

Franklin Pierce University Accreditation History

First accredited: September 2009

Next review: October 2027

Maximum class size: 24

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January 2026

The program's student attrition rate was 10.9% or greater for its 2025 cohort. The program submitted the Student Attrition Required Report. The commission **accepted** the report. No further information requested.

Program Change: Change in location. The commission **approved the program's proposed change**. No further information requested.

March 2025

The commission **did not accept the December 2, 2024 report** providing evidence of

- redone and resubmitted Student Attrition Required Report as one combined report addressing 2023 and 2024.

No further information requested as the program will submit a Student Attrition Required Report for the class of 2025.

The program's student attrition rate was 10.9% or greater for its 2024 cohort. The program submitted the Student Attrition Required Report. The commission **did not accept the August 30, 2024 report**. Additional information (redo and resubmit the entire Student Attrition Required Report as one combined report addressing 2023 and 2024) due December 12, 2024.

The commission **did not accept the July 11, 2024 report** providing evidence of

- Program benchmarks for quantitative and qualitative data, documented data analysis to support strengths and areas in need of improvement and potential causes/reasons for scores below the program's benchmark, trends over time and/or relates the data to the expectations of the program, clearly stated conclusions, and corrected student attrition table for class of 2023.

Additional information (redo and resubmit the entire Student Attrition Required Report as one combined report addressing 2023 and 2024) due December 12, 2024.

June 2024

The program's student attrition rate was 10.9% or greater for its 2023 cohort. The program submitted the Student Attrition Required Report. The commission **reviewed and more information requested the report**. Additional information (program benchmarks for quantitative and qualitative data, documented data analysis to support strengths and areas in need of improvement and potential causes/reasons for scores below the program's benchmark, trends over time and/or relates the data to the expectations of the program, clearly stated conclusions, and corrected student attrition table) due July 11, 2024.

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.

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June 2022

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**.

June 2021

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

- 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.

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 2019

Accreditation-Continued; Next Comprehensive Evaluation: September 2027. Maximum class size: 24. The commission noted zero areas of noncompliance with the *Standards*.

September 2018

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

- **Standards B3.02, B3.03a-d** (provided evidence program measures and documents each student can meet program expectations) and
- **Standard C4.01** (provided evidence of ongoing clinical site evaluation). No further information requested.

June 2018

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

- **Standard B3.07d** (provided evidence of SCPEs with preceptors practicing in pediatrics). No further information requested.

March 2018

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

- **Standard A1.03g** (provided evidence the sponsoring institution is responsible for addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs),
- **Standard A3.19f** (provided evidence that student files include documentation that the student has met requirements for program completion),

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- **Standard B1.09** (provided evidence for each didactic course, the program defines and publishes instructional objectives that guide student acquisition of required competencies),
- **Standard B2.08** (provided evidence the program curriculum includes instruction in human sexuality),
- **Standard B3.02** (provided evidence of supervised clinical practice experiences [SCPEs] enabling students to meet program expectations and acquire the competencies needed for clinical PA practice),
- **Standards B3.03a-d** (provided evidence SCPEs provide sufficient patient exposure with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions to allow each student to meet program expectations),
- **Standard C1.01** (provided evidence of implementation of an ongoing program self-assessment process which documents program effectiveness and fosters program improvement),
- **Standard C4.01** (provided evidence the program maintains and documents effective processes for the ongoing evaluation of all sites and preceptors used for SCPEs to ensure that sites and *preceptors* meet program expectations for *learning outcomes* and performance evaluation measures) and
- **Standard C4.02** (provided evidence the program documents that each clinical site provides the student access to patient populations necessary to fulfill program expectations of the clinical experience).

Additional information (standards B3.02, B3.03a-d provide evidence program measures and documents each student can meet program expectations and C4.01 provide evidence of ongoing clinical site evaluation) due May 18, 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

Adverse Action-Accreditation-Probation; A focused probation site visit will occur in advance of the September 2019 commission meeting. Maximum class size: 24. The program did not appeal the commission's decision.

Report due January 1 (*Standards*, 4th edition) -

- **Standard A1.03g** (lacked evidence the sponsoring institution is responsible for addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs),
- **Standard A3.19f** (lacked evidence that student files include documentation that the student has met requirements for program completion),

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- **Standard B1.09** (lacked evidence for each didactic course, the program defines and publishes instructional objectives that guide student acquisition of required competencies),
- **Standard B2.08** (lacked evidence the program curriculum includes instruction in human sexuality),
- **Standard B3.02** (lacked evidence of supervised clinical practice experiences [SCPEs] enabling students to meet program expectations and acquire the competencies needed for clinical PA practice),
- **Standards B3.03a-d** (lacked evidence SCPEs provide sufficient patient exposure with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions to allow each student to meet program expectations),
- **Standard C1.01** (lacked evidence of implementation of an ongoing program self-assessment process which documents program effectiveness and fosters program improvement),
- **Standard C4.01** (lacked evidence the program maintains and documents effective processes for the ongoing evaluation of all sites and preceptors used for SCPEs to ensure that sites and *preceptors* meet program expectations for *learning outcomes* and performance evaluation measures) and
- **Standard C4.02** (lacked evidence the program documents that each clinical site provides the student access to patient populations necessary to fulfill program expectations of the clinical experience).

Due April 1, 2018 (*Standards*, 4th edition) -

- **Standard B3.07d** (lacked evidence of SCPEs with preceptors practicing in pediatrics).

Due April 20, 2019 (*Standards*, 4th edition) -

- **Standard C1.02** (lacked evidence the program applies the results of ongoing program self-assessment to the curriculum and other dimensions of the program) and
- **Standards C2.01b-e**, modified Self-Study Report for focused visit (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).

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

- **Standard A3.17b** (lacked evidence program defines, publishes and makes readily available to students upon admission academic performance and progression information to include completion deadlines/requirements related to curricular components)
- **Standard A3.17c** (lacked evidence program defines, publishes and makes readily available to students upon admission academic performance and progression information to include requirements for progression in and completion of the program)

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March 2017

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.

March 2016

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

- Updated website and class size report.
- Update on hiring principal and instructional faculty. No further information requested.

September 2015

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

- Updated Portal and narrative regarding faculty and a permanent program director.

Additional information due October 28, 2015 (update website with PANCE Pass Rate Summary Report and program's success in achieving goals and report on class size) and December 4, 2015 (narrative update on the hiring of principal and instructional faculty).

July 2015

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

- The accuracy of the Portal.

Additional information (update Personnel tab in Portal and narrative regarding faculty and plans/timeline to secure faculty and a permanent program director) due August 21, 2015.

The commission reviewed the Program Management Portal and noted the Personnel tab appeared incomplete. Report requested by July 22, 2015 regarding either an update of the Portal or an explanation regarding the faculty. Program also reminded of quarterly reports for faculty vacancies and length of time for interim program director.

February 2015

The program was notified of a change in the accreditation process (due to increase in program applications, commission meetings, in addition to March and September, to be conducted). Program's next validation review changed from September 2015 to September 2017 due to this change.

September 2013

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

- **Standard A3.12** (provided evidence the program defines, publishes and makes readily available to faculty institutional policies and procedures for processing faculty grievances and allegations of harassment),

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- **Standard A3.14c** (provided evidence the program publishes and makes readily available to enrolled and prospective students the first time PANCE rates for the five most recent graduating classes),
- **Standard B1.09** (provided evidence for each didactic and clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies),
- **Standard B3.03a** provided evidence of program defined requirements for supervised clinical practice experiences [SCPEs] with patients seeking medical care across the life span) and
- **Standard B3.07c** (provided evidence of SCPEs with preceptors practicing in general surgery). No further information requested.

September 2012

Accreditation-Continued; Next Comprehensive Evaluation: September 2015. Maximum class size: 24.

Report due July 1, 2013 (*Standards*, 4th edition) -

- **Standard A3.12** (lacked evidence the program defines, publishes and makes readily available to faculty institutional policies and procedures for processing faculty grievances and allegations of harassment),
- **Standard A3.14c** (lacked evidence the program publishes and makes readily available to enrolled and prospective students the first time PANCE rates for the five most recent graduating classes),
- **Standard B1.09** (lacked evidence for each didactic and clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies),
- **Standard B3.03a** (lacked evidence of program defined requirements for supervised clinical practice experiences [SCPEs] with patients seeking medical care across the life span) and
- **Standard B3.07c** (lacked evidence of SCPEs with preceptors practicing in general surgery).

September 2010

The commission **accepted the report** addressing 3rd edition

- **Standard A3.07a** (clarified process for selection of students). No further information requested.

March 2010

The commission **accepted the report** addressing 3rd edition

- **Standard A2.02** (provided evidence core program faculty include, at a minimum, the program director, medical director, and two additional faculty positions for individuals currently NCCPA-certified as PAs) and

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- **Standard A3.07a** (provided evidence the program defines, publishes and makes readily available to prospective and enrolled students any institutional policies and practices that favor specific groups of applicants).

Additional information (standard A3.07a, clarify process for selection of students) due July 1, 2010.

September 2009

Accreditation-Provisional; Next Comprehensive Evaluation: September 2012. Maximum Student Capacity: 72.

Report due December 31, 2009 (*Standards*, 3rd edition) -

- **Standard A2.02** (lacked evidence core program faculty include, at a minimum, the program director, medical director, and two additional faculty positions for individuals currently NCCPA-certified as PAs) and
- **Standard A3.07a** (lacked evidence the program defines, publishes and makes readily available to prospective and enrolled students any institutional policies and practices that favor specific groups of applicants).