

Butler University Accreditation History

First accredited: March 1996

Next review: July 2027

Maximum class size: 75

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September 2020

The commission **acknowledged the report** providing evidence of

- Update regarding changes in response to COVID-19. No further information requested.

June 2020

The commission **acknowledged the report** providing evidence of

- The proposed plan in response to COVID-19. No further information requested.

March 2019

The commission **accepted the report** addressing 4th edition

- **Standards C2.01b-e**, modified Self-Study Report (provided evidence of a self-study report that documents b) results of critical analysis from the ongoing self-assessment, d) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement). No further information requested.

June 2018

The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

September 2017

The commission **accepted the reports** addressing 4th edition

- **Standard A3.15a** (provided evidence the program makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),
- **Standard B1.08** (provided evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams),
- **Standard B3.02** (provided evidence of clearly defined program expectations for supervised clinical practice experiences [SCPEs] that enable students to meet program expectations and acquire competencies needed for entry into clinical practice) and
- **Standards B3.03a-d** (provided evidence of clearly defined program expectations for SCPEs with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions). No further information requested.

January 2017

Accreditation-Continued; Next Comprehensive Evaluation: March 2027. Maximum class size: 75. Report due March 21, 2017 (*Standards*, 4th edition) -

- **Standard A3.15a** (lacked evidence the program makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups) and
- **Standard B1.08** (lacked evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams).

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Due May 15, 2017 (*Standards*, 4th edition) -

- **Standard B3.02** (lacked evidence of clearly defined program expectations for supervised clinical practice experiences [SCPEs] that enable students to meet program expectations and acquire competencies needed for entry into clinical practice) and
- **Standards B3.03a-d** (lacked evidence of clearly defined program expectations for SCPEs with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions).

Due December 15, 2018 (*Standards*, 4th edition) -

- **Standards C2.01b-e**, modified Self-Study Report (lacked evidence of a self-study report that documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).

September 2013

Program Change: Change in program length (decrease from 30 to 24 months), Change student capacity (from 50 to 75 per class), and Change graduation requirements (decrease from 125 to 108 credits), effective June 1, 2015. The commission **acknowledged the proposed changes**. No further information requested.

March 2013

Program Change: Increase program length, increase student capacity, and change graduation requirements. The program did not submit request properly; was not reviewed.

September 2010

The commission **accepted the report** addressing 2nd edition

- **Standard B3.04d** (provided evidence of instruction in rehabilitative care),
- **Standard B7.03a** (provided evidence that every student has supervised clinical practice experiences with patients seeking medical care across the life span), and
- **Standard B7.04e** (provided evidence supervised clinical practice experiences occur in long-term care settings).
- Provided evidence of website updated with the curriculum for the program. No further information requested.

March 2010

Accreditation-Continued; Next Comprehensive Evaluation: March 2016. Maximum Student Capacity: 150.

Report due July 1, 2010 (*Standards*, 3rd edition) -

- **Standard B3.04d** (lacked evidence of instruction in rehabilitative care),
- **Standard B7.03a** (lacked evidence that every student has supervised clinical practice experiences with patients seeking medical care across the life span), and
- **Standard B7.04e** (lacked evidence supervised clinical practice experiences occur in long-term care settings).

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- Update website with curriculum for the program.

September 2005

Program Change: Change in length of program (increased from 118 to 126 credits), effective August 2006. The commission **acknowledged the proposed change**. No further information requested.

March 2005

Accreditation-Continued; Next Comprehensive Evaluation: March 2010. Maximum Student Capacity: 75. The commission noted zero areas of noncompliance with the *Standards*.

September 2004

The commission **acknowledged the report** providing evidence of

- The total aggregate number of students in the professional component. No further information requested.

March 2004

The commission **accepted the report** providing evidence of

- The process of evaluating clinical sites. No further information requested.

Program Change: Change in degree awarded (baccalaureate to a masters degree), effective August 31, 2005. The commission **acknowledged the proposed change** and requested additional information (total aggregate number of students in the professional component) July 15, 2004.

Program Change: Change in class size (maximum student capacity 60 to 71), effective August 25, 2004. The commission **acknowledged the proposed change**.

September 2003

The commission **accepted the report** addressing 2nd edition

- **Standard A2.6** (provided evidence the core program faculty appointments and privileges are comparable to other faculty within the institution),
- **Standard A5.1** (provided evidence program announcements accurately reflect the program currently offered),
- **Standard B1.5** (provided evidence the program ensures orientation of instructional faculty and preceptors to specific educational competencies expected of PA students),
- **Standards C2.2b, f-g** (provided evidence the self-study included critical analysis of outcome data from b) faculty attrition, f) employer surveys and g) performance on the national certifying examination),
- **Standard C3.1** provided evidence results of ongoing program evaluation are adequately reflected in the curriculum),
- **Standards C4.1a-b, f** (provided evidence the self-study report documents a) the process and results of continuous evaluation, b) outcome data analysis and f) response to the last accreditation citations) and

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- **Standard C6.1** (provided evidence the program defines and maintains a process to routinely evaluate clinical practice sites).

Additional information (process of evaluating clinical sites) due February 15, 2004.

March 2003

Accreditation-Continued; Next Comprehensive Evaluation: March 2005. Maximum Student Capacity: 60.

Report due July 15, 2003 (*Standards*, 2nd edition) -

- **Standard A2.6** (lacked evidence the core program faculty appointments and privileges are comparable to other faculty within the institution),
- **Standard A5.1** (lacked evidence program announcements accurately reflect the program currently offered),
- **Standard B1.5** (lacked evidence the program ensures orientation of instructional faculty and preceptors to specific educational competencies expected of PA students),
- **Standards C2.2b, f-g** (lacked evidence the self-study included critical analysis of outcome data from b) faculty attrition, f) employer surveys and g) performance on the national certifying examination),
- **Standard C3.1** (lacked evidence results of ongoing program evaluation are adequately reflected in the curriculum),
- **Standards C4.1a-b, f** (lacked evidence the self-study report documents a) the process and results of continuous evaluation, b) outcome data analysis and f) response to the last accreditation citations) and
- **Standard C6.1** (lacked evidence the program defines and maintains a process to routinely evaluate clinical practice sites).

March 2000

New program director appointed, effective June 1, 1999.

March 1996

Accreditation-Provisional; Next Comprehensive Evaluation: March 1997.