

University of Dayton Accreditation History

First accredited: March 2014

Next review: April 2029

Maximum class size: 40

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March 2025

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 accepted the report. No further information requested.

March 2024

The program's PANCE pass rate percentage was 85% or less for its 2022 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

September 2021

The commission **accepted the report** addressing 5th edition

- **Standard B3.07e** (provided evidence the supervised clinical practice experiences occur with preceptors who enable students to meet program defined learning outcomes for pediatrics). No further information requested.

June 2021

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

- Website updated with the latest NCCPA PANCE Exam Performance Summary Report and Program Management Portal updated. No further information requested.

March 2021

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards*. Next Comprehensive Evaluation: March 2029. Maximum class size: 40.

Report due April 1, 2021 (*Standards*, 5th edition) -

- **Standard A3.12c** (lacked evidence the most current annual NCCPA PANCE Exam Performance Summary Report is published on the program website).

Report due May 17, 2021 (*Standards*, 5th edition) -

- **Standard B3.07e** (lacked evidence the supervised clinical practice experiences occur with preceptors who enable students to meet program defined learning outcomes for pediatrics).

January 2021

Accreditation-Administrative Probation. The Annual Report was due January 15, 2021. It was not submitted until January 20, 2021. Administrative-Probation removed post receipt of annual report.

June 2020

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

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

March 2020

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

- Institutional oversight for programmatic assessment and compliance with the accreditation *Standards*,

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- Specific efforts to address preceptor insufficiencies for general surgery, pediatrics and ob/gyn and
- How the program determines each student has met the program defined learning outcomes for patients seeking medical care across the life span, women's health, surgical management and care for behavioral and mental health conditions. No further information requested.

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

- **Standards B3.07c-e** (provided evidence of supervised clinical practice experiences [SCPEs] with preceptors practicing in c) general surgery, d) pediatrics and e) ob/gyn). No further information requested.

September 2019

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

- **Standards A1.03a and c** (provided some evidence the sponsoring institution is responsible for a) supporting the planning by program faculty in program assessment and c) complying with ARC-PA accreditation *Standards* and policies),
- **Standard A1.11** (provided some evidence the sponsoring institution supports the program in securing preceptors in sufficient number for program-required clinical practice experiences),
- **Standards B3.03a-d** (provided some evidence of clearly defined learning outcomes and methods to determine students, after 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 have attained the expected learning outcomes) and
- **Standards B3.06a and b** (provided evidence of SCPEs with a) physicians specialty board certified in their area of instruction and b) PAs teamed with physicians who are specialty board certified in their area of instruction).

Additional information (narrative addressing institutional oversight for programmatic assessment and compliance with the accreditation *Standards*, specific efforts to address preceptor insufficiencies for general surgery, pediatrics and ob/gyn and how the program will determine each student has met the program defined learning outcomes for patients seeking medical care across the life span, women's health, surgical management and care for behavioral and mental health conditions) due December 18, 2019.

March 2019 (following Final Provisional and probation site visit)

Adverse Action-Accreditation-Probation (extended). Next Comprehensive Evaluation: March 2021.

Maximum class size: 40. A focused probation site visit will occur in advance of the March 2021 commission meeting.

Report due May 27, 2019 (*Standards*, 4th edition) -

- **Standards A1.03a and c** (lacked evidence the sponsoring institution is responsible for a) supporting the planning by program faculty in program assessment and c) complying with ARC-PA accreditation *Standards* and policies),
- **Standard A1.11** (lacked evidence the sponsoring institution supports the program in securing preceptors in sufficient number for program-required clinical practice experiences),

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- **Standards B3.03a-d** (lacked evidence of clearly defined learning outcomes and methods to determine students, after 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 have attained the expected learning outcomes) and
- **Standards B3.06a and b** (lacked evidence of SCPEs with a) physicians specialty board certified in their area of instruction and b) PAs teamed with physicians who are specialty board certified in their area of instruction).

Due December 5, 2019 (*Standards*, 4th edition) -

- **Standards B3.07c-e** (lacked evidence of supervised clinical practice experiences [SCPEs] with preceptors practicing in c) general surgery, d) pediatrics and e) ob/gyn).

Due August 15, 2020 (*Standards*, 4th edition) -

- **Standards C2.01b-d**, 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 and d) modifications that occurred as a result of self-assessment).

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.

June 2018

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

- **Standard B1.08** (provided evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams). No further information requested.

The commission **did not accept the report** addressing 4th edition

- **Standards B3.07d and e** (lacked evidence of supervised clinical practice experiences [SCPEs] with preceptors practicing in d) pediatrics and e) ob/gyn). No further information requested.

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

- Updated PANCE pass rate data in the Portal. No further information requested.

March 2018

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

- Semi-annual update regarding the process/progress in changing the titles and rank of faculty. Continue providing updates.

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 report** providing evidence of

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- Semi-annual update regarding the process/progress in changing the titles and rank of faculty. Continue providing updates.

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

- **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 B1.10** (provided evidence the program orients instructional faculty to the specific learning outcomes it requires of students),
- **Standard B3.02** (provided evidence supervised clinical practice experiences [SCPEs] enable students to meet program expectations and acquire the competencies needed for clinical PA practice),
- **Standards B3.03a-d** (provided evidence that SCPEs enable each student to meet program expectations and acquire competencies needed for entry into clinical practice with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions) and
- **Standard C3.01** (provided evidence the program conducts objective and documented evaluations of students related to learning outcomes for the supervised clinical education components). No further information requested.

The program's PANCE pass rate percentage was 85% or less for its 2016 cohort. The program submitted required PANCE performance analysis report. The commission **accepted the report**. Additional information (update PANCE results in the Program Management Portal) due March 1, 2018.

July 2017

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

- **Standards A3.14f and g** (provided evidence the program defines, publishes and makes readily available to enrolled and prospective students f) estimates of all costs [tuition, fees, etc.] related to the program and g) policies and procedures for refunds of tuition and fees). No further information requested.

March 2017 (following Provisional Monitoring review)

Adverse Action-Accreditation-Probation; Next Comprehensive Evaluation: March 2019 (Final Provisional). The program is approved to accept up to 40 students per class. A focused probation site visit will occur in advance of the March 2019 commission meeting. The program did not appeal the commission's decision.

Report due May 8, 2017 (*Standards*, 4th edition) -

- **Standards A3.14f and g** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students f) estimates of all costs [tuition, fees, etc.] related to the program and g) policies and procedures for refunds of tuition and fees).

Due July 5, 2017 (*Standards*, 4th edition) -

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- **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 B1.10** (lacked evidence the program orients instructional faculty to the specific learning outcomes it requires of students),
- **Standard B3.02** (lacked evidence supervised clinical practice experiences [SCPEs] enable students to meet program expectations and acquire the competencies needed for clinical PA practice),
- **Standards B3.03a-d** (lacked evidence that SCPEs enable each student to meet program expectations and acquire competencies needed for entry into clinical practice with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions) and
- **Standard C3.01** (lacked evidence the program conducts objective and documented evaluations of students related to learning outcomes for the supervised clinical education components).

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

- **Standard B1.08** (lacked evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams) and
- **Standards B3.07d and e** (lacked evidence of supervised clinical practice experiences [SCPEs] with preceptors practicing in d) pediatrics and e) ob/gyn).

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

- Semi-annual update regarding the process/progress in changing the titles and rank of faculty. Continue providing updates.

July 2016

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

- Semi-annual update regarding the process/progress in changing the titles and rank of faculty. Continue providing updates.

March 2016

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

- Semi-annual update regarding the process/progress in changing the titles and rank of faculty. Continue providing updates.

September 2015

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

- Semi-annual update regarding the process/progress in changing the titles and rank of faculty. Continue providing updates.

March 2015

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

- Semi-annual update regarding the process/progress in changing the titles and rank of faculty. Continue providing updates.

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September 2014

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

- **Standard A1.10** (provided evidence the sponsoring institution provides the program with the academic resources needed by the program, staff and students to operate the educational program and to fulfill obligations to matriculating and enrolled students),
- **Standard A2.04** (provided evidence principal faculty and the program director have academic appointments and privileges comparable to other faculty with similar academic responsibilities in the institution),
- **Standard A2.13a** (provided evidence instructional faculty are qualified through academic preparation and/or experience to teach assigned subjects) and
- **Standard B2.08** (provided evidence the program curriculum includes instruction in the social and behavioral sciences, specifically normal development and normal human sexuality).

Additional information (semi-annual updates, and continuing until the process is complete, regarding the process/progress in changing the titles and rank of faculty) beginning January 1, 2015.

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

- Corrected program websites. No further information requested.

March 2014

Accreditation-Provisional; Next Comprehensive Evaluation: March 2017 (Provisional Monitoring). The program is approved for up to 30 students in the first class of students, 35 in the second class and 40 in the third class.

Report due May 19, 2014 (*Standards*, 4th edition) -

- **Standard A1.10** (lacked evidence the sponsoring institution provides the program with the academic resources needed by the program, staff and students to operate the educational program and to fulfill obligations to matriculating and enrolled students),
- **Standard A2.04** (lacked evidence principal faculty and the program director have academic appointments and privileges comparable to other faculty with similar academic responsibilities in the institution),
- **Standard A2.13a** (lacked evidence instructional faculty are qualified through academic preparation and/or experience to teach assigned subjects) and
- **Standard B2.08** (lacked evidence the program curriculum includes instruction in the social and behavioral sciences, specifically normal development and normal human sexuality).
- Correct program websites and report on information discrepancy between the two sites.