE)

This is a hybrid course with a mix of in-person and on-line elements. This course will assist in maintaining the learning environment throughout clinical practica experiences. Professional Practice 1b will engage students who are in practice through Practicum 2 with related issues and peer facilitation and encourage development of reflective practitioners. Issues of the relation of theory and practice will be explored.

Electronic communication (Skype or equivalent) will be used for weekly discussions to reduce travel by students from dispersed clinical sites. 1 hour/ week on-line with class + 1 hour self-reflective journal/blog. In addition there will be two 2 hour class meetings in person every 4 weeks.

Total course time 24 hours.

EXS4011H Professional Practice 2a (0.5 FCE)

Interprofessional Education will be an important focus of this course. Students will learn the process and documentation for referrals to other health care providers. They will develop skill in judging the need for referrals based on patient characteristics and established clinical practices and requirements. Students will develop skill in how to communicate with third party payers, legal representatives, government entities and community resources. Guest lecturers from the community and from organizations including the College of Kinesiology will contribute. Issues of clinical practice and the ethics of interactions with clients, payers and the profession will be explored. Practices and approaches to leadership in health care teams will be examined.

This course will include the equivalent of 2 hours per week of lectures/tutorials. Actual time allotted per week may differ with opportunities for Interprofessional Education with University of Toronto health care students. 2 hours of lecture/1 hour tutorial per week. Course duration 8 weeks. Total course time 24 hours.

EXS4012H Treatment Interactions (0.5 FCE)

Students will develop their knowledge about the interventions (drugs, surgery, casts, splints, modalities, nutrition) used by other health care providers in relation to exercise. This will include information about the rationale for those treatments, how they influence the response to exercise and how exercise may modify the effect of those treatments. Students will learn how comparative effectiveness studies are done and the information used to guide treatment. Students will be able to modify their exercise assessments and interventions to account for the effects of other treatments.

This course will include 2 hours per week of lectures and case studies + 1.5 hour tutorials/week. Course duration 8 weeks. Total course time 28 hours.

EXS4013H Practice Setting Considerations (0.5 FCE)

Students will understand the differences in practice between hospital/rehabilitation programs, private clinics, community and home settings, workplace settings and athletic performance venues. They will be familiar with the differing approaches across settings to assessment and intervention the role of Kinesiologists in each setting. Students will contrast the need for and approach to physical demands analysis in each setting. They will consider the range of adaptability of the demands, the expectations of the patient/client, and how the social cultural setting impacts on the client/patient. Sport science support of athletes and the role of the Kinesiologist in Integrated Support Teams. Field trips to organizations and practice settings will be used to develop knowledge.

This course will include 2 hours per week of lectures and 1.5 hour of tutorials. Course duration 8 weeks. Total course time 28 hours.

EXS4014H Professional Practice 2b (0.5 FCE)

This is a hybrid course with a mix of in person and on-line elements. This course will assist in maintaining the learning environment throughout clinical experiences. Professional Practice 2b will engage students who are engaged in practice through Practicum 3 and further develop their skills as reflective practitioners and encourage their use of research skills in practice. Issues of increased autonomy and approaches to dealing with novel cases will be a particular focus. Electronic communication (Skype or equivalent) will be used for weekly discussions to reduce travel by students from dispersed clinical sites 1 hour/ week on-line with class + 1.5 hour self-reflective journal/blog. Two 2 hour class meetings every 4 weeks. Course duration 8 weeks. Total course time 24 hours.

EXS8002H Practicum 2 8 weeks 240 practicum hours

(see below for description of practica)

EXS 4015H Professional Practice 3 (0.5 FCE)

Students will learn to participate effectively in health care teams, provide leadership to the profession and enhance Kinesiology practice and relevant policy. Students will understand principles of managing a team of health care providers. Identify how to develop and maintain safe and effective physical facilities. Graduates will be aware of relevant codes and regulations such as the Ontario Human Rights Code, PHIPA and Personal Information Protection and Electronic Documents Act. Professional leadership will be a particular focus of this course.

Students consider alternative business models and will develop approaches to business management and promotion of practice. Understand how & why to engage in professional development, self-assessment.

Two hours lecture 2 hour tutorial per week. Course duration 8 weeks. Total course time 36 hr.

EXS 4016H Clinical Reasoning & Case Study Research Project (0.5 FCE)

Full term project starting from a particular case, employ research skills to give evidence base to assessment, intervention and on-going management recommendations. The student will create a case study which may be revised and employed with subsequent students. This capstone experience will draw on knowledge and skills developed throughout the program including research, understanding of clinical practice, communication approaches, knowledge exchange.

Equivalent to 3 hours per week. Course duration 8 weeks. Total course time 24 hours.

EXS 4017H Selected Topics in Professional Kinesiology (0.5 FCE)

Opportunity for specialization in which students will work on set of questions/cases in specific areas, (e.g. such as health promotion through physical activity for those with mental health challenges). Application of knowledge translation theory and practice (including contextualization, evaluation, participatory approaches, etc.) will be encouraged. The student will create an academic paper and associated knowledge translation products (e.g. newsletter article, on line information) to communicate to two different audiences (e.g. Kinesiologists, health care team members, clients, researchers). Included in these assignments will be tasks related to the development of leadership skills such as communication, conflict resolution and ethical decision-making.

Equivalent to 3 hours week. Course duration 8 weeks. Total course time 24 hours.

Practica

Practica are designed to enhance the student's ability to apply laboratory and classroom education in delivery of services to patients/clients. Students will apply the concepts of evidence supported practice of movement science in a variety of settings and with clients who differ in health, functional and sociocultural status. Students will develop their ability to critically analyze and problem solve to make clinical decisions and work with clients to enhance their function and health. They will further apply their research knowledge and skills to engage in knowledge exchange.

The three practica will involve the equivalent of 4 days per week (30 hours) for 4 or 8 weeks each – see below. All practica will involve developing learning contracts between the field instructor and the student. The contracts will identify learning objectives which are what and how a student will learn during the practicum. The learning objectives will include development of the competencies of a Professional Kinesiologist but will build to incorporate development of research and leadership skills such as application of clinical research, program evaluation and program development. Field instructors will receive status only appointments as Adjunct Lecturers. Academic advisors will be faculty members from the MPK and will provide ongoing communication and advice to students and field instructors.

The learning contract will be comprised of several elements which will likely include i) learning assignments and activities; ii) student observation of the instructor; iii) instructor observation of the student; iv) observation of the student by others (clients, other students). These occasions should be followed by reflection and discussion to identify what was learned, to relate the experience to a conceptual framework and assess the interaction. The learning contract will identify methods for evaluation. Formulating a learning contract is an ongoing process and new learning objectives may arise as the student develops. The written contract serves to formalize the expectations, assignments, resources, and evaluation procedures. The learning contract and objectives will be used as an ongoing tool in the practicum experience.

To maintain contact with the program and provide opportunities for reflective practice and integration of theory and science into practice a faculty moderated, on-line, virtual discussion will be held for 2 hours once per week. The discussion will be structured around identifying when opportunities to apply classroom material were encountered, when practice and classroom approaches seemed to be at odds, common issues encountered by student and information needs.

Practica from several areas of Kinesiological practice will be available. We will provide students with a range of placement experiences including those that will include encounters with clients needing assistance in dealing with biomechanical limitations, cardio-metabolic impairments, goals to improve physical performance, health behavior changes and combinations of those interests.

Practica will provide opportunities to develop student's identity as professionals and learn to work with members of health care teams. Professional values such as responsibility, accountability, sensitivity and ethical attitudes towards both the client/patient will be developed.

EXS8001H Practicum 1 - 4 weeks 120 practicum hours

EXS8002Y Practicum 2 - 8 weeks 240 practicum hours

EXS8003Y Practicum 3 – 8 weeks 240 practicum hours

11 Appendix B: Graduate Calendar Copy

SGS Calendar Entry Master of Professional Kinesiology

(Differences from current graduate offerings indicated in italics)

Faculty Affiliation:

Kinesiology and Physical Education

Degree Programs Offered:

Exercise Sciences - MSc, PhD

Kinesiology - MPK

Collaborative Programs

The following collaborative programs are available to students in participating degree programs as listed below:

Addiction Studies

- Exercise Sciences, MSc, PhD

Aging, Palliative and Supportive Care Across the Life Course

- Exercise Sciences, MSc, PhD

Cardiovascular Sciences

- Exercise Sciences, MSc, PhD

Health Services and Policy Research

- Exercise Sciences, MSc, PhD

Musculoskeletal Sciences

- Exercise Sciences, MSc, PhD

Sexual Diversity Studies

- Exercise Sciences, MSc, PhD

Women and Gender Studies

- Exercise Sciences, MSc, PhD

Women's Health

•Exercise Sciences, MSc, PhD

Overview

The field of exercise sciences is interdisciplinary. The Graduate Department of Exercise Sciences offers a Master of Professional Kinesiology, in Kinesiology and a Master of Science and Doctor of Philosophy in Exercise Sciences.

The **Master of Professional Kinesiology** is a 16 month, 4 session course based program with no thesis requirement. Its overarching purpose is to provide an advanced level of research-informed educational and leadership experiences in the field of professional Kinesiology. A modular program structure is used with compressed courses and a strong emphasis on practica to gain experience in application. A mixed learning approach with case based learning, lectures, tutorials and laboratories will provide students with the advanced knowledge and skills and the experience in use of movement science to improve physical function and health.

The Graduate Department of Exercise Sciences offers degree programs for students interested in research, academic, and professional careers relating to:

- 1. Applied/exercise/environmental physiology*
- 2. Metabolic and endocrinological aspects of physical activity*
- 3. Motor control and motor learning*
- 4. Muscle physiology*
- 5. Physical fitness and athletic strength and conditioning*
- 6. Psychological aspects of sport and physical activity*
- 7. Psychophysiological aspects of exercise and stress*
- 8. Sociocultural aspects of sport and physical activity*
- 9. Women's health and physical activity*
- 10. Health care provision as a Kinesiologist*
- 11. Biomechanics and ergonomics*

Contact and Address

Web: www.exs.utoronto.ca

Email: exs.kpe@utoronto.ca

Telephone: (416) 978-6087

Fax: (416) 971-2118

Graduate Department of Exercise Sciences
Faculty of Kinesiology and Physical Education
University of Toronto
55 Harbord Street
Toronto, Ontario M5S 2W6
Canada

Degree Programs Kinesiology

Kinesiology

Minimum Admission Requirements

- Applicants are admitted under the General Regulations of the School of Graduate Studies. Applicants must also satisfy the Graduate Department of Exercise Sciences' additional admission requirements stated below.
- Applications must be received by March 1.
- Applicants must have a four year bachelor's degree in Kinesiology, Human Kinetics or a related degree, with a minimum GPA of 3.3 (77/100).
- Resume
- Two letters of reference. At least one letter must be from an academic referee.
- Letter of intent which identifies the area of interest and reasons for pursuing the program.
- Proficiency in the English language must be demonstrated by all applicants educated outside Canada whose primary language is not English and who graduated from a university where the language of instruction and examination was not English. The Faculty prefers the Test of English as a Foreign Language (TOEFL), with minimum scores of:
 - Paper-based test: 600 with 5 on the Test of Written English (TWE) and 50 on the Test of Spoken English (TSE)
 - Internet-based test: 100/120 overall and 22/30 on the writing and speaking sections

Program Requirements

Successful completion of 12.0 full-course equivalents (FCEs) as follows.

Year 1 (fall and winter)

EXS4000Y (1.0 FCE) Introduction to Professional Kinesiology

EXS4001H (0.5 FCE) Clinical Aspects of Assessment

EXS4002H (0.5 FCE) Biophysical Assessments

EXS4003H (0.5 FCE) Behavioral Assessment

<i>EXS4004H (0.5 FCE)</i>	<i>Clinical Interventions</i>
<i>EXS4005H (0.5 FCE)</i>	<i>Biophysical Interventions</i>
<i>EXS4006H (0.5 FCE)</i>	<i>Behavioral Interventions</i>
<i>EXS8001H (0.5 FCE)</i>	<i>Practicum 1 (120 Hours)</i>
<i>EXS4007H (0.5 FCE)</i>	<i>Professional Practice 1a</i>
<i>EXS4008H (0.5 FCE)</i>	<i>Evidence Supported Practice</i>
<i>EXS4009H (0.5 FCE)</i>	<i>Health and Performance Status: Determinants & Consequences</i>
<i>EXS8002Y (1.0 FCE)</i>	<i>Practicum 2 (240 hours)</i>
<i>EXS4010H (0.5 FCE)</i>	<i>Professional Practice 1b</i>

Year 1 (summer)

<i>EXS8002Y (Continued)</i>	<i>Practicum 2</i>
<i>EXS4010H (Continued)</i>	<i>Professional Practice 1b</i>
<i>EXS4011H (0.5 FCE)</i>	<i>Professional Practice 2a</i>
<i>EXS4012H (0.5 FCE)</i>	<i>Treatment Interactions</i>
<i>EXS4013H (0.5 FCE)</i>	<i>Practice Setting Considerations</i>

Year 2 (fall)

<i>EXS8003Y (1.0 FCE)</i>	<i>Practicum 3 (240 Hours)</i>
<i>EXS4014H (0.5 FCE)</i>	<i>Professional Practice 2b</i>
<i>EXS4015H (0.5 FCE)</i>	<i>Professional Practice 3</i>
<i>EXS4016H (0.5 FCE)</i>	<i>Clinical Reasoning and Case Study Research Project</i>
<i>EXS4017H (0.5 FCE)</i>	<i>Selected Topics in Professional Kinesiology</i>

Program Length: 4 sessions full-time

Time Limit: 3 years full-time

Graduate Faculty

Full Members

Atkinson, Michael - BA, MA, PhD

Beach, Tyson - BSc, MSc, PhD
Donnelly, Peter A. - BA, MS, PhD
Faulkner, Guy - BE, MSc, DPhil
Fusco, Caroline - BA, MSc, PhD
Goodman, Jack - BPHE, MSc, PhD
Jacobs, Ira - MD, PhD (Dean)
Kerr, Gretchen A - BPHE, MA, PhD (Vice Dean)
Kidd, Bruce - BA, AM, MA, PhD
Locke, Marius - BA, BSc, PhD (Director, Graduate Studies)
MacNeill, Margaret - BPHE, MA, PhD
Mainwaring, Lynda - BA, MHK, PhD
Sabiston, Catherine - BS, MA, PhD
Thomas, Scott - BSc, MSc, PhD
Tremblay, Luc - BSc, MSc, PhD
Wells, Greg – MSc, PhD
Welsh, Timothy – BPHE, PhD

Associate Members

Amara, Catherine - BSc, MSc, PhD
Arbour, Kelly - BSc, MSc, PhD
Beck, Thomas - BS, MS, DSc
Frost, David, MSc, PhD
Moore, Daniel – BSc, MSc, PhD
Oh, Paul I T - MSc, MD
Stirling, Ashley - BPHE, MSc, PhD
Taha, Timur - BA, MEd, PhD
Tamminen, Katherine - BA, MSc, PhD

12 Appendix C: Master's Programs Kinesiology Canada

	Institution	Course-based Masters (please note that only career oriented programs are included in this list)	Research-based Masters
British Columbia:	U Victoria		
	U British Columbia	Masters of Kinesiology	Master of Arts, Master of Science
	Simon Fraser		M.Sc. In Biomedical Physiology & Kinesiology
Alberta	U Alberta	Master of Arts, MA Recreation & Leisure Studies Master of Coaching	Master of Arts, MA Recreation and Leisure Studies, Master of Science in Kin
	U Calgary	Master of Kinesiology	Master of Science, PhD in Kinesiology
	Lethbridge U		MA in Kinesiology, MSci in Kinesiology, Individualized Multidisciplinary MAs & MSc (concentration Kin)
Saskatchewan	U Saskatchewan		Master of Science Degree in Kinesiology
	U Regina		Master of Science in Kinesiology and Health Studies, MSc (KHS)
Manitoba	U Manitoba		Master of Science (Kinesiology and Recreation), Master of Arts (Kinesiology and Recreation)
Ontario	U Toronto		Master of Science in Exercise Science

	Brock U		MSc in Applied Health Sciences- with a specialization in Kinesiology
	Lakehead U	Graduate Diploma in Kinesiology	Master of Science in Kinesiology
	Nipissing U		
	Western U	Master of Arts, Master of Arts Sport Management Specialization	Master of Science, Master of Arts, Master of Arts Sport Management Specialization
	U Windsor	Master of Human Kinetics: Applied Human Performance or Sport Management	Master of Human Kinetics: Applied Human Performance or Sport Management
	U Ottawa	Master of Human Kinetics Sport Management, Master of Human Kinetics Intervention &Consultation	Master of Arts in Human Kinetics, Master of Science in Human Kinetics
	Wilfrid Laurier		MSc in Kinesiology
	Queen's University	Special permission for course based Master's	Master of Arts in Kinesiology and Health Studies, Master of Science in Kinesiology and Health Studies
Quebec	McGill U	Master of Arts (MA)	Master of Science (MSc), Master of Arts (MA)
	U Laval		Kinesiology (Master's with dissertation)
	U Montreal	Maitrise en kinesiologie (courses and training and tutorial classes)	Maitrise en Science de l'activite physique (courses + thesis

New Brunswick	U New Brunswick	MBA in Sport & Recreation Management, MSc Sport Studies	MSci Exercise and Sport Science, MA in Sport & Recreation Studies, MBA in Sport & Recreation Management
Newfoundland & Labrador	Memorial	Master of Physical Education	Master of Physical Education, Master of Science in Kinesiology

13 Appendix D: Library Statement

University of Toronto Libraries Report for Kinesiology 2013

Context: The University of Toronto Library (UTL) system is the largest academic library in Canada and is currently ranked third among academic research libraries in North America, behind Harvard and Yale.¹ The research and special collections, together with the undergraduate libraries comprise almost 11.5 million print volumes, nearly 5.5 million microform volumes, more than 17,000 journal subscriptions, in addition to a rich collection of manuscripts, films, and cartographic materials. The system also provides access to more than 1 million electronic resources in various forms including e-books, e-journals, and online indices, and increasingly supports access via personal handheld devices.² There are numerous collection strengths in a wide range of disciplines reflecting the breadth of research and instructional programs at the University. The University of Toronto Library system has an annual acquisition budget of \$25 million. The strong collections, facilities and staff expertise attract unique donations of books and manuscripts from around the world, which in turn draw scholars for research and graduate work.

Major North American Research Libraries ³					
	2006-07	2007-08	2008-09	2009-10	2010-11
ARL RANK	UNIVERSITY	UNIVERSITY	UNIVERSITY	UNIVERSITY	UNIVERSITY
1	Harvard	Harvard	Harvard	Harvard	Harvard
2	Yale	Yale	Yale	Yale	Yale
3	Columbia	Toronto (3rd)	Columbia	Toronto (3rd)	Toronto (3rd)
4	Toronto (4th)	Columbia	Toronto (4th)	Columbia	Michigan
5	California, Berkeley	California, Berkeley	Michigan	Michigan	Columbia

Top 5 Canadian Universities in the ARL Ranking of Major North American Research Libraries					
	2006-07	2007-08	2008-09	2009-10	2010-11
	RANK/ UNIVERSITY	RANK/ UNIVERSITY	RANK/ UNIVERSITY	RANK/ UNIVERSITY	RANK/ UNIVERSITY
	4/Toronto	3/Toronto	4/Toronto	3/Toronto	3/Toronto
	19/Alberta	12/Alberta	16/Alberta	11/Alberta	11/Alberta
	25/British Columbia	25/British Columbia	26/British Columbia	24/British Columbia	16/British Columbia
	33/Montreal	26/McGill	34/Montreal	31/Montreal	32/Montreal
	39/McGill	33/Montreal	40/McGill	37/McGill	38/McGill

Space and Access Services: The Library system provides a variety of individual and group study spaces for both undergraduates and graduates in the 10 central and 23 divisional libraries on the St. George, Mississauga, Scarborough and Downsview campuses. Study space and computer facilities are available twenty four hours, five days per week at one location, Robarts Library. Web-based services and

¹ Chronicle of Higher Education, "Library Investment Index at University Research Libraries, 2010 – 2011." In the Almanac of Higher Education, 2012.

² Figures as of 2010 taken from UTL's "What's new in E-Resources" page <http://main.library.utoronto.ca/eir/EIRwhatsnew.cfm> and UTL's annual statistics <http://discover.library.utoronto.ca/general-information/about-the-library/annual-statistics>

³ Association of Research Libraries Statistics.

electronic materials are accessible at all times from campus or remote locations, through the U of T based Scholars Portal and other leading edge digital services.

Instruction & Research Support: The Library plays an important role in the linking of teaching and research in the University. To this end, information literacy instruction is offered to assist in meeting degree level expectations in the ability to gather, evaluate and interpret information. These services are aligned with the Association of College and Research Libraries (ACRL) Information Literacy Competency Standards for Higher Education.⁴

Program Specific Instruction: Instruction occurs at a variety of levels for Kinesiology students and is provided by the faculty liaison librarian for Physical Information & Health. The Gerstein Science Information Centre facilitates formal instruction integrated into the class schedule and hands-on tutorials related to course assignments as well as maintaining two online subject research guides for Kinesiology: *Kinesiology & Physical Education Resources* and *KPE465 Exercise for Children with Chronic Disease*. The Library, through its [liaison librarians](#), customizes feeds of library resources. These appear prominently in Portal/Blackboard course pages.

Collections: Many college and campus libraries collect materials in support of Kinesiology; the largest collection of materials is centrally located in the Gerstein Science Information Centre. Collections are purchased in all formats to meet the variety of preferences and styles of our current students and faculty. The University of Toronto Library is committed to collecting both print and electronic materials in support of Kinesiology at the University of Toronto.

Journals: The Library subscribes to 25 of the top 25 journals listed in Journal Citation Reports (JCR)⁵ in Rehabilitation, Biology, Neuroscience, and Nutrition and Dietetics. All of these titles are available electronically to staff and students of the University. The Library also subscribes to 24 of the top 25 journals listed in Journal Citation Reports (JCR)⁶ in subject area Physiology. Of these titles, all are available electronically to staff and students of the University.

Monographs: The University of Toronto Library maintains comprehensive book approval plans with 53 book dealers and vendors worldwide. These plans ensure that the Library receives academic monographs from publishers all over the world in an efficient manner. For Kinesiology, monographs are purchased in electronic form where possible. The Library currently receives all current e-books directly from the following publishers: Springer, Elsevier, Wiley and Books@Ovid Human Kinetics.

Preservation, Digitization, and Open Access: The University of Toronto Library supports open access to scholarly communication through its institutional research repository (known as T-Space), its open journal and open conference services, and subscriptions to open access publications. In addition to acquiring materials in support of Physical Therapy, the Library is also, in cooperation with the Internet Archive, digitizing its monograph holdings published before 1923. These books are available without charge to anyone with access to the Internet through the Scholar's Portal e-Book platform.

⁴ Association of College & Research Libraries. *Information Literacy Standards*. ACRL, 2006.

⁵ 2008 Journal Citation Reports® (Thomson Reuters, 2009)

⁶ 2008 Journal Citation Reports® (Thomson Reuters, 2009)

Key Databases: [SPORTDiscus](#) , Medline, [Physical Education Index](#), and Embase, SCOPUS, CINAHL, OVID MEDLINE, Cochrane Library

Prepared by: Gail Nichol, Selector for Life and Health Sciences, September 2013

Submitted by: Larry Alford, Chief Librarian, University of Toronto Libraries,

14 Appendix E: Student Support Services

Student service information for Quality Assurance Framework

St. George Campus

All students at the University of Toronto have access to a range of services and co-curricular educational opportunities that complement the formal curriculum. Delivered centrally through Student Life and other offices, these services and programs support, engage and challenge students to reach their full potential as learners, leaders and citizens.

Students have access to comprehensive physical and mental health care on campus including a medical clinic, travel medicine services, immunization, contraception and sexual health education. Counselling and treatment options for psychological and emotional concerns include psychotherapy, group therapy and pharmacotherapy, as well as specialized assault counseling services.

Housing needs, including off-campus housing listings and resources for students living independently, are met through the Student Housing Service.

Coaching and education in the development of key learning skills – from time management to overcoming exam anxiety – is provided through the Academic Success Centre. The ASC also partners with faculty to integrate success strategies and support into the curriculum.

Students' career exploration and employment services are provided through a Career Centre offering resume and interview coaching, workshops, career resources, on and off-campus employment and volunteer listings, job shadowing, and career counseling.

Specialized services are provided for international students (orientation, advising, cross-cultural counselling), students with disabilities (academic accommodations, advising), students with children or other family responsibilities (advising, resources, subsidized child care), aboriginal students (academic support, financial counselling) and lesbian, gay, bisexual and transgender students (counselling, referrals).

Participation in campus life and experiential learning are facilitated through Hart House (clubs, committees, events), the Centre for Community Partnerships (service learning), the Multifaith Centre (interfaith dialogue, events), and the Office of Student Life (leadership development, orientation, recognition and support for student groups, activities.) Sport and recreational facilities and programs are provided to all students through both Hart House and the Faculty of Kinesiology and Physical Education.

The Faculty of Kinesiology and Physical Education provides:

- registrarial services; academic advising

- access to the Health Sciences Writing Centre
- student activity spaces

School of Graduate Studies, Student Services [all campuses]

All graduate students at the University of Toronto have access to registrarial services and co-curricular programs at the School of Graduate Studies that assist students in meeting their academic goals.

Administrative staff at the School of Graduate Studies (SGS) provide registrarial services to graduate students including but not limited to recruitment, admission, orientation, registration, fees, program progress, awards/financial assistance and graduation.

The Grad Room is an accessible space on the St. George campus (Harbord and Spadina) which provides University of Toronto graduate students with a lounge area and a multi-purpose space for academic, social and professional graduate student programming.

Grad Room is home to the Graduate Professional Skills Program (GPS). GPS is a non-academic program presented by SGS consisting of a variety of offerings that provide doctoral stream students a range of opportunities for professional skills development. The program focuses on skills beyond those conventionally learned within a disciplinary program, skills that may be critical to success in the wide range of careers that graduates enter, both within and outside academe. GPS aims to help students communicate effectively, plan and manage their time, be entrepreneurial, understand and apply ethical practices, and work effectively in teams and as leaders.

The Office of English Language and Writing Support (ELWS) provides graduate students with advanced training in academic writing and speaking. By emphasizing professional development rather than remediation, ELWS helps students cultivate the ability to diagnose and address the weaknesses in their oral and written work. ELWS offers four types of instruction designed to target the needs of both native and non-native speakers of English: non-credit courses, single-session workshops, individual writing consultations, and website resources.

15 Appendix F: Student Survey

STUDENT SURVEY - QUESTIONS

A new Professional Masters in Kinesiology is being proposed in the Graduate Department of Exercise Sciences of the Faculty of Kinesiology and Physical Education. If implemented, this new professional masters program will develop Health Professionals who will lead the discipline in establishing effective health promotion, performance enhancement, impairment reduction and prevention, and secondary prevention through movement science. The program will ensure that graduates will have the background knowledge and skills required to achieve professional standing as a Registered Kinesiologist.

As a current KPE student or recent graduate of the faculty, your input on this proposed professional masters program is highly valued. The survey below should take less than 5 minutes to complete. Thank you in advance for your contribution!

Question 1

Please indicate your current year of study:

Question 2

Please indicate your current degree stream:

Question 3

Following graduation, do you intend to seek employment in the field of “kinesiology”?

If YES, which of the following do you intend to pursue (check all that apply):

- Professional program (e.g. medicine, physical therapy, occupational therapy)
- Research-based Master’s degree in kinesiology (Master’s of Arts or Science in kinesiology)
- Research-based Master’s degree in another field (Master’s of Arts or Sci. in another field)
- Doctoral degree (PhD) in kinesiology
- Doctoral degree (PhD) in another field
- Bachelor’s degree in another field
- Other, please specify...

Question 4

If a post-graduate, professional masters program in kinesiology was available, would you consider enrolling in such a program?

Question 5

What factors would affect your decision to enroll in a post-graduate, professional program in kinesiology? (Check all that apply):

- Length of study (e.g. 1 yr vs 1.5 or 2 yr program)
- Types of courses offered
- Emphasis on research informed practice
- Emphasis on skill acquisition
- Ability to participate in “internships” during the program
- Ability to find employment following the program
- Other, please specify...

Question 6

Any additional comments?

STUDENT SURVEY RESPONSE SUMMARY

(summary for 97 responses to on line survey)

QUESTION	Response	Sample (%)
1. current year of study	Entering 3 rd 50	51
2. current degree stream	BKIN CTEP Other	90 6 4
3. do you intend to pursue	Professional program Research-based Master’s Doctoral degree (PhD) Kinesiology Doctoral degree (PhD) Other Bachelor’s degree Other Other	71 36 11 19 6 11
4. If a post-graduate, professional masters program in kinesiology was available, would you consider enrolling in such a program?	YES NO Unsure	72 5 22
5. What factors would affect your decision to enroll in a post-graduate, professional program in kinesiology	Length of study Types of courses Emphasis on research informed Emphasis on skill acquisition participate in “internships” find employment	70 80 32 65 74 86
6. Any additional comments?	this would be a great opportunity for those in our program to have more leeway in decisions for schools etc. Absolutely should be implemented.	

16 Appendix G: Ontario Health & Human Resources Network

Policy Analysis of Scope of Practice Changes to Physiotherapy and the Newly Regulated Health Profession of Kinesiology

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March 2012

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The opinions, results and conclusions are those of the authors and no endorsement by the OHHRN is intended or should be inferred.

Suggested Reference:

Landry MD, Woodhouse LJ, Deber RB, Randall GE, Miller P, Hicks A, Stokes E, Desmeules F, Thomas S (2012) *Policy Analyses of Scope of Practice Changes to Physiotherapy and the Newly Regulated Health Profession of Kinesiology*. Department of Physical Therapy, University of Toronto, Toronto, Ontario, Canada.

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1.0 Executive Summary and Main Messages

Across Canada, there remains a high priority placed on Health Human Resources (HHR) policy and planning. In Ontario, the Regulated Health Professional Act (RHPA) of 1991 is the Act that sets policy and practice standards for self-regulation of individual provider groups. For the first time since implementation, the Ontario Ministry of Health and Long Term Care (MOHLTC) asked the Health Professions Regulatory Advisory Council (HPRAC) in the mid-2000s to discuss the extent to which the mix of current providers regulated under the RHPA was meeting the needs of the population, and still further if the scope of practice for some providers already regulated limited their scope of practice. The ultimate outcome of these discussion, and submissions from provincial stakeholders, was the introduction of new legislation. Relevant to this research was the introduction of Bill 171 which would provide the necessary structure to regulate the practice of kinesiologists, and Bill 179 which would expand the scope of practice of physiotherapists to include the following seven controlled acts: 1) communicating a diagnosis, 2) treating a wound below the dermis, 3) assessing or rehabilitating pelvic musculature, 4) administering a substance by inhalation, 5) ordering a prescribed form of energy, 6) ordering diagnostics (i.e. x-rays), and 7) ordering specific laboratory tests.

The purpose of this research was to conduct policy relevant analyses of the educational, regulatory, practitioner and overall system implications, both real and perceived, of Bill 171 and Bill 179. The objectives were (a) to conduct an environmental scan including a review of available documents pertaining to Bill 171 and Bill 179, (b) to conduct key informant interviews with multiple stakeholders across Ontario to more fully describe current activities and perceptions, and (c) to conduct a comprehensive policy analysis by triangulating multiple data sources. The following levels of inquiry and questions were addressed: **(1)**

Educational/Training Level: Which organizations have, or are, preparing to provide primary and continuing education for the newly regulated profession of kinesiology and expanded scope of practice of physiotherapy? Why and why not? **(2) Regulatory/College Level:** What activities have College of Physiotherapists of Ontario (CPO) and the Transitional Council of the College of Kinesiologists of Ontario (TCCKO) undertaken, and what activities are planned or need to be undertaken, to prepare for the newly regulated profession of kinesiology and for the changing scope of practice of physiotherapy? What deliberation around ‘risk’ to the public has been considered? **(3) System of Professions Level:** What activities, if any, have members of other regulatory Colleges, and members of other professions, undertaken to prepare for the newly regulated profession of kinesiology and expanded scope of practice of physiotherapy? **(4) Practice/Practitioner Level:** To what extent are kinesiologists and physiotherapists preparing to deliver newly authorized services? Who is, who isn’t and why? What will be the impact of legislation on the relationship with non-regulated providers (i.e. physical therapy assistants), given the current provincial focus on interprofessional care? **(5) Health System Level:** What was the rationale for these legislative changes? What impact will the newly regulated profession of kinesiology and expanded scope of practice of physiotherapy have on the health system at the micro-level (i.e. patient/client care), meso-level (i.e. employment settings), and at the macro-level (i.e. cost of overall provincial health system).

Order to address the above research levels and questions, we conducted document analysis, key informant interviews (n=24) and provincial surveys of kinesiologists (n=241) and physiotherapists (n=292). This policy analysis triangulated multiple data sources in order to address the five levels of inquiry noted in section 3.0. Ethics approval for this study (with particular attention to the key informant interview and survey portions) was obtained through the University of Toronto Research Ethics Board, and the University of Ottawa Research Ethics Board.

The following are a series of six main messages that have emerged from our research.

Key Message #1 (General): There are a number of regulated and unregulated health professional groups in Ontario. Recently, Kinesiologists have been added to the list of regulated health professionals under Bill 171, and the scope of practice for physiotherapists has been expanded under Bill 179. At the time of this study, most of the regulatory changes that were included under Bill 171 and Bill 179 had not yet taken effect. The Transitional Council of the College of Kinesiologists of Ontario (TCKCO) did release its competency profile in early 2012, and had submitted all required documentation to the Ministry of Health and Long Term Care (MOHLTC). They anticipate that regulation will occur in 2013. Under Bill 179, the College of Physiotherapists of Ontario (CPO) created a process wherein all physiotherapists in the province who believe they have the required competencies, and who plan to perform any of the controlled acts, could identify themselves to the CPO by adding their names to a roster of physiotherapists competent to engage in these activities. At the moment, the rostering process is only related to the following acts: treating a wound below the dermis, assessing or rehabilitate pelvic musculature, and administering a substance by inhalation. There is no process for permitting the following controlled acts that were identified under Bill 179: ordering a prescribed form of energy, ordering diagnostics (e.g., x-rays), and ordering specific laboratory tests. As of the time of writing this report, there were no specific dates when these three controlled acts would be permitted, and no description of what would constitute the required competencies.

Key Message #2 (Education Level): Based on our findings, the necessary education to support either the regulation of kinesiology or expanded scope of practice for physiotherapy remained vague. In kinesiology, there is a wide range of educational program across the 13 institutions that graduate kinesiologists in Ontario. These graduates earn a range of degree types in kinesiology, including Bachelor of Arts (BA) and Bachelor of Sciences (BSc) degrees. Moreover, it was not clear that any further education, beyond a jurisprudence course, was planned for current kinesiologists in order to qualify for self-regulation. It was clear, however, that there was somewhat of a gap between what kinesiologists believe should be included in the educational curriculum, and what the academic institutions are currently providing. In physiotherapy, it was clear that the expanded scope of practice under Bill 179 were not entry-level to practice skills, and as such, the university programs are not planning any significant alteration in curriculum. Some institutions are, however, planning to provide continuing educational courses that would be related to the new controlled acts. Many of the criteria that would describe competency either for newly regulated kinesiologists or the expanded scope of physiotherapy practice has not yet been clearly identified by the regulatory authorities. It is important to note that it is early in the genesis of the practical application of Bill 171 and Bill 179, so our data represent preliminary and foundational information.

Key Message #3 (Regulatory Level): It is clear that the Transitional Council of the College of Kinesiologists of Ontario (TCCKO) and the College of Physiotherapists of Ontario (CPO) have made significant advances with respect to the implementation of Bill 171 and Bill 179. The TCCKO is a new organization and appears to have submitted all documentation that will lead to kinesiologists ‘actually’ practicing as regulated providers (expected in 2013). The CPO was identified as the primary source of information for physiotherapists regarding regulatory changes. In general and overall, our data seem to indicate that the respective professions are satisfactorily meeting proposed objectives related to new regulation. However, most respondents expressed concern with the length of time from proclamation to making changes in practice.

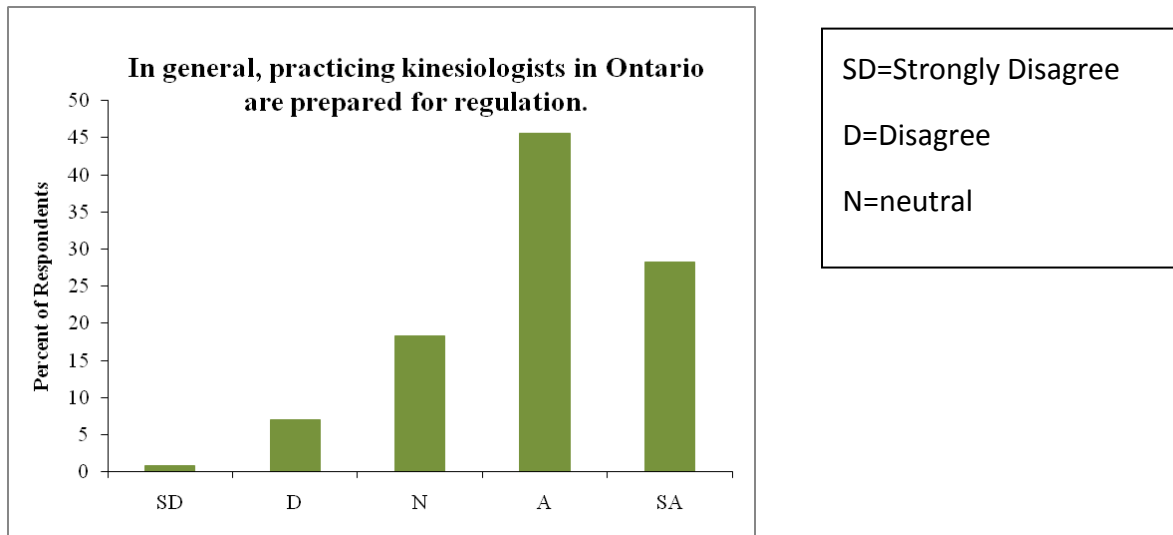
Key Message #4 (System of Professionals): Very few of the regulatory colleges outside of kinesiology had opinions regarding the upcoming regulation of kinesiologists. Many informants did express that they were “not really” aware of what TCCKO was planning, and in any case most were indifferent toward this legislation. On the other hand, given that the expanded scope of practice has the potential for overlap with other disciplines, many other colleges did have opinions and perspective on the advancement of physiotherapy practice. None of the feedback for either kinesiology or physiotherapy was in any way negative, and most regulatory colleges seem to be adopting a ‘wait and see’ approach to the outcomes of Bill 171 and Bill 179. Some stakeholders were encouraged by the fact that the Ministry of Health and Long-Term Care (MOHLTC) introduced new legislation to regulate kinesiologists and expand the scope of practice for physiotherapists, and are now considering processes that might lead to an expanded scope of practice within these disciplines. It would therefore seem that the introduction of Bill 171 and Bill 179 has sent a message, real or imagined, and that there is opportunity for health professional groups in Ontario to alter their regulation status or scope of practice. To some extent, reviewing the RHPA for the first time since the early 1990s (and introducing Bill 171 and Bill 179) may have set a precedent in terms of future expectations for legislating expanded scopes of practice. Whether this results in a positive or negative impact on healthcare delivery remains unclear.

Key Message #5 (Practitioner Level): The response rate to the provincial surveys was very low and therefore the generalizability of our data are limited. Responses among those who did respond to the survey were generally very positive towards the proposed changes. However, those who responded may be more interested in the topic and thus represent a biased sample, and may also have offered a more favourable viewpoint with respect to the proposed changes in scopes of practice. The responding kinesiologists believed that regulation was a positive step, that it will improve their interactions with others, and will provide them with an improved mechanism to treat patients. Although very positive at the conceptual level, many expressed some degree of confusion or uncertainty in what regulation will mean, and what the requirements will be expected. As is often noted, the ‘devil is in the details’ and at the moment there are few details. The physiotherapists who responded were also very positive, and many planned to use the controlled acts within the expanded scope legislation. However, ironically, the controlled acts that physiotherapists are most interested in incorporating into their daily practice are also those very acts that are not yet permissible (e.g., ordering imaging), and there are no specific timelines when these will be allowed under Bill 179.

Key Message #6 (Health System Level): Both disciplines have argued that Bill 171 and Bill 179

would yield positive outcomes such as improved access to care. However, the extent to which Bill 171 and Bill 179 will have an impact at the patient or health system level is not clear. Much of the information that was collected through key informant interviews indicated that there will likely be a positive impact on clinical outcomes, but much of these claims remain unsubstantiated. Further investigation is required in order to measure the outcomes of these legislative changes.

Figure 2: Responses to “In general, practicing kinesiologists in Ontario are prepared for regulation” (n=241)



17 Appendix H: Faculty Expertise.

Faculty Member	Expertise Health, Performance and Exercise
Cathy Amara Assistant Professor & Director, UG Studies	Muscle health and functional capacity in aging and food restriction/anorexia
Kelly Arbour-Nicitopoulos Assistant Professor	Health and exercise psychology; Psychosocial predictors of physical activity (PA); PA interventions in populations with chronic disability; Knowledge translation
Michael Atkinson Associate Professor	Bioethics; Violence, aggression and health; Health and sexualities
Tyson Beach Assistant Professor	Occupational Biomechanics and Ergonomics; Musculoskeletal Health and Injury Prevention; Biomechanics of Sport and Exercise; Strength and Conditioning
Peter Donnelly Professor	Sport subcultures; Children in high performance sport Cultural studies sport and leisure practices; Sport and social inequality; Sport policy and politics
Guy Faulkner Professor	Physical activity promotion in community and rehabilitation; PA and psychological well-being in children and adults; Ecological interventions and physical activity
David Frost Assistant Professor	Sport, Exercise, and Occupational Biomechanics; Musculoskeletal health and Injury Prevention; Movement Screening and Evaluation; Strength and Conditioning
Caroline Fusco Associate Professor	Sociology of physical activity and health; Cultural geographies of children and youth's PA and health environments; Ethics, equity and social justice issues in sport
Jack Goodman Professor	Cardiac and hemodynamic response to prolonged exercise; Cardiac rehabilitation; Exercise and heart failure.
Ira Jacobs Dean & Professor	Adaptations to acute short-term, high intensity exercise; Nutritional and/or pharmacological interventions affecting exercise performance; Exercise pharmacology; Physiological responses and adaptations to environmental extremes
Gretchen Kerr Professor and Vice-Dean, Academic Affairs	Harassment and abuse in youth sport; Athlete-centred coaching practices; Ethics and sport.
Margaret MacNeill Associate Professor	Health communication; Health and physical literacy; Critical policy studies of public health; Social marketing of active healthy living; Youth sport and fitness audience studies
Lynda Mainwaring Associate Professor	Emotional recovery from concussion; Psychological issues related to hand injuries; Psychological recovery from dance and athletic injuries; Sports psychology
Dan Moore Assistant Professor	Muscle protein metabolism; Musculoskeletal health with exercise and disuse; Sports nutrition; Training adaptations
Marius Locke Associate Professor, Director Graduate	Role of HSPs play in skeletal muscle protection in context of diabetes, hypertrophy, exercise, heat stress, cold stress

Doug Richards Assistant Professor	Concussions in Sport; Clinical Sport Medicine; Biomechanics of Injury; Injury Prevention; Health and Lifestyle
Catherine Sabiston Associate Professor	Exercise & health psychology; Psychosocial determinants of health behaviour; Mental health; Body-related emotions; PA intervention; PA measurement; PA and cancer.
Ashley Stirling Lecturer	Experiential Learning; Curriculum Development and Evaluation Athlete Welfare; Emotional Abuse in Sport ; Psychosocial Aspects of High Performance Athlete Development
Tim Taha Lecturer	Elite athlete training; training programme design; speed, strength and power training; Athlete Development; Rowing, cycling, track and field
Katherine Tamminen Assistant Professor	Sport psychology and sport performance; Stress, coping, and emotion; Youth sport & adolescent athletes
Scott Thomas Professor, Associate Dean, Research	Access to cardiovascular health; Exercise & aging; Fitness testing; Critical power curve; Dose/response training & performance. Physically Demanding Occupations; Health Human Resources.
Luc Tremblay Associate Professor	Use of sensory information as a function of practice; Neuromotor training and rehabilitation
Greg Wells Assistant Professor	Physiological assessment and training; Chronic diseases in children; High performance sport; Media relations.
Tim Welsh Associate Professor	Movement in Social Contexts; Cognitive and Motor Disorders in Downs Syndrome, Autism, & Developmental Coordination Disorder

18 Appendix I: External Appraiser Report

University of Toronto
New Program Proposal
Appraisal Report
Terms of Reference
Faculty of Kinesiology & Physical Education
Masters of Professional Kinesiology (MPK)

Report Summary

Reviewers:

Glenn Gaesser, PhD, Arizona State University
Robert Ross, PhD, Queen's University

Program evaluation criteria

1. Objectives

The MPK program is consistent with the mission of the Faculty of Kinesiology and Physical Education. As indicated in the proposal, graduates of the MPK program should have developed competencies in “devising, implementing and evaluating exercise strategies to improve health, wellness and performance.” The program appropriately focuses on biophysical, behavioral, and sociocultural approaches to enhancing health and physical performance in adults. Since there currently are no MPK programs in Canada, the proposed program fills a need. Recent legislation establishing the College of Kinesiology in Ontario further underscores the importance of the MPK program and consequently, places the University of Toronto ahead of the curve in the preparation of candidates who may seek Registration with the College.

The degree nomenclature (Masters of Professional Kinesiology; MPK) is appropriate and is distinct from the current research-based graduate degree programs in Canada (i.e., Master of Science in Kinesiology, or Master's in Kinesiology or Human Kinetics).

The MPK program is timely and reflects well on the leadership of the Kinesiology program in general. Graduates of the MPK will be well-placed to become registered professionals and/or to work within the allied health profession, which is a growing profession.

2. Admission requirements

In general, the admission requirements to the program are appropriate. The requirement for a bachelor's degree in kinesiology, human kinetics or related degree from a recognized university is appropriate, as are the letters of reference and proficiency in the English language. The term “recognized” university is a bit vague, and open to interpretation.

The GPA requirement could be modified to increase likelihood of admitting the highest quality students by specifying that the “mid-B average in the final year” be in upper division courses

within the major, or courses that the faculty considers to be most essential to successful performance in a graduate program such as the MPK. This would prevent GPA inflation from less rigorous courses taken during the final year to fulfill credit requirements for graduation.

3. Structure

The proposed 16-month duration is appropriate, and likely will be attractive to students. A justification for the desired cohort size of 40 is not explicitly stated, and may create logistical issues considering the 600 hours of practicum experience required for each student, distributed amongst three separate practica.

4. Program Content

All course work must be completed amongst graduate level courses, which is required by the University of Toronto, and which exceeds the quality assurance framework of the province of Ontario.

The degree-level expectations and program learning outcomes are clearly defined in terms of (1) depth and breadth of knowledge, (2) research and scholarship, (3) level of application of knowledge, (4) professional capacity/autonomy, and (5) level of communication skills. The course work covers an appropriate range of disciplines, including clinical, biophysical and behavioral assessments and interventions.

Specific recommendation: In the treatment interactions course (EXS4012H) a significant focus on comparative effectiveness of various treatment options should be included (i.e., lifestyle interventions vs. pharmacotherapy; lifestyle interventions vs. surgical procedures etc).

5. Mode of Delivery

The mode of delivery is appropriate. The modular program approach is suited to fulfilling the learning objectives, and is intended to take 16 months to complete. The program will include approximately 280 hours of classroom instruction, another 240 hours of laboratory and tutorials, and will require 600 hours of practicum experience spread out over three distinct practica. This distribution of learning experiences is appropriate and is consistent with the course and practice requirements of certifications as a clinical exercise physiologist by the Canadian Society for Exercise Physiology and the American College of Sports Medicine.

The reviewers are concerned about the logistics of having 40 students (intended cohort enrollment) each performing 600 hours of practicum experience over a 16-month period. Managing 24,000 hours of practica may pose significant challenges. This may become particularly problematic during the second year and beyond, when an additional 40 students are expected to enroll in the program, creating an overlap of 80 students in practica at the same time during the fall term. The proposal indicates that more than 30 placements have been identified. If the program intends to have 40 students enrolled each year, with an overlap of two cohorts during the fall term, then considerably more than 30 sites need to be confirmed. It is assumed that some sites might serve more than one student at a time, so the exact number of sites required is not possible to anticipate at this time. The proposal indicates that each field

instructor may supervise one to three students at any given time, so it may be possible to administer the MPK with only 30 sites. It is essential that enough sites are identified that will optimally accommodate all students with appropriate experiences to suit each student's career goals. This will also ensure that the field instructors will not be disproportionately burdened with high student loads.

It is essential that guidelines be developed for establishment of the learning contract to ensure that field instructors optimize the practicum experience for the students so that learning objectives are achieved.

The three-step process for matching students with practica placement sites does not describe options in the event that there are insufficient sites to meet desired placement requests from students.

Another issue is having appropriate balance within each cohort with regard to interests of the students, so that students are likely to be placed in their practica of choice.

6. Assessment of Teaching and Learning

The proposed evaluation rubrics for course, laboratory and practica are appropriate. It is suggested that for the laboratory components of courses that the students should be able to demonstrate competency in actually performing laboratory procedures. This is perhaps more important than being able to write a traditional lab report. Evaluation using "structured practical skills demonstrations" is vague. This should be worded to indicate that students should be able to demonstrate competency in performing laboratory skills (e.g., performing a graded exercise test with EKG, ventilation and pulmonary gas exchange; body composition assessment).

The 'credit/no credit' criterion for the practica is consistent with common practice. However, without rigorous guidelines and "training" of the field instructors, there is potential of considerable disparity across practica settings for what may be defined as an acceptable 'credit.'

7. Resources

The existing faculty has the necessary expertise to deliver the program, although this could be enhanced with additional hires (see below).

The reviewers expressed concern about ensuring competency of the field instructors for the practica. Specifically, the quality control of practica supervision and evaluation requires substantial clarification. The procedures by which all practica will be evaluated using common standards and the process(es) by which candidates will pass or fail each practica require detail and process evaluation procedures need to be identified.

It is recommended that guidelines/standards are established to ensure quality control for the 600 hours of off-site field experience that are required of each MPK student.

Use of the existing Interprofessional Education program is a strength and will likely help facilitate the practica. Working with the Quality Assurance Director of the College of Kinesiology will also be extremely helpful.

The proposal indicates that two new tenure stream faculty positions will be allocated to the MPK program, and one new administrative staff position will be allocated to support the program operations. At least one of the new faculty positions should have a focus on energy balance and body composition, especially with expertise in lifestyle interventions that include exercise/physical activity as a major component. This important area does not appear to be a significant focus of any of the MPK program's graduate courses.

Although two new faculty will be hired, there is no doubt that current faculty will need to teach more within the graduate program to ensure that the teaching requirements within the current research based program, as well as the proposed MPK, are met. This will be a challenge for all current faculty members as we assume they are already at full teaching loads. Young (untenured) and newly hired faculty will be faced with additional teaching (or teaching classes with greater numbers) while maintaining/creating their own research programs which for new faculty is always a challenge, especially in today's funding environment. Thus, additions to the teaching load of all faculty members will be a challenge. How this will be accomplished is unclear, although from our experience they (faculty we spoke too) were enthusiastic. This may not be the case for the new hires.

The full-time administrator hired to co-ordinate the MPK program is an essential hire given the placement /practica mandate. However, while we assume this person will have good administrative skills, it is also imperative that this person have the skills required to oversee a quality control/standards program that we envision as an essential component of the practica. While this person will interact with faculty to help generate and assure ongoing quality control, how this will be accomplished and how the standards for quality control will be established across the entire breath of the program remains unclear. Details for generating the standards for all practica, as well as the quality control procedures essential for their success, have yet to be properly addressed.

Although adequate resources appear to be available, expectations for an initial cohort size of 40 seems unrealistic, particularly with regard to facilitating 600 hours of practica per student. With each student required to complete three practica, a cohort of 40 students would require 120 practica over 16 months, with an overlap of 4 months with a second cohort of 40. This seems like an overly ambitious goal to start. It might be advisable to take a "baby steps" approach and start with smaller initial cohort of ~20 students and work up to 40 over a period of a few years. It may turn out that 40 is logistically too challenging. It is important to have a successful start. Even if the target of 40 is essential for budget purposes, having a successful launch of the program should be the highest priority.

In our discussions with the faculty leadership it was indicated that one of the two new tenure stream faculty positions allocated to the MPK will be funded by tuition revenue. If the target goal of 40 students per cohort is based on the calculated revenue generation necessary to fund one of the positions, we suggest that the Provost consider funding the second position in whole or in part for the first 2-3 years of the MPK program, so that the MPK program can develop at a more reasonable pace without the pressure of securing program funding. A higher institutional financial burden at the outset (that can be gradually phased out) may well be worth the investment if it increases chances of a successful launch of the MPK program by starting with a smaller, more manageable, cohort.

The library resources are more than adequate, with the University of Toronto ranking #1 overall among Canadian universities (2006-2011) and either #3 or #4 among major North American universities (2006-2011). Financial assistance for students is fair and appropriate given that this is a professional program.

8. Quality and Other Indicators

Expertise of the faculty is sufficiently balanced to meet the MPK program's objectives, with at least four faculty members in each of the major areas focusing on the broad determinants of health and function (sociocultural, biophysical, behavioral), and also have sufficient faculty numbers represented in the intervention domains that MPK students are likely to encounter (apparently healthy individuals wanting to increase physical performance, individuals with injuries, behavioral and mental health impairments, and with chronic disease). One weakness is that the proposal does not specifically identify that students will doubtless encounter those who seek interventions to manage lifestyle-based disease and associated risk factors. This represents a large segment of the population that MPK students will encounter. Since physical activity is essential for managing obesity and related comorbid conditions which are prevalent, competency in the area of energy balance should be viewed as a vital part of the MPK student's training.

19 Appendix J: Dean's Response the External Appraiser Report

NEW ACADEMIC PROGRAM PROPOSAL: MASTERS OF PROFESSIONAL KINESIOLOGY DEAN'S RESPONSE TO EXTERNAL APPRAISERS' REPORT

SUBMITTED BY: Ira Jacobs, Dean,
DATE: October 6, 2014

Background

The Faculty of Kinesiology and Physical Education (KPE) has developed a new graduate program proposal which will be its first professional masters degree --- Masters of Professional Kinesiology (MPK). As part of the normal assessment of such new academic program proposals, two external appraisers were asked to consider the proposal, and to visit the Faculty in order meet with faculty, staff and students, and become familiar with the relevant infrastructure and administrative supports in the Faculty. Their visit to U of T and KPE occurred on August 29, 2014. The appraisers both hold senior academic appointments at important academic institutions and are highly respected scholars and scientists of international stature in fields highly relevant to the MPK proposal.

Analysis of Appraisers' Report and Recommendations

It was gratifying to read that the appraisers viewed the proposal very favourably. They expressed strong support for the proposed programme objectives, admission requirements and length of program, curriculum structure and content, the modular approach to delivering the curriculum, and the evaluation rubrics for courses, labs, and practica. They considered the proposed program to be academically sound and timely in light of the new status of kinesiology as a regulated health profession in Ontario. Given the strength of U of T's Interprofessional Education (IPE) program for healthcare professions students, the inclusion of IPE within the proposed curriculum was considered to be a valuable and distinguishing feature of the proposal.

The appraisers' report contained recommendations which can be grouped as follows:

- A. Develop more detailed plans for how the quality control of the practica experience will be monitored and assessed; and,
- B. Given the size of the faculty complement, reconsider the plan to launch the program with an enrolment of 40 students in the first cohort rather than taking an approach where the cohort numbers increase annually until the intended steady state numbers are achieved after a few years have elapsed.

Response

We share the appraisers' reinforcement of the importance of developing high quality learning experiences in the practica. They suggest that the proposal will benefit from an expansion of the information about the practica, particularly about the selection and training of field instructors, formation of learning contracts and student evaluation. These issues were indeed only briefly described in the proposal document. Fortunately, there is substantial institutional experience at U of T and KPE will continue to consult with colleagues in divisions across the University with significant experience with such practica (e.g. Factor-Inwentash Faculty of Social Work, Department of Physical Therapy, Department of Occupational Science and Occupational Therapy, Centre for Teaching Support and Innovation) as the operationalization of the practica components evolve and are unfolded.

The report also identifies the need for many more sites for practica than what the Faculty currently uses for its undergraduate programme. KPE is well aware of the increased requirement for practicum placement opportunities that is associated with the proposal and confident that the extensive networks that the Faculty has developed and nurtured over the years augur well for meeting the placement requirements for our future MPK students. Building on the recommendation of the appraisers, KPE will establish a working group to identify more placement sites, to assist in the development of a training module for the placement mentors, and to develop the practica evaluation tools for students and mentors. This group will be established immediately and will consult broadly with other health and education-related divisions.

A second recommendation of the appraisers was to launch the MPK in its first year with a smaller cohort and gradually increase enrollment over subsequent years. We see no advantage to doing so. In contrast, our consultations within and outside of the Faculty, including with the regulatory College of Kinesiologists of Ontario, lead us to believe that there will be an immediate positive response from high quality applicants to meet the proposed enrolment target of 40 students immediately. KPE plans for hiring of staff and faculty are such that we are confident that the appropriate levels of teaching and staff administrative support will be available to support a cohort of up to 40 students in the first year, and 80 students in total in the first half of the second year which is the anticipated steady state for the program given its 18 month duration.

The appraisers also made a specific suggestion to include curricular content that addresses chronic disease conditions associated with physical inactivity and obesity. Such has always been our intent and the topics are highlighted in the Program Rationale section of the proposal.

Conclusion

We are delighted that the appraisers concurred with our perspective that the proposed Master of Professional Kinesiology is an appropriate graduate education program, that there will be substantial demand for the program and that the initiative demonstrates academic leadership by the University of Toronto.

Ira Jacobs, DrMedSc
Professor & Dean

20 Appendix I: Vice-Provost, Academic Programs Response to the External Appraiser Report

November 5, 2014

Ira Jacobs
Dean, Faculty of Kinesiology and Physical Education
University of Toronto

Re: Appraisal Report, Proposed new Master of Professional Kinesiology

Dear Ira,

I am very pleased by the very positive appraisal of the proposed Master of Professional Kinesiology. Your administrative response nicely addresses the very specific recommendations of the appraisal. The appraisal report raised issues related to how quality of the practicum experience would be established, monitored and assessed. I am delighted that in response you have struck a working group to identify more placement sites, develop training for placement mentors and develop practicum evaluation tools for students and mentors. The appraisers also suggested more gradual enrolment growth toward a steady state of 80 than outlined in the proposal. I note that that you are confident there is sufficient need and demand, as well as capacity and resources in your Faculty, to accommodate an enrolment target of 40 students in year one of the program and 80 students in year two of the program.

The appraiser's positive report underlines that this proposed professional program is extremely timely within the Ontario context and the profession. Its graduates will be well placed to establish careers in this growing area. I will be very pleased to recommend this new professional master's to governance for approval this fall.

Sincerely,



Sioban Nelson
Vice-Provost, Academic Programs

cc.

Carol Orane, Executive Assistant to the Dean, Faculty of Kinesiology and Physical Education
Gretchen Kerr, Vice-Dean, Graduate Affairs, Faculty of Kinesiology and Physical Education
Scott Thomas, Associate Dean, Research, Faculty of Kinesiology and Physical Education
Locke Rowe, Dean, Graduate Studies and Vice-Provost, Graduate Research and Education
Elizabeth Smyth, Vice-Dean, Programs School of Graduate Studies
Jane Harrison, Director, Director, Academic Programs, Planning and Quality Assurance Vice-Provost, Academic Programs

Jennifer Francisco, Coordinator, Academic Change, Office of the Vice-Provost, Academic Programs