



# Newsletter

Spring 2019 Issue

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## Message from the Executive Director

Welcome to the Spring 2019 edition of the ARC-PA newsletter! The purpose of the newsletter is to provide a mechanism for ARC-PA to communicate important messages to PA programs' educators. The accreditation process is very detailed, and our goal is to provide insight about matters that may affect a program's successful accreditation review.

For most of us, mistakes are something we want to avoid. In this edition of the newsletter, we address the most common *avoidable* mistakes that programs make during the accreditation process.

Making mistakes related to the accreditation process can be simply unnerving for some programs or seriously detrimental to others. Both options are undesirable, so we hope that you read the information provided in this newsletter very carefully and make any necessary adjustments to your program's preparations or operations related to the accreditation process to assure a successful accreditation outcome.

Beyond the overview of avoidable mistakes, please also enjoy information about the new staff members of the ARC-PA and the new Commissioners. Also, please note important change information found in the Notes to Programs section. I hope that you find this newsletter informative and helpful. As always, if you have questions or concerns, please feel free to contact our office.

**Sharon Luke, MSHS, PA-C**  
Executive Director, ARC-PA





## ***Common Missing Elements of the Self Study Report***

The program's self-study report (SSR) is submitted as part of the accreditation application. Although many programs view this document as an undertaking specifically for the ARC-PA, the SSR should reflect the ongoing self-assessment process that already transpires within the program. The SSR allows the ARC-PA to verify the program has implemented a process to review the quality and effectiveness of its educational practices, policies and outcomes. This document reflects the program's critical analysis of its curriculum, sponsorship, resources, faculty, students, outcomes, and assessment of program strengths and areas needing improvement.

For continuing accreditation applications, programs are required to submit an SSR three years prior to submitting its application. Feedback on that SSR is returned to the program. In the SSR submitted with the application, programs are to consider and address the expectations of the commission as shared with the program in the feedback letter it received. The program is NOT to resubmit the previous SSR. The site visitors and commission will NOT review the previous SSR. The site visitors and commission will only review the feedback letter generated and the current SSR, as submitted with the application for continuing accreditation. The commission will evaluate the SSR submitted with the application against the expectations set forth in the feedback letter.

As programs undergo their practice of self-assessment and prepare their SSR for accreditation review, keep in mind these common missing elements:

### **Describe your survey instrument**

Although you may be familiar with the evaluation/survey instrument used in your program, the ARC-PA reviewers need to understand the details of your evaluation/survey instrument. In addition to providing a summary of the data collected, programs must include a description of the survey/evaluation instrument, type of responses (e.g. yes/no, multiple choice, essay), description of the Likert scale (if applicable), response rates and a description of how the data was compiled. Alternately, programs can provide a copy of a blank instrument in an appendix to the SSR.

### **Don't forget about your qualitative data**

Open ended survey questions, interviews and focus groups are common methods of collecting qualitative data. This information must be included as part of your data and analysis within the SSR. When qualitative data is cited, the SSR narrative must include the process by which the data was obtained, and an explanation of how the data was analyzed (e.g. grouped into themes, percentage of comments, trends over time). Qualitative data provided in the SSR must be summarized and appended to the appendix or described in the narrative. Do not include all raw data.

Qualitative data also is filtered through the lens of the faculty's collective knowledge and experience, since faculty may have a different perspective than students. Programs are not expected to adopt modifications based solely on qualitative feedback from students or other stakeholders. This filtering should be described as part of the program's self-assessment process and explained in the narrative.

### **Identify your benchmarks**

Benchmarks identify the program's minimum threshold for performance. Prior to reviewing data, the program must determine at what level (or benchmark) it will consider the performance satisfactory. This implies that areas performing below

the program identified benchmark will require additional analysis and potentially be identified as an area in need of improvement. This also implies that areas performing above the program identified benchmark may be potential program strengths. When describing this point of reference within the SSR, the program should include its rationale for selecting each benchmark. Although external data (university benchmarks, PAEA data) may be used, benchmarks should be program specific to account for its individual mission, needs and goals.

### **Analysis does not mean repeating or summarizing data**

Although analysis does not need to be complex, it does need to include more than a summary of data and statement of conclusions. The analysis should include the description of the study of the compiled data. It may include identification of areas above or below benchmark, trends over time, and cause and effect relationships. The description of analysis should provide the reader with the linkage between the program review of data and identified conclusions.

### **Incorporate relevant data from other areas**

There are multiple appendices within the SSR but each appendix does not stand alone. Data from one area of program assessment can be utilized in the analysis of data from another area. For example, data on student course evaluations, remediation, preceptor feedback of student preparedness for rotations, student exit evaluations and faculty evaluation of the curricular aspects of the program may support analysis of PANCE performance. This integration of data analysis helps programs identify cause and effect relationships and incorporate pieces of the self-assessment process to provide a more comprehensive analysis of program functions.

### **ARC-PA Resources**

The ARC-PA website provides additional information to assist programs through the process of self -assessment. The [Data Analysis Resource](#) addresses the four components of data analysis and provides more information on the ARC-PA expectations and requirements. In addition, [Completing the Self-Study Report](#), is a PowerPoint presentation that includes more specific information related to each appendix of the SSR.



## **Frequent Mistakes Found on Submitted Applications**

Depending upon where the program is in the accreditation cycle, it will be provided the application specific to its accreditation circumstance such as provisional, provisional monitoring, final provisional, continuing, multi-campus or expansion to a distant campus.

Upon receipt of the application from the program, the ARC-PA completes a thorough review of all materials submitted to ensure there is no missing information or corrupt files. If a problem is identified, the program is immediately informed.

Here is a list of common problems found upon review of applications submitted by programs:

- Not following the written instructions in the application and with each appendix
- Not including all appendices as required
- Not including all templates as required
- Not including all required data in the templates
- Not ensuring the hyperlinks/URLs work
- Not ensuring all files open
- Not having the appropriate signatures on the application
- Not including all required pages of the application
- Not submitting a final, proofread application

Incomplete applications cannot move forward in the review process. If an issue is identified, the program director will be contacted to provide the missing documentation. If multiple errors or grossly incomplete information is submitted, the program may be informed that its accreditation review has been postponed and may be placed on administrative probation until the review is completed.

After confirmation that the application is complete, it will move forward in the accreditation review process.

To facilitate the review of required program documents, ask the following questions before submitting application materials:

- Have I read the entire document?
- Have all the instructions been followed?
- Is my application complete?
- Are all required appendices included?
- Have I used the supplied ARC-PA templates? Are all templates filled out according to their instructions?
- Are all required diagrams/documents/descriptions provided?
- Are all forms provided as appropriate?
- When directed, do the narratives describe how the institution demonstrates and reviews compliance?
- Are all boxes checked as appropriate?
- Are page numbers provided when needed?
- Do all hyperlinks work? If a hyperlink requires a password, has the log-in information and password been provided? Do they work?
- Are all URLs provided? Do they work?
- Have all materials been proofread and checked for spelling?
- Have the document(s) been signed and dated by the chief administrative officer and program director?

As a reminder, 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. It is worth the time to review before submitting to ensure it is complete, accurate and directions have been followed. If there are any difficulties or questions about the accreditation application, contact the ARC-PA office at [accreditationservices@arc-pa.org](mailto:accreditationservices@arc-pa.org)

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## Common Portal Errors and Misconceptions

The ARC-PA expects programs to keep their portal data accurate and up to date at all times. As noted in the Portal Update from November 2018, programs are reminded of the following [required timelines](#) for updating of program data:

- 1) **At the start of each academic year:** Update the student enrollment numbers, clinical phase start dates, tuition and fees.
  
- 2) **At the start of each clinical year:** Supervised clinical practice experience (SCPE) data must be updated on the “SCPE sites” tab to reflect the active SCPEs with agreements sufficient for the clinical year students including any period of overlap of clinical classes.
  
- 3) **At the start of each fiscal year:** The “Program Budget” tab must reflect planned revenue and expenditures for the upcoming fiscal year.
  
- 4) **Change of personnel:** The “Personnel” tab must be updated any time there is a change in program designated personnel, including changes in faculty and staff, the person whom the program director reports to and/or the Chief Academic Officer.
  
- 5) **Update graduate information and PANCE results:** “PANCE First Time Pass Rate,” the “Number of Graduates from class above that has actually taken the PANCE,” and the “As of date” sections of the “Students” tab must be updated per the program’s most recent pass rate report.
  
- 6) **Any significant program change: update as soon as change is made.** Such as: program or institution name, program contact information, program start and end date, number of classes admitted per calendar year, semester hour credits, length of the program, degree awarded at completion, sponsoring

institution's Chief Administrative Office or contact information, or sponsoring institution's regional accreditation status and/or review dates.

7) **Prior to submitting the required Annual Report:** Because the program's portal is reviewed at the time an application for accreditation or a "Report Due" is submitted to the ARC-PA and prior to a Commission meeting on which the program has been placed on an agenda, it is in the program's best interest to check that all portal information is up to date at those times as well.

## **The following are the most common errors found in relation to the ARC-PA Program Management Portal:**

### **Failure to report changes in principal faculty or sponsoring institution CAO and/or to update the portal accordingly**

Programs are required to report certain personnel changes to the ARC-PA as detailed in E1.04 of the accreditation *Standards*.

Programs should **ALWAYS** download the most recent version of these forms directly from the ARC-PA website at <http://www.arc-pa.org/accreditation/resources/program-change-forms/>. As these forms are frequently updated, do not use previously saved versions or forms found through internet searches. After submitting the notification and the required forms and/or templates, the PA program must also update the Personnel tab or Sponsoring Institution tab of the portal to reflect the changes reported.

### **Submitting program documents or reports separately rather than in a zip file.**

When providing required reports or responding to requests on the portal, programs must create one compressed file of the related documents by creating a zip file and uploading the compressed zip file. Do not upload each document separately

### **Sharing of a User Name and/or Password for Login to Portal**

Program personnel are asked **NOT** to share portal user and/or passwords. Each user of the portal is required to have his/her own unique username.

**Uploading documents to the portal as part of the program's annual report submission and failing to print a copy of the program data sheet for the program's records prior to submitting the annual report.**

Programs are reminded to review and update each tab on the portal before activating the “submit” button each year, as once the annual report has been submitted, no changes can be made to the data. Programs are also reminded to print or save a copy of the Annual Report for their records before activating the “submit” button, by printing or saving a copy of the Program Data Sheet, available as one of the “Reports” on the program’s dashboard.

**Not itemizing items in the budget tab**

Be sure that the Program Budget tab in the portal is up-to-date and complete for the program. All data points must be entered for each campus, if applicable and must include all sources of revenues and expenditures.

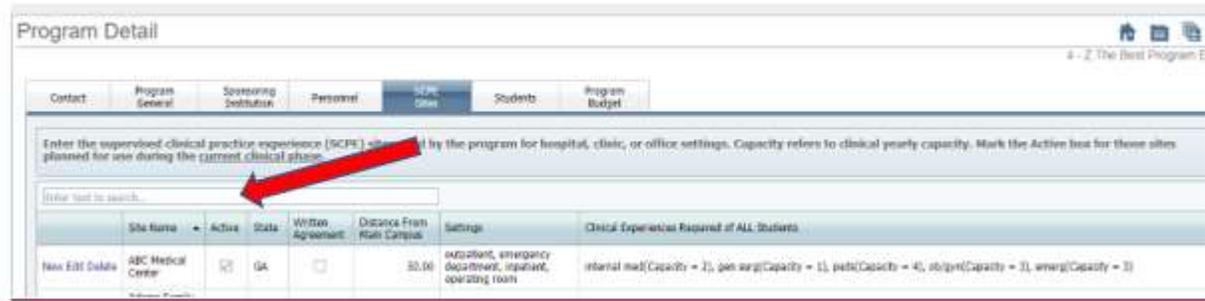
At a minimum, the expenditures included in the Budget tab in the portal must include the following:

1. Programmatic Budget items: Program faculty salaries and benefits (include total # of FTE positions the budgeted amount represents), Staff salaries and benefits (include total # of FTE positions the budgeted amount represents), Programmatic operations
2. Faculty/staff development (if funding is provided to faculty and/or staff for CME, personal or professional development, list the total amount available, whether funds are budgeted from the PA Program budget, another departmental/institutional budget or both).

**Not following SCPE tab directions**

All data points must be entered for each site. Refer to the document on the ARC-PA website (<http://www.arc-pa.org/wp-content/uploads/2018/04/SCPE-portal-directions-April-2018.pdf>) for more detailed instructions. The ARC-PA uses the information in this tab to assure the program has enough active sites with written affiliation agreements for its clinical cohort(s).

Please note that the Portal does allow a program to search for a particular SCPE site using the search box at the top of the list of SCPE sites (see red arrow below):



## Notes to Programs

### News & Meeting Outcomes from the Commission & ARC-PA staff

#### Program Fees Changing

At its March 2019 meeting, the Commission discussed several of its accreditation processes and developed a revised fee schedule in support of the work and resources required by the Commission to fulfill its mission and philosophy. For initial provisional accredited programs, the updated **initial provisional application** fee is \$30,000 (effective April 1, 2019).

Complete information about fees can be found on the ARC-PA website at:

<http://www.arc-pa.org/about/accreditation-fees/>

#### Executive Summary March 2019 Meeting

Acknowledge program personnel changes: **12 PD, 10 IPD, 9 MD, 2 IMD**

Action Taken On:

- 0 Continuing program applications
- 8 Provisional program applications
- 13 Provisional monitoring applications
- 9 Final Provisional application - Moving from provisional accreditation to

continuing

- 9 Focused probation visit – 4 are part of accreditation reviews
- 0 Expansion to a Distant Campus application
- 3 Program changes
- 4 Program reports due – 1 is part of probation review

Expedited Reviews – Total **45** reviews: **29** (report due), **16** (program change) **4**

Referred to full commission

**33** Program Informational Items

### **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. Any program with a PANCE first time pass rate percentage of 85% or less for the 2018 cohort must submit an analysis of PANCE performance to the ARC-PA **by July 1, 2019**.

Any year a program's PANCE pass rate for first time takers by cohort is 85% or less requires the program 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 basis for the report is the ARC-PA's Four Key Elements of Analysis which can be found in the [Data Analysis Resource](#) on the ARC-PA Resources web page. The report form is available on the **Resources** page of the ARC-PA website: <http://www.arc-pa.org/accreditation/resources/>

### **Clarification on Information Required for Appendix 17 of the Application**

Appendix 17 of the application is to include instructional objectives as required in the body of application, organized by and labeled with the standard they address.

The instructional objectives may come from any source: course syllabi, individual lectures or other documents.

The term *Instructional Objectives* is defined in the glossary of the Standard as “Statements that describe observable actions or behaviors the student will be able to demonstrate after completing a unit of instruction.” Requirements for instructional objectives are also described in standard B1.09 including the annotation.

**B1.09** For each didactic and clinical course, the program *must* define and publish *instructional objectives* that guide student acquisition of required *competencies*.

ANNOTATION: *Instructional objectives* stated in measurable terms allow assessment of student progress in developing the *competencies* required for entry into practice. They address learning expectations of students and the level of student performance required for success.

In addition to the instructional objectives being used, in part, as evidence of instruction required by the Standards, the instructional objectives may also be used by the site visitors and the commission as supporting evidence of the program’s compliance with other standards such as:

**B1.01** The curriculum *must* be consistent with the mission and *goals* of the program.

**B1.02** The curriculum *must* include core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care.

**B1.03** The curriculum *must* be of *sufficient* breadth and depth to prepare the student for the clinical practice of medicine.

**B1.09** For each didactic and clinical course, the program *must* define and publish *instructional objectives* that guide student acquisition of required *competencies*.

ANNOTATION: *Instructional objectives* stated in measurable terms allow assessment of student progress in developing the *competencies* required for entry into practice. They address learning expectations of students and the level of student performance required for success.

The instructions in the application require the program to create a composite document including all relevant instructional objectives. Since putting all of the instructional objectives into one document could create a huge document, it is recommended separately named documents or folders (clearly labeled by standard) be created. Each document must include only the relevant (as related to the standard) instructional objectives, supporting compliance with the standard. For example:

- Instructional objectives for anatomy (B2.02a) may come only from the program's anatomy course. The instructional objectives provided will not only provide evidence of instruction in anatomy but will also support compliance with B1.02, B1.03 and B1.09. The program may need to include lecture-specific instructional objectives to meet all of these standards and meet the definition of instructional objectives.
- Instructional objectives related to standard B2.08 may come from several courses. In that case, the program must create a composite document including only the relevant instructional objectives pulled from the various courses/ lectures/ presentations into a document labeled B2.08. Each instructional objective will be listed under the course # and name it comes from. These instructional objectives will be use in part, as evidence of compliance with B2.08 (including its annotation) but also in support of compliance with the other relevant B Standards.

Notice, the instructional objectives are used in part to demonstrate compliance with standards that require certain content to be included in the curriculum. On site the site visitors will also want to see other evidence of compliance the program may have, especially related to curricular content not clearly identified by instructional objectives alone.

**Please note:**

Providing copies of program course syllabi in the application of record **does not** negate the need for programs to append evidence of compliance in appendices as required throughout the application. (this includes Appendix 17). Neither the site visitors nor the commission will search through course syllabi to find evidence of compliance with the Standards.



Welcome

## **Welcome New Provisional Programs!**

**Creighton University**

Omaha, NE

**Frostburg State University**

Hagerstown, MD

**Gannon University**

Ruskin, FL

**Samford University**

Birmingham, AL

**The University of Tampa**

Tampa, FL

## New ARC-PA Staff

The ARC-PA would like to welcome the following new staff members who will be serving as part-time Accreditation Specialists. These Accreditation Specialists will be responsible for remote review of program documents prior to site visits and commission review and will also serve as site visitors.

**Renee Andreeff, Ed.D., PA-C**

**Rachel Carlson, EdD, MSBS, PA-C**

**DeShana Collett, PhD, PA-C**

**Wilton Kennedy, DHSc, PA-C**

In addition, the ARC-PA welcomes **Drew Ragan** as Director of the Information Technology. Mr. Ragan joined the staff on April 8, 2019. With over 17 years of IT experience, he will be leading our current team and the further development of technology within the organization.

## New ARC-PA Commissioners

The following individuals began their term as ARC-PA Commissioners on January 1, 2019:

**Donna Agnew, MSPAS, PA-C – Member At Large**

**Ralitsa Akins, MD, PhD – AMA Member**

**Jacqueline Barnett, DHSc, MSHS, PA-C – PAEA Member**

**Linda Barry, MD, MPH, FACS – ACS Member**

**Anthony Brenneman, MPAS, PA-C – PAEA Member**

**Darwin Brown, MPH, PA-C – Member At Large**

**Kenyon Railey, MD – AAFP Member**

**Brian Shulman, PhD, CCC-SLP, FASAHP, FNAP – Public Member**



**Question:**

**What is the difference between ARC-PA staff and the Commission?**

**Answer:** The ARC-PA staff are employees of the ARC-PA and work under the supervision of the Executive Director. The ARC-PA staff are tasked with the daily management of accreditation processes and review. This includes a wide variety of responsibilities such as portal management, data collection and analysis, management of applications and reports, and ongoing communication to PA programs and stakeholders. In addition, ARC-PA staff are responsible for the organization and management of the various workshops, conferences, and commission meetings. Accreditation Specialists and Assistant Directors complete reviews of applications and participate in site visits. Assistant Directors also work with Commissioners to finalize the letters that reflect the Commission's decisions which are sent to the program.

ARC-PA Commissioners are elected by the ARC-PA from a slate of nominees submitted by the ARC-PA collaborating organizations. Commissioners are volunteers who serve to address the accreditation business aspect of the ARC-PA. Commissioners chair and participate in various committees such as Standards, Self-Study, Finance, and the Executive Committee. In addition, they are responsible for participating in site visits, and reviewing program applications and reports. Commissioners meet three times a year to complete thorough accreditation reviews and collaboratively make decisions on program's accreditation status, citations and necessary follow-up.

## Upcoming Workshops & Presentations

### Accreditation & You Workshop

This workshop will provide an overview of the accreditation process including sessions designed to give participants the opportunity to ask questions and discuss the interpretation of individual Standards. Sessions will address the application and site visit, data collection and analysis over time for the self-study report and specific Standards cited most often in the 4th edition.

The Accreditation & You Workshop will be held at the Hilton Downtown Cleveland in Cleveland, Ohio. The workshop will begin at noon on Sunday July 21<sup>st</sup> and end at noon Tuesday July 23<sup>rd</sup>.

**Space is limited.** Priority will be given to first time registrants from programs scheduled for site visits in 2018-2019. Programs are limited to two attendees per program.

Registration ends on June 7, 2019.

Visit the [Workshops and Conferences](#) page for more information.



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**Please send comments or suggestions regarding the newsletter to:**

[newsletter@arc-pa.org](mailto:newsletter@arc-pa.org)