

Multi-Year Plan for Professional Degree Supplemental Tuition (PDST) Levels 2016-17 through 2018-19: Long Form

- **This form should be completed for** (1) programs seeking to charge Professional Degree Supplemental Tuition for the first time, (2) continuing PDST programs whose multi-year plan has expired, and (3) continuing programs with multi-year plans that have not yet expired if the program is proposing an increase in 2016-17 PDST that is greater than that proposed in its three-year plan.
- **For programs whose 2016-17 levels will require approval by The Regents**, Part A is due **September 18, 2015**, and Part B is due **October 16, 2015**.
- **For programs whose 2016-17 levels may be approved by the President**, Part A and Part B are due **November 6, 2015**.
- **Before completing this form**, refer to the document entitled "Deadlines, Instructions, and Planning Assumptions for Professional Degree Supplemental Tuition Proposals Effective 2016-17" for important information about which form to use, the applicable deadline for each proposal, and the planning assumptions that should be reflected in the proposal.

PART A

I. PROJECTED PROFESSIONAL DEGREE SUPPLEMENTAL TUITION

Specify your projected Professional Degree Supplemental Tuition for each of the next three years.

Please refer to the planning assumptions for further details about fee increase rates.

	Actual	New Proposed Fee Levels				Increases/Decreases		
	2015-16	2016-17	2017-18	2018-19	2016-17	2017-18	2018-19	
Prof. Degr. Suppl. Tuition (CA resident)	\$10,029	\$10,530	\$11,055	\$11,607	5%	5%	5%	
Prof. Degr. Suppl. Tuition (Nonresident)	\$10,029	\$10,530	\$11,055	\$11,607	5%	5%	5%	
Mandatory Systemwide Fees (CA resident)*	\$12,240	\$12,294	\$12,684	\$13,086	0.4%	3.2%	3.2%	
Health Insurance**	\$3,954	\$4,349	\$4,784	\$5,263	10%	10%	10%	
Campus-based Fees	\$924	\$930	\$936	\$943	1%	1%	1%	
Nonresident Suppl. Tuition	\$12,245	\$12,245	\$12,490	\$12,245	0%	2%	-2%	
Other (explain below)***					#DIV/0!	#DIV/0!	#DIV/0!	
Total Fees (CA resident)	\$27,147	\$28,104	\$29,459	\$30,899	4%	5%	5%	
Total Fees (Nonresident)	\$39,392	\$40,349	\$41,949	\$43,144	2%	4%	3%	

* Mandatory systemwide charges include Tuition and Student Services Fee.

**Include disability insurance fee for medicine and dentistry.

*** Include Course Materials and Services Fees but not health kits.

Additional comments:

Since 2009- 2010, the deans of all four UC schools of nursing have conferred periodically with the Office of the President and have consistently agreed upon common fees for all nursing schools. This year, they continued to discuss the wisdom of maintaining similarity across campuses, and agreed that a minimum of 15% increase in 16-17 is needed in order to continue to close the gap on unfunded costs of delivering the Master of Science, Nursing Science and Health Care Leadership degree. This is in recognition of our need to maintain nursing enrollments and graduations to serve the workforce demands of the State of California.

However, given the climate surrounding fee increases at the University of California, the PDST proposal for the Betty Irene Moore School of Nursing has been modified to request a 5% increase. In light of ever-increasing costs and planned enrollment growth, a 5% increase will place additional financial constraints on the School, which does not receive state funding. This structural budget deficit will require The School of Nursing to further subsidize the MS, Nursing Science and Health Care Leadership degree from Gordon and Betty Moore Foundation funds in 16-17. This approach is not sustainable since these are grant funds, not ongoing funds.

The decision to increase fees in order to sustain our academic programs is not made lightly, and is made with the understanding that if other sources of funding for professional education become available, the PDST fees can be decreased. As discussed below, consideration was given to debt load and recruitment of diverse students.

II. PROGRAM GOALS AND EXPENDITURE PLANS

Please explain why Professional Degree Supplemental Tuition increases are necessary. What goals are you trying to meet and what problems are you trying to solve with these increases? What are the consequences if proposed Professional Degree Supplemental Tuition levels are not approved? What will be the educational benefits for students given the new Professional Degree Supplemental Tuition revenue?

The most difficult cost element faced by Schools of Nursing is the recruitment and retention of highly qualified faculty. The inability to recruit and retain qualified faculty into top, research-based nursing schools like ours in the UC system could stifle our ability to meet the nursing workforce demands of California. Using the professional fee model, in combination with fundraising and other revenue streams, allows the school to create a faculty compensation model that supports market-based salaries. The Betty Irene Moore School of Nursing is still relatively new, and plans for sizable growth in order to attain financial sustainability. For instance, the number of faculty and students will approximately double by the time steady-state is attained. Inadequate PDST increases constrain the School's ability to realize this sustainability plan, and will require that the School revisit the structure of its PDST programs in future years. Rising benefits costs will also be mitigated with the PDST, which ensures that competitive, outstanding faculty who can ensure the on-going excellence of the program are retained and supported. The students also directly benefit from the PDST through the inclusion of instructional support staff to facilitate student engagement with curricular delivery structures that address the needs and learning preferences of our diverse and busy student population.

UC Davis/Betty Irene Moore School of Nursing/
 Master of Science, Nursing Science and Health-Care Leadership
 Established program
 Established PDST

The fees for nursing students are among the lowest in the UC system. This is juxtaposed against fixed cost increases for salaries, retirement, and health benefits, etc., which are not covered by allocated campus funds. Our goal is to enhance the revenue streams available to recruit and retain top faculty so that we can maintain the outstanding education we currently provide our MS students. In so doing we will be able to contribute more highly qualified nursing professionals trained at all levels to help solve the nursing shortage in California.

Please indicate how you intend to use the revenue generated by the Professional Degree Supplemental Tuition increase.

Proposed Use of Incremental PDST Revenue	Incremental 2016-17 PDST revenue	Incremental 2017-18 PDST revenue	Incremental 2018-19 PDST revenue	Total
Faculty Salary Adjustments	\$75,196	\$164,603	\$107,877	\$347,676
UCRP Contributions	\$15,403	\$33,716	\$22,099	\$71,218
Benefits Cost Increases	\$18,557	\$40,619	\$26,621	\$85,797
Providing Student Services	\$0	\$0	\$0	\$0
Improving the Student-Faculty Ratio	\$0	\$0	\$0	\$0
Expanding Instructional Support Staff	\$12,129	\$26,549	\$17,399	\$56,077
Instructional Equipment Purchases	\$0	\$0	\$0	\$0
Providing Student Financial Aid	\$59,738	\$130,762	\$85,699	\$276,199
Other Non-salary Cost Increases	\$0	\$0	\$0	\$0
Facilities Expansion/Renewal	\$0	\$0	\$0	\$0
Other	\$0	\$0	\$0	\$0
Total projected change in revenue	\$181,023	\$396,249	\$259,695	\$836,967

Additional Comments:

The incremental increases appear inconsistent year-over-year because of fluctuations in enrollment. The Betty Irene Moore School of Nursing plans to increase enrollment from 67 in 15-16 to 81 in 16-17. Enrollment will increase to 113 in 17-18, with an increase to 130 in 18-19.

The PDST will be applied to three essential expense areas: faculty salary and benefits, instructional support and financial aid. Students will directly benefit from high quality, diversely-talented faculty who will be compensated equitably. Instructional support staff meet the needs of working professionals who typify the student population at UC Davis; they ensure resources are on-line and that educational technology supports the broad spectrum of learning preferences of our students. A significant portion of the PDST is redistributed to students in the form of financial aid to ensure that the degree program is accessible to all qualified students. Currently many Betty Irene Moore School of Nursing PDST students receive generous financial aid packages due to supplemental aid from the Gordon and Betty Moore Foundation grant. However, as the School of Nursing continues its transition to self-supporting steady-state, the availability of this external aid diminishes each year, increasing reliance on the PDST to provide aid to students.

Please indicate how you plan to use or are using total actual Professional Degree Fee revenue in 2015-16.

	Total 2015-16 PDST revenue
Faculty Salary Adjustments	\$279,125
UCRP Contributions	\$50,186
Benefits Cost Increases	\$75,871
Providing Student Services	\$0
Improving Student-Faculty Ratio	\$0
Instructional Support Staff	\$45,020
Instructional Equipment Purchases	\$0
Providing Student Financial Aid	\$221,741
Other Non-salary Cost Increases	\$0
Facilities Expansion/Renewal	\$0
Other	\$0
Total projected use of revenue	\$671,943

Please describe cost-cutting and/or fundraising efforts related to this program undertaken to avoid Professional Degree Supplemental Tuition increases even greater than proposed. Please be as specific as possible.

The UC Davis Health System has adopted an innovative approach for health sciences education – the Schools of Health. This model facilitates close collaboration between the health professional education programs and the implementation of shared resources to provide infrastructure. The School of Nursing shares financial account management and post-grant account management with the School of Medicine Dean’s Finance Office; student financial aid is handled by the School of Medicine Financial Aid Office; and support for our program evaluation is supported by the Schools of Health Evaluation Program. Ongoing collaboration and sharing of services is a long-term strategy for the Betty Irene Moore School of Nursing to ensure steady growth and stability.

Fundraising is a core element of the school with resources dedicated from the Gordon and Betty Moore Foundation (GBMF) grant to support the fundraising program. Because of the unique challenges we face – to create a robust development program for a school that is evolving – the GBMF grant funds were used to retain two consulting firms to complete a series of research documents necessary to support planning efforts. This research facilitated the creation of a Fundraising Strategic Plan that guides the multiple initiatives led by a team of development professionals dedicated to the school. The school has simultaneous initiatives to solicit major gifts, implement annual giving and planned giving, and create a pool of prospects. Student support is one of the three fundraising initiatives in recognition of the growing financial burden faced by prospective students. In just 6 years since the launch of the fundraising efforts, we have secured thirty-four scholarship funds (in addition to support provided by the Gordon and Betty Moore Foundation), with 9 additional pledges that will mature into future scholarship awards. The school

embraces a culture of philanthropy that respects the role of external funding and engages everyone in support of these important efforts that are necessary to sustain excellence. Fundraising efforts of the SON are also nested in the UC Davis Comprehensive Campaign, so momentum is building throughout our campus to support philanthropy.

If your program proposes uneven increases (e.g., increases that are notably larger in some years than in others), please explain why.

Proposed increases are even, at 5% per year in all 3 years. This is a decrease from the 20% requested for 15-16, reflecting the School of Nursing’s sensitivity to the debt load of UC students.

Please indicate the degrees for which Professional Degree Supplemental Tuition will be assessed and expected enrollment by degree.

	Enrollment			
Degree	2015-16	2016-17	2017-18	2018-19
Master in Nursing Science and Health Care Leadership	67	81	113	130
Total	67	81	113	130

III. MARKET COMPARISONS: TOTAL CHARGES

Please provide the total student tuition and fee charges of comparison institutions. Select a minimum of 3 and *up to* 12 institutions, including, *where possible*, a minimum of 3 public institutions. If a program does not have a large number of comparators, or does not have any public comparators, please provide what institutions the program does consider comparators even if that is a small number only or includes only private institutions.

A comparison of total cost of degree may be more meaningful, for example, for programs whose comparator programs vary in length. If this applies to your program, you may provide total cost of degree figures in addition to annual first-year comparison institutions’ amounts shown below. Please attach the cost of degree template provided by Budget Analysis and Planning; if you have any questions about how to calculate the total cost of degree, please contact richard.michaelson@ucop.edu.

DO NOT CONTACT OTHER INSTITUTIONS DIRECTLY FOR THIS INFORMATION. USE ONLY PUBLICLY AVAILABLE INFORMATION. Refer to the best practices document for additional information.

	2015-16	2016-17	% Increase
Residents			

UC Davis/Betty Irene Moore School of Nursing/
 Master of Science, Nursing Science and Health-Care Leadership
 Established program
 Established PDST

University of Pennsylvania (private)	\$42,016	\$44,117	5%
Johns Hopkins (private)	\$39,688	\$41,672	5%
Columbia (private)	\$37,978	\$39,117	3%
Oregon State Health University (public)	\$27,526	\$28,077	2%
University of Washington (public)	\$25,461	\$25,461	0%
University of Michigan (public)	\$21,282	\$21,708	2%
Public Average	\$24,756	\$25,082	1%
Public and Private Average	\$32,325	\$33,359	3%
Your program	\$23,193	\$23,755	2%
Nonresidents			
University of Washington (public)	\$45,804	\$45,804	0%
University of Michigan (public)	\$43,014	\$43,874	2%
University of Pennsylvania (private)	\$42,016	\$44,117	5%
Johns Hopkins (private)	\$39,688	\$41,672	5%
Columbia (private)	\$37,978	\$39,117	3%
Oregon State Health University (public)	\$32,588	\$33,239	2%
Public Average	\$40,469	\$40,973	1%
Public and Private Average	\$40,181	\$41,304	3%
Your Program	\$35,438	\$36,000	2%

Source(s): University websites

Why were these institutions chosen as comparators? Include specific reasons why they are considered peers – for example, competition for the same students and faculty, admitted student pools of similar quality, similar student-faculty ratios, the program’s ranking is what this program would like to achieve, etc. What other characteristics do they have in common? If you have included aspirational programs, explain why your program aspires to be comparable to these programs and how it expects to do so within 5 years. Be specific. (If a program is unlikely to achieve comparability to an aspirational program within 5 years, the aspirational program should not be included.)

The four UC nursing school deans agreed upon these comparator institutions in 2010, and continue to agree that they represent the public and private institutions recruiting from the national baccalaureate pool. These schools are all research-intensive and offer similar graduate degrees (masters and PhD). UC Davis and the other UC Schools of Nursing compete for students and faculty with these institutions; they are highly-ranked, and their graduates are well-regarded.

How were the projected tuition and fee increases for your comparison institutions determined?

Data was collected from nursing schools’ websites.

Please comment on how your program's costs compare with those of the comparison institutions (public and/or private) with which you compete for students.

Our costs are slightly higher than the public average, but lower than the private school costs. Given our proximity to the public average, and the high quality of our program, UC Davis's rates are very competitive.

It should be noted that for some comparator institutions, fee increase data was not available for 16-17, and in those instances an increase of 0% was used. In addition, the University of Michigan has a different budget model which includes faculty working in the Medical Center, so their relatively low fees may be the result an offset by this separate revenue source.

IV. ENROLLMENT TRENDS AND DIVERSITY STRATEGY

Note: UCOP will provide campuses with data from the Corporate Student System that should be used to complete the table below for your program. Please note that, as used here, established programs consist of programs that have enrolled students prior to 2016-17; new programs are those that seek to enroll students for the first time in 2016-17. For established programs, provide data for academic years 2012-13 to 2014-15 and estimates for 2015-16 and 2016-17. New programs should provide estimates for 2016-17. All programs should provide figures for comparison public and private institutions in the columns shown.

UC Davis/Betty Irene Moore School of Nursing/
Master of Science, Nursing Science and Health-Care Leadership
Established program
Established PDST

	2012-13	2013-14	2014-15	2015-16	2016-17	Publics	Privates
Ethnicity							
Underrepresented							
African American	6%	9%	12%	9%	9%	15%	
Chicano/Latino	12%	12%	11%	10%	10%	7%	
American Indian	8%	4%	0%	3%	3%	1%	
<i>Subtotal</i>	<i>27%</i>	<i>25%</i>	<i>23%</i>	<i>22%</i>	<i>22%</i>	<i>22%</i>	
Asian/East Indian	8%	7%	17%	24%	24%	8%	
White	55%	58%	48%	44%	44%	68%	
Other/ Unknown	8%	9%	11%	10%	10%	2%	
International	2%	2%	2%				
Total	100%	100%	100%	100%	100%	100%	
Socioeconomic							
% Pell recipients	32%	26%	32%	35%	33%	n/a	

Sources:

UC ethnicity, socioeconomic status: UC Corporate data

Comparison institutions: *Individual comparator schools did not provide diversity data or % Pell recipient data. Comparison ethnicity data was obtained from the American Association of Colleges of Nursing, which compiles ethnicity data on all U.S. Schools of Nursing. Data for public and private institutions is not separated, so all data is included in the public column.

For established programs, how does your program compare with other programs in terms of racial and ethnic diversity, with particular attention to U.S. domestic underrepresented minorities? For new programs, how do you anticipate your program will compare with other programs in terms of racial and ethnic diversity, with particular attention to U.S. domestic underrepresented minorities?

Consistent with the mission of the UC system, our students are primarily drawn from our regional population. The overall ethnic diversity in our program closely resembles the population of our region, suggesting that we are successfully drawing from the community in proportion with the current demographics. The overall diversity across all racial and ethnic groups is strong, particularly notable when comparing the overall percentage of white students with other institutions. AACN data for 2014 indicates that MS programs in nursing enroll an average of 22% underrepresented minorities. UC Davis' 2015-16 School of Nursing master's degree program is on-trend with this national average, at 22% underrepresented minorities. We have maintained or exceeded this average across all 6 years of the school's existence. UC Davis continues to strive for student enrollment that matches or exceeds the overall ethnic and racial diversity of the national landscape.

For established programs, please comment on the trend in enrollment of underrepresented groups in your program over the past five years.

As a new school, and given our small enrollment, it is difficult to identify solid trends. However, our enrollment of underrepresented minorities in the master's degree programs has maintained an average above the national average, as reported by AACN.

What is your strategy for increasing the enrollment of U.S. domestic students from underrepresented groups (African American, Chicano/Latino, American Indian), U.S. domestic students from all minority groups, and, if any, for international students in your program? What indicators of success do you monitor?

We are proactive in ensuring we matriculate a diverse student population and that we collect data to benchmark against in the future. Cultural inclusiveness is a core attribute of the school and embraced as a component of every initiative we undertake. We not only value diversity but take action at all levels to be anti-biased.

The University of California, Davis has an Office of Diversity within the Schools of Health which focuses on increasing the diversity of post baccalaureate students, medical students, nursing students, residents, fellows and faculty. All of these missions are closely interrelated and we work with them to ensure success.

The Betty Irene Moore School of Nursing has specific initiatives to recruit talented students and faculty from underrepresented groups. Several specific initiatives are:

- 1) An extensive outreach campaign through conference participation. The Betty Irene Moore School of Nursing exhibits at numerous targeted conferences including the National Association of Hispanic Nurses, National Black Nurses Association and National Coalition of Ethnic Minority Nurses in addition to more general conferences including the California Nursing Students' Association, National League for Nursing, Rural Nurse Organization, Western Institute of Nursing and the California Nursing Students' Association.
- 2) The school ensures that collateral material, the presence on the web, and all recruitment materials are inclusive and address the interests and needs of students from underrepresented groups.
- 3) Our admissions process addresses biases common in graduate programs that reduce the diversity of the incoming class. We do not require the GRE because of the evidence that it can be discriminatory and does not predict academic success sufficiently for diverse applicants. Instead, admission is based on portfolio review of both academic and professional experience, and consideration of personal and professional goals as they fit with the program.
- 4) The faculty are actively engaged in discussions regarding implementation and refinement of a curriculum that is culturally inclusive and actively non-biased. A member of the faculty, Dr. Kupiri Ackerman-Barger, who has extensive experience and education in creating a culture that embraces and responds to these issues, has been identified to provide leadership to these discussions and actions.

Coursework for the master's degree includes a year-long community-based project in a variety of project settings. Many of the community partner organizations have a mission to support traditionally underserved populations. The course projects naturally present an opportunity for engagement regarding graduate degree opportunities and outreach.

For established programs, please comment on the trend in enrollment of students from low socioeconomic backgrounds (i.e., students who received Pell Grants as undergraduates).

As a new school, and given our small enrollment, it is difficult to identify solid trends. However, the percentage of Betty Irene Moore School of Nursing students who received Pell Grants as undergraduates is comparable to the overall average for professional degree students across all UCs, and was higher than the UC Davis average for 2 of the previous 3 years.

Many of our students have shared in their application materials that they had past hardships and economic challenges. These hardships include: being relatively recent immigrants, learning English as a second (or third) language, parents with limited education, and being from families with significant financial challenges. 35% of the Masters of Science-Nursing Science and Health Care Leadership students attending the School of Nursing in Fall 2015 received Pell grants as undergraduates.

V. FINANCIAL AID STRATEGY AND PROGRAM AFFORDABILITY

What are your financial aid / affordability goals for your program? How do you measure your success in meeting them?

Our primary goal for financial aid is to ensure that financial issues do not prevent talented students from matriculating and graduating from the Betty Irene Moore School of Nursing. Financial Aid staff provide prospective and enrolled students with information and resources to facilitate access to their educational needs. The school awards aid to students based on the school's mission and as well as student financial need, ensuring federal, state and university compliance. These awards include a combination of need-based and merit-based grants and scholarships and include support made possible by fundraising and the original grant from the Gordon and Betty Moore Foundation.

How will your financial aid strategies (e.g., eligibility criteria, packaging policy) help achieve these goals?

The Betty Irene Moore School of Nursing carefully evaluates the needs of prospective students and has developed criteria for student support that ensures that financial barriers do not prohibit students from professional education. The criteria for these awards are based on the mission and core values of the school. In addition, the Gordon and Betty Moore Foundation grant includes substantial funding to support graduate education. The school has staff to ensure that financial aid information is well-publicized to prospective and admitted students and staff will support the pursuit of these funds.

Please describe any programs available to students in your program, while enrolled or following graduation, to promote public service or provide services to underserved populations, such as targeted scholarships, fellowships, summer or academic-year internships, and Loan Repayment Assistance Plans.

UC Davis/Betty Irene Moore School of Nursing/
 Master of Science, Nursing Science and Health-Care Leadership
 Established program
 Established PDST

The Betty Irene Moore School of Nursing has developed a variety of service-focused student opportunities that include coursework and research projects. One example is a year-long course called Community Connections that places masters degree students with community mentors. During this community-based class, the students examine a health system issue, including data collection and assessment. We actively promote public interest employment, serving underrepresented communities and practicing in rural or remote communities. Because our school's research priorities are aging, rural and diverse communities, a high number of students are from underrepresented and rural backgrounds.

Students in graduate nursing education programs are eligible for targeted financial aid programs in addition to those available to all UC Davis students, and we encourage students to compete for campus, state, federal and foundation awards and fellowships. The U.S. Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA) administers programs providing traineeships, scholarships, and loan repayment programs for graduate students in nursing.

Please describe your marketing and outreach plan to prospective students to explain your financial aid programs.

Staff and faculty from the Betty Irene Moore School of Nursing work very closely with staff in Financial Aid to describe financial aid opportunities to prospective, admitted and enrolled students. Marketing is via the web site, collateral material, the listserve, the Health System Financial Aid office, sessions during interview days, and one-on-one conversations with admitted and enrolled students.

Note: UCOP will provide you with figures from the Corporate Student System that should be used to complete the table below.

Graduating Class	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14
Cumulative Debt	\$	\$	\$	\$	\$ 17,187	\$ 31,246	\$ 16,106
Percent with Debt	%	%	%	%	13%	14%	26%

For established programs, please comment on the trend in the indebtedness of students in your program. What impact do you expect your proposed Professional Degree Supplemental Tuition levels and financial aid plan to have on this trend?

As a new School, we do not have data for years prior to 2011-12. Given our small enrollment, it is difficult to identify solid trends in the data for our existing years. We had 23, 21 and 19 graduates in 2011/12, 2012/13 and 2013/14, respectively. Each year, the classes had 3 borrowers, but the average cumulative debt varied from \$17,000 to \$31,000 to \$16,000. With this small sample size it is impossible to draw trending conclusions, as a single student's circumstance can have enormous impact on the average. As our program grows in size, we expect more stable patterns to emerge as outliers will have a lesser impact on the data.

It should be noted that the number of Betty Irene Moore School of Nursing students who graduate with debt is very low compared to other PDST programs, thanks to the generous support of the Gordon and Betty Irene Moore Foundation.

Note: UCOP will provide you with figures from the Corporate Student System that should be used to complete a portion of the table below. However, each program is responsible for providing its own estimate of the median (or average, or typical) starting salary for its graduates. If possible, provide comparable figures for your comparison public and private institutions in the rows shown. UCOP will also provide you with a formula for you to use to calculate the last column.

	2013-14 Average Debt at Graduation among Students with Debt	Graduates with Debt	Median Salary at Graduation	Est. Debt Payment as % of Median Salary
This program	\$ 16,106	26%	\$91,310	3%
Public comparisons	\$	%	\$	#VALUE!
Private comparisons	\$ 64,000	75%	\$97,500	9%

Sources: ¹. Median salary at graduation obtained from the American Association of Colleges of Nursing (AACN)
 UC: Corporate data
 Comparison institutions: Columbia University

Please describe your program’s perspective on the manageability of student loan debt for your graduates in light of their typical salaries, the availability of Loan Repayment Assistance Programs, loan repayment plans, and/or any other relevant factors.

For those who need them, we anticipate average loan indebtedness for the two-year program to be approximately \$25,000. However, since this program requires a RN license, the majority of the students remain employed partially or full-time, reducing reliance on loans while in school. The academic and clinical strengths of our program ensure that our students are sought-after in the job market and command competitive salaries when they start working. On average, nursing professionals with graduate degrees command salaries that will enable them to manage loan repayment programs for the portion of student support that is not awarded as scholarships. Students graduating from this program are prepared for leadership positions such as those identified by the Employment Development Department (EDD) as “[Medical and Health Services Managers in California](#).” People in these careers earn a reported median salary of \$118,036. A debt of approximately \$25,000 (in today’s dollars) would be expected to be manageable, given the earning potential of graduates from master’s degree programs in Nursing Science and Health-Care Leadership.

Recent studies have also shown that nursing graduates are among the highest earners upon graduation and they have one of the lowest percentages of median earnings used for debt repayment in the first year post-graduation¹.

Sources: ¹http://www.hamiltonproject.org/papers/major_decisions_graduates_earnings_growth_debt_repayment/
²<http://www.nytimes.com/2014/11/21/upshot/student-debt-a-calculator-focused-on-college-majors.html? r=0>

A 5% increase applied to the PDST component of the program’s tuition and fees represents a \$501 increase per academic year. Of this, 33% will be returned to aid. We recognize that this is a significant impact to students, but given the market for nurse leaders—as discussed in the following sections—we believe it will not negatively impact the number of applicants or our ability to meet enrollment projections.

Do graduates of your program who pursue public interest careers (as defined by your discipline) typically earn substantially less upon graduation than other students? If so, what steps does your program take to ensure that these careers are viable in light of students' debt at graduation?

The Betty Irene Moore School of Nursing graduates are prepared for leadership positions in public service (as well as academia and health care delivery). The long-term vision for the school is to continue to provide student support that makes it possible for students to focus on their scholarly work and graduate with minimal debt. In addition to external grants and scholarships, the school, through support from the Gordon and Betty Moore Foundation, provides funding to partially or fully support tuition and fees for master's degree students. By helping to remove some of the financial burden, we hope to allow our graduates the opportunity to make career choices without financial reimbursement to cover loan obligations being a primary motivation for job choice. Thus, students are in a position to pursue careers in many different settings, including not-for-profit or government opportunities that might pay less than healthcare delivery/practice organizations. PayScale.com reports a broad range of salaries for not-for-profit executive directors (positions for which these graduates will be prepared). Such positions generally command salaries from \$36,000-\$108,000 nationally. Teaching positions are another viable option to students graduating from this program, with Nurse Educator salaries ranging from \$50,000-\$91,000 according to payscale.com. Given the debt load of most students is modest or non-existent, a public service career path is a viable option.

VI. OTHER

Please describe any other factors that may be relevant to your three-year plan (such as additional measures relating to your program's affordability, etc.).

Please see above, regarding the Gordon and Betty Moore Foundation support for tuition and fees.

In addition, the UC Schools of Nursing are working collectively with the University of California Office of the President to advocate for improvement in salary competitiveness for nursing professionals, in an effort to retain our top graduates to work as professionals within the UC system.

VII. SUPPLEMENTAL QUESTIONS FOR PROGRAMS PROPOSING TO CHARGE PROFESSIONAL DEGREE SUPPLEMENTAL TUITION FOR THE FIRST TIME IN 2016-17

Please describe the program for which you propose charging Professional Degree Supplemental Tuition, including: What unit/department houses the program? Is the program new or already offered? If new, has the program already been approved by the campus and CCGA? Note that a proposed new program that a campus has submitted to CCGA and UCOP before the end of September 2015 may apply for PDST approval before receiving formal program approval; PDST approval by the Regents would be contingent on final program approval by the Academic Senate and the President, however, and no student charges may be imposed in advance of final program approval. For questions about the status of systemwide academic program approval, please contact Chris Procello (Chris.Procello@ucop.edu).

Text

PDST shall not be charged by programs awarding a Doctor of Philosophy degree, a Master's degree on a path to a Doctor of Philosophy degree, or a Baccalaureate degree. Generally, the determination of whether a program is a professional degree program eligible for PDST should be based on a program-by-program review. However, the Office of the President may use some combination of the following characteristics when determining the appropriateness of charging a PDST for the first time: (a) Program may require accreditation or may need to meet licensure requirements that will justify additional instructional needs for which PDST is required; (b) Job prospects for graduates of professional degree programs are very specific and targeted, often requiring licensure or certification to practice in the job market; and (c) Program content is characterized by acquisition of an identifiable cluster of skills that is not predominantly theory- or research-focused. Please describe the rationale for charging Professional Degree Supplemental Tuition for this program, including: Why is it appropriate for this program to charge Professional Degree Supplemental Tuition? In what ways is the program "professional" rather than "academic" or "self-supporting"? Do students have elevated earning potential after earning a degree in this discipline?