



*Accreditation Review Commission on Education
for the Physician Assistant, Inc.*

NOTES TO PROGRAMS

Fall 2014

Below are many important Notes to all programs. Some provide clarification and some refer to documents to be posted on the ARC-PA web site Accreditation Resource page (<http://www.arc-pa.org/accreditation/resources/>). Others are or will be reflected in edited versions of the Policy Documents, *Standards* and Accreditation Manual.

EXECUTIVE SUMMARY EXCERPTS FROM SEPTEMBER 2014 MEETING

Accreditation Actions as of September 30, 2014

Acknowledge **15** new PD, **12** New IPD, **8** new MD, **2** IMD program changes

Action Taken On:

- **10** Continuing program applications
- **7** Provisional program applications
- **1** Provisional monitoring application
- **3** Expansion to a Distant Campus applications
- **13** Program changes
- **45** Program reports due

There were 28 Expedited Reviews –**21** report due; **7** program changes, **4** referred to full commission and **24** program informational items

([Accreditation actions](#) are posted on the ARC-PA web site after each meeting and after all programs have been notified of commission decisions.)

The total number of accredited PA programs as of October 1, 2014 is **191**.

The total number of **clinical postgraduate** accredited programs at present is **8**.

Projected Workload

- The current projected workload includes an additional **75** new PA programs for provisional accreditation consideration by **2019**.
- While the need for PA healthcare providers remains strong, the commission remains concerned about the availability of clinical education sites for all types of healthcare students and requests that our collaborating organizations, when possible, promote to their members participation in clinical education. The ability of current and emerging programs to recruit qualified program leadership and faculty remains worrisome to the commission.

ACCREDITATION PROCESS CHANGE IMPLEMENTATION

The ARC-PA continues its transition to the new accreditation process. Changes are being implemented over several years. **It is important for programs to note that many of the dates related to materials submission are based on the dates of their validation review site visit.** Site visits often occur months before a program is discussed at a commission meeting.

The ARC-PA distributes new application materials as they become available, with the goal of having materials to programs one year in advance of their submission deadlines. Updated sample applications for new provisional applicants, provisional monitoring and validation visits, as well as a sample SSR to be submitted 2 years before a validation review, will be posted on the ARC-PA web site in the Continuing and Provisional sections before the end of October. The samples will be pdf documents. Programs will be able to begin drafting potential responses to questions using Word 2010 or later. These sample application are not to be used for submission to the ARC-PA.

Below is an update of some of the changes and their dates of implementation by ARC-PA commission agenda.

By commission agenda

2015M: Continuing programs to have application materials submitted 12 weeks before visit.

Provisional applicant programs began Feasibility Study using guidelines revised 11.2013. Response to Feasibility Study review required with application.

2016S: Begin submitting SSR two years before visit (2014); customized SV designed by ARC-PA for each program based on all documents submitted and reviewed during the interval between previous and current commission review.

APPLICATION OF RECORD

Programs are reminded about the Application of Record terminology in the application, in the letter to the program director confirming the assignment of site visitors and in the SV Protocol for Program Directors.

The application submitted by the program to the ARC- PA office is considered the program's application of record. It is one component of the official program record used by the commission throughout the accreditation review process. Site visitors have been instructed **not** to and will not accept any new or revised application materials from the program at the time of the visit. **If**, during the process of the visit, the site visitors suggest additional information or materials be submitted to the ARC-PA office, these materials must be sent with the program's response to observations.

The SV team is advised not to accept any new materials not a component of the application of record. The team will not accept changes to or new appendices to the original application, which includes not accepting new or updated course syllabi replacing those required in the application. In NO circumstance will the SV team accept a NEW application document.

However, there may be an occasion for a program to present some revised or new information at the time of the visit. Specific examples would be documentation related to a change in faculty or a new hire since application submission, correction of substantive typographical errors, or provision of a page that was

determined to be missing by ARC-PA staff as they reviewed the application prior to the visit. In such cases, the team may consider these documents in review of the program and make a determination as to whether the information should be submitted with the program response to the site visit team observations.

PROGRAM DEFINED EXPECTATIONS

In 2013, the commission began a renewed focus on the topic of “program defined expectations” as referenced in the *Standards* and used by programs. The Spring 2013 Notes addressed this issue (*Standards Related to Program Expectations and Requirements for Practice*) by clarifying several related standards.

At the fall 2013 PAEA meeting, the ARC-PA shared a power point presentation about this topic as it relates to programs defining the expectations in ways that demonstrate students’ preparation for entry into practice. Additionally the session focused on the assessment of student performance and demonstration that they meet the expectations. This power point remains on the ARC-PA [Manuals and Guides web page](#).

The commission believes that

“What programs have moved away from is their ability to define requirements in the form of measurable learning outcomes. The concept of measurable learning outcomes does not equate to a number. Rather than just relying on numerical evidence of case logs, successful programs indicate it is the continuum of experiences of increasing rigor and interrelationship that guides learners to develop as clinicians. This approach can help the student develop from novice to skilled learner, even to expert, as the learner moves through an appropriately sequenced curriculum. Defining program expectations and competencies to be acquired during SCPEs reinforces and aligns the important content areas of the didactic curriculum and provides a continuum of that material within the clinical year experiences.”

Programs are encouraged to review the presentation and engage in substantive discussions within their programs about their curricula and performance evaluation mechanisms related to the well-defined expectations for competency. Talks on this topic continue at the commission.

CHEA RECOGNITION

The ARC-PA is in the process of its review by the Council for Higher Education Accreditation (CHEA) for ongoing Recognition. An observer from CHEA attended the fall 2014 ARC-PA meeting, doing much the same as an ARC-PA site visitor at a program. The observer reviewed materials in advance of the meeting and, following CHEA procedures, verified and validated that the commission was following its policies related to review of programs. The ARC-PA is scheduled for review in March 2015. (See Compliance Audit below.)

PROGRAM WEB SITE COMPLIANCE AUDIT

The ARC-PA will begin an audit of all accredited program web sites in January 2015, checking for the *Standards* required content related to all components of standards A3.14 and A3.15. Trusting that programs are adhering to requirements in the *Standards* related to these areas, traditionally the ARC-PA has not monitored programs related to these requirements at times other than when the program was scheduled for discussion at an ARC-PA meeting. As part of the CHEA recognition process, however, CHEA

will randomly review the web sites of ARC-PA accredited programs, checking for areas of compliance with standards relating to clear and accurate publication of information as required in the *Standards*.

Programs not demonstrating compliance with standards A3.14 and A3.15 will be placed on Administrative Probation by the ARC-PA until such time as corrections are made and validated by the ARC-PA. This status is posted on the ARC-PA web page of accredited programs.

APPLICATION APPENDIX 16 SYLLABI REQUIRED

There has been some confusion as to what is to be included in Appendix 16 of any of the applications for accreditation. Appendix 16 is to have syllabi which contain the instructional objectives for the specific course content areas listed. Including representative syllabi as a component of the application of record allows commissioners to review both instructional objectives and program syllabi for selected content areas.

The course content listed varies by type and date of application. For most programs the content listed will equate to one syllabus for each course content area listed. However, if the course content covers several different courses in the program, such as content for interprofessional education or physical diagnosis, the program is to submit the syllabus that covers most of the content and supplement that with a listing of other instructional objectives, referenced to the other courses which complete the content area.

Programs completing application materials should direct questions about the application to staff through accreditationservices@arc-pa.org.

SITE VISITOR ROLE

A site visit is the peer evaluation component of the accreditation process. Its success depends on the mutual respect and performance of appropriate responsibilities by all parties involved. After being selected by the ARC-PA for an assignment, site visitors are asked to identify any potential conflicts of interest that would disqualify them. Programs may present a detailed description if the institution/program believes there may be a perceived or potential conflict of interest.

The role of the site visitor is to verify, validate and clarify the information provided by the program in its application materials and on site as evidence presented in support of the program's compliance with the *Standards*. Site visitors are not allowed to suggest improvements, provide consultation or discuss how they might approach an issue in their own program. Their role is strictly defined by the ARC-PA.

Site visitors do not speak on behalf of the ARC-PA and cannot predict the accreditation actions that will be taken by the ARC-PA. The report they submit is only one part of the assessment conducted by the commission, which is solely responsible for accreditation decisions.

ARC-PA ADDS REMOTE SITE VISITOR

The ARC-PA has begun using a remote site visitor to conduct the initial paper and web site review of program application materials submitted in advance of a site visit. Such reviews are done for all but multi-campus programs. The remote review allows the visitors at the program to focus more on discussion and to verify, validate and clarify content not clear in the remote pre-visit review.

EXAMPLES OF EXAMINATIONS USED FOR STUDENT EVALUATION REMINDER

The ARC-PA no longer requires that programs submit examples of examinations used for student evaluation as a component of the appendices. The site visit team chair will determine in advance which evaluation instruments may be needed for review at time of the site visit in support of the C3 standards.

STANDARDS CLARIFICATION / INTERPRETATION

Standard A2.06 addresses certification and licensure requirements for program directors. The standard has been edited to remove the footnotes which are no longer applicable

- A2.06 The program director *must* be a PA or a physician.
- a) If the program director is a PA, *s/he must* hold current *NCCPA* certification.
 - b) If the program director is a physician, *s/he must* hold current licensure as an allopathic or osteopathic physician in the state in which the program exists and *must* be certified by an *ABMS-* or *AOA-*approved specialty board.

Standard A3.14 addresses the general program information that *must* be defined, published and made *readily available* to enrolled and *prospective students*.

A3.14a refers to the program's accreditation status. **In order to be in compliance with A3.14a**, the program must publish the official wording provided by the ARC-PA exactly as written. ***The expectation is that this will be published and available on the home page of the program's web site or as a link directly from the home page with the category PA Program Accreditation.***

A3.14b indicates that one such area is "the success of the program in achieving its goals." This is above and beyond the PANCE data. **In order to be in compliance with A3.14b**, the program must first define and publish its goals. ***The expectation is that these will be published and readily available as a link directly from the program's home page with the category Program Goals.***

A3.14c refers to the first time PANCE results. As noted in the Spring 2014 Notes, **in order to be in compliance with A3.14c**, the program is expected to publish the official NCCPA PANCE Pass Rate Summary Report as provided by the NCCPA through its program portal. ***This must be published and readily available as a link directly from the program's home page with the category Graduate Performance on Certification Exam***, not hidden within other categories. If the link connects to a separate web page in the site, the PANCE report must be readily evident.

Standards A3.14 and A3.15 are provided below.

- A3.14 The program *must* define, publish and make *readily available* to enrolled and *prospective students* general program information to include:
- a) the program's ARC-PA accreditation status,
ANNOTATION: The program is expected to post on its web site the accreditation status statement provided the program by the ARC-PA.
 - b) the success of the program in achieving its *goals*,

- c) first time *PANCE* rates for the five most recent graduating classes,
 ANNOTATION: The program is expected to publish on its web site the *PANCE* performance data of its graduates by publishing the *NCCPA PANCE* Pass Rate Summary Report, as provided by the *NCCPA* through its program portal, of the most recent five-year first time graduate performance. The program is expected to update this performance data in a *timely* manner.
- d) all required curricular components,
- e) academic credit offered by the program,
- f) estimates of all costs (tuition, fees, etc.) related to the program,
- g) policies and procedures for refunds of tuition and fees and
- h) policies about student employment while enrolled in the program.

ANNOTATION: The program may supplement the above general program information with concise and factually accurate evidence of the soundness of its operation and its overall effectiveness in meeting its mission. Examples of information may include graduation rates, job placement rates and *attrition* rates.

- A3.15 The program *must* define, publish and make *readily available* to *prospective students* admission related information to include:
- a) admission and enrollment practices that favor specified individuals or groups (if applicable),
 - b) admission requirements regarding prior education or work experience,
 - c) policies and procedures concerning awarding or granting *advanced placement*,
 - d) any required academic standards for enrollment and
 - e) any required *technical standards* for enrollment.

Standard A3.19 addresses issues related to student files. To clarify that files may be electronic and that being kept does not mean must be physically housed in the program offices, an annotation to this standard has been developed.

- A3.19 Student files kept by the program *must* include documentation:
- a) that the student has met published admission criteria including advanced placement if awarded,
 - b) that the student has met institution and program health screening and immunization requirements,
 - c) of student performance while enrolled,
 - d) of remediation efforts and outcomes,
 - e) of summaries of any formal academic/behavioral disciplinary action taken against a student and
 - f) that the student has met requirements for program completion.

ANNOTATION: Files kept by the program may be kept in paper or electronic format and need not be physically located in the program offices. If not located in the program offices, they are to be accessible by appropriate program personnel. File documents must be able to be copied for distribution for others with need and authority to access the files.

POLICY CHANGES

Programs are reminded of recent policy changes approved by the commission at its March 2014 meeting related to expansion in class size and expansion to a distant campus. Updated policies 9.2, 10.1 and 10.2 may be found on the [Policies page of the ARC-PA web site](#) (policies have been temporarily removed for editing).

Provisional Applicant programs should note these policies apply to them regardless of the policies that may have been in place when they first started planning several years ago.

Policy 9.2 Accreditation Status wording has been edited: “Programs applying for Accreditation-Provisional status are not eligible to begin more than one cohort/class per calendar year or include a distant campus as part of the application.”

Policy 10.1 Eligibility for Expansion to a Distant Campus: The change involves setting as five years the number of years of accreditation-continued that any program must hold before it may apply for expansion to a distant campus. Additionally the policy states that a program must have outcomes from the first cohort of students at any distant campus before applying to expand to another distant campus.

Policy 10.2 Eligibility to Request an Increase in Maximum Entering Class Size: A program with the status of accreditation–probation is not eligible to request an increase in the maximum entering class size.

Wording was edited to define the time between successive requests to increase class size based on the number of years the applying program has held accreditation-continued status.

A program holding the status of accreditation–continued

- a) Must maintain five consecutive years of accreditation–continued status before the ARC-PA will consider a request for an increase in maximum entering class size.
- b) Must maintain four consecutive years of accreditation-continued status from the date of the last approved class size increase before the ARC-PA will consider a request for an increase in maximum entering class size.
- c) Must maintain two years of accreditation-continued status after completing the provisional pathway, without an approved incremental class size increase while holding accreditation-provisional status, before the ARC-PA will consider a request for an increase in maximum entering class size.
- d) Must maintain five years of accreditation-continued status after completing the provisional pathway, if the program was approved for incremental class size increases while holding accreditation –provisional status, before the ARC-PA will consider a request for an increase in maximum entering class size.

PANCE REQUIRED REPORTS FOR LOW FIRST TIME TAKER PASS RATES

The ARC-PA continues to review the PANCE first time pass rate percentages by student cohort for any program with a PANCE pass rate percentage of 82 % or less. Any program with this result for the 2014 cohort must submit an analysis of PANCE performance to the ARC-PA **by July 1, 2015**. In any year that a program's PANCE pass rate for first time takers by cohort for that year has a pass rate percentage of 82% or less, the program must submit an analysis of PANCE performance by July 1 of the following year. The NCCPA usually provides programs their previous year's data in February.

The cut-off score was chosen because it is one standard deviation from the mean first time pass rate across programs over a review of multiple years of data. Over a 10 year period, that percentage did not vary by more than a few percentage points. Realizing that the number of new programs rapidly entering the list of accredited programs may impact the history of results, every three years the commission will evaluate the minimum percentage score requiring a report.

Based on history, it is estimated that 5-10 programs per year may be required to complete PANCE Analysis Reports. Some of those may be required to complete such reports for several years in a row.

The basis for the report will be the ARC-PA's [Four Key Elements of Analysis](#). The report format will be the same as that used within the self-study report. The report form is available this year on the [Program Change Forms](#) page of the ARC-PA web site.

Data related to PANCE outcomes should include but is not limited to correlation of PANCE outcomes and:

- Admissions criteria as predictors of success
- Individual course performance
- Course and instructor evaluations
- Program expectations, instructional objectives, learning outcomes and breadth and depth of curriculum
- Student summative performance (summative examination and other comprehensive exam results)
- Remediation programs and results
- Attrition criteria and data for cohort being reviewed
- Feedback from students who were unsuccessful on PANCE
- Preceptor, alumni and employer feedback

POSTING OF ACCREDITATION ACTIONS

In an attempt to provide enhanced transparency for the public, the commission continues to post the results of [accreditation actions](#) for program applications for accreditation and actions from commission meetings. The commission has updated the content of the report (content first described in the Fall 2013 edition of the Notes) by providing references to major categories or subcategories within the *Standards* for which the program must submit a report. For example, a program receiving a citation for standard A3.15 may be listed as having to provide a report related to policies; standard A2.18 program personnel; standard B3.05 supervised clinical practice.

USE OF ARC-PA LOGO

The ARC-PA policy is provided here in response to questions received from programs about using the ARC-PA log on web sites and in printed materials.

5.9 Use of ARC-PA Logo by Programs and Sponsoring Institutions

The ARC-PA logo is the exclusive property of ARC-PA. The ARC-PA allows accredited programs and their sponsoring institutions to use the ARC-PA logo in publications and displays. All other entities must obtain permission from the ARC-PA prior to use of the logo. All users must adhere to the following:

1. The logo must be used in its entirety and not modified except that it may be reduced or enlarged to suit the use. The scale of the elements must be retained.
2. The logo may be reproduced in black and white.
3. The logo may NOT be used by programs that have applied for, but not yet received, accreditation.
4. When programs that are not accredited by the ARC-PA are included in the publication and/or displays, then accompanying text must be included clarifying which programs are ARC-PA accredited.
5. Use of the logo shall be subject at all times to revocation and withdrawal by ARC-PA when, in its sole judgment, its continued use would not serve the best interests of ARC-PA or the public.

Programs interested in using the logo should contact [Loretta Waldron](#), Director of Accreditation Services.

ARC-PA SUMMER WORKSHOP OPEN TO PROVISIONAL APPLICANT PROGRAMS

The ARC-PA is opening its summer workshop to faculty and staff from currently accredited programs **and** selected provisional applicant programs based on agenda date. This year's workshop will be held at a new venue, the historic Union Station Hotel in St. Louis, Missouri. The main workshop will be presented July 19-21, 2015. The workshop will include a separate session for programs preparing for a site visit of any type. More information will be posted on the ARC-PA web site in early winter 2015.

ARC-PA PROVISIONAL PATHWAY CONFERENCE CHANGES DATES AND VENUE IN 2015

The Provisional Pathway Conference, traditionally offered in November each year, will be moving dates and sites in 2015. This conference will require one full day and can be attended as a stand-alone conference or in conjunction with the summer accreditation workshop. The conference will occur Saturday, July 18, 2015 at the historic Union Station Hotel in St. Louis, Missouri. More information will be posted on the ARC-PA web site in early winter 2015.

DEGREE DEADLINE REMINDER

The *Standards* require that programs not currently offering a graduate degree *must* transition to conferring a graduate degree upon all PA students who matriculate into the program after 2020. The degree *should* be awarded by the sponsoring institution.

Programs housed in institutions unable to offer a graduate degree, those that do not yet offer a graduate degree or those that currently affiliate with institutions separate from their sponsoring institutions should review the ARC-PA document about the *Standards* degree deadline, available on the ARC-PA web site [Accreditation Resources Page](#).

Programs should review the [Change Forms page](#) of the ARC-PA web site to find the forms and steps needed to demonstrate compliance with the degree requirement. There are separate forms for programs changing degrees within their own institutions and those affiliated with a separate institution.

QUESTIONS OR COMMENTS?

Programs that have questions or comments about these Notes or any issue related to the accreditation process are encouraged to contact the ARC-PA by email or phone. All contact information is posted on the ARC-PA web site at <http://www.arc-pa.org/contact/staff/>.