

## Canisius College Accreditation History

First accredited: June 2020

Next review: July 2035

Maximum class size: 30

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### September 2025

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

- Updates to the program's Program Management Portal/website.

No further information requested.

### June 2025 (following Final Provisional review)

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards* after completion of the provisional review process. The commission noted 12 areas of noncompliance with the *Standards*.

Next Comprehensive Evaluation: July 2035. Maximum class size: 30.

Report due August 15, 2025:

- Update Details tab in Program Management Portal and publish Attrition Table on website.

Report due November 1, 2025 (*Standards*, 5<sup>th</sup> edition):

- **Standard A3.11** (lacked evidence the sponsoring institution and program's announcements and advertising accurately reflect the program offered)
- **Standard A3.14** (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program.)
- **Standard B1.03e** (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)
- **Standard B3.06c** (lacked evidence supervised clinical practice experiences occur with other licensed health care providers qualified in their area of instruction)
- **Standard B3.07g** (lacked evidence supervised clinical practice experiences occur with preceptors who enable students to meet program defined learning outcomes for behavioral and mental health care)
- **Standard B4.01a** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)
- **Standard B4.01b** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)
- **Standard B4.03a** (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including clinical and technical skills)
- **Standard B4.03b** (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including clinical reasoning and problem-solving abilities)

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- **Standard B4.03d** (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including medical knowledge)
- **Standard B4.03e** (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including professional behaviors)

Report due December 1, 2025 modified self-study report (Standards, 5th edition):

- **Standard C1.03** (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)

### March 2025

The program's PANCE pass rate percentage was 85% or less for its 2023 cohort. The program submitted the required analysis of PANCE performance. The commission **did not accept the report**. Additional information (resubmitted PANCE report) due by July 11, 2025.

### March 2024

The commission **accepted** the report addressing 5<sup>th</sup> edition

- **Standard A3.14** (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program)

No further information requested.

### June 2023 (following Provisional Monitoring review)

Accreditation-Provisional; Program demonstrates continued progress in complying with the *Standards* as it prepares for the graduation of the first class of students. Next Comprehensive Evaluation: June 2025 (Final Provisional). The program's maximum class size remains 30.

Report due October 1, 2023 (*Standards*, 5<sup>th</sup> edition):

- **Standard A3.14** (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program)

No report due (commission expects program to submit all reports and documents as required by the ARC-PA with the initial submission):

- **Standard C1.03** (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)
- **Standard E1.03** (lacked evidence program submits reports or documents as required by the ARC-PA)

### March 2021

The commission **accepted the report** addressing 4<sup>th</sup> edition -

- **Standard A2.16** (provided evidence all instructional faculty serving as supervised clinical practice experience [SCPE] preceptors hold a valid license),

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- **Standard A3.16** (provided evidence the program makes student admission decisions in accordance with published practices) and
- **Standards B3.06a and b** (provided evidence SCPEs occur with a] physicians who are specialty board certified in their area of instruction and b] PAs teamed with physicians who are specialty board certified in their area of instruction). No further information requested.

### June 2020

Accreditation-Provisional; Next Comprehensive Evaluation: TBD (Provisional Monitoring).

The program is approved for up to 30 students in the first class of students, 30 in the second class and 30 in the third class.

Report due August 31, 2020 (*Standards*, 4<sup>th</sup> edition) -

- **Standard A2.16** (lacked evidence all instructional faculty serving as supervised clinical practice experience [SCPE] preceptors hold a valid license),
- **Standard A3.16** (lacked evidence the program makes student admission decisions in accordance with published practices) and
- **Standards B3.06a and b** (lacked evidence SCPEs occur with a] physicians who are specialty board certified in their area of instruction and b] PAs teamed with physicians who are specialty board certified in their area of instruction).