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March 2017
Program Change: Change in sponsorship (CCBC-Essex to Towson University), effective June 2017. The commission acknowledged the change. No further information requested.

March 2016
Program Change: Temporary increase in class size (additional 11 students), effective January 1, 2016. After the completion of cohorts entering in 2016 and 2017, approved entering class size returns to 36 students. The commission approved the temporary increase. No further information requested.

The commission acknowledged the report providing evidence of
- Updated SCPEs in the Portal. No further information requested.

September 2015
Report due October 26, 2015
- Update supervised clinical practice experiences [SCPEs] in Program Management Portal.

March 2014
The commission accepted the reports providing evidence of
- Updated SCPEs in the Portal.
- Succinct action plan with timeline for addressing standards. No further information requested.

September 2013
Adverse Action-Accreditation-Probation; A focused probation site visit will occur in advance of the September 2015 commission meeting. Maximum class size: 36. The program did not appeal the commission’s decision.
Report due November 1, 2013
- Update supervised clinical practice experiences [SCPEs] in Program Management Portal.
Due January 1, 2014 (Standards, 4th edition) -
- Succinct action plan with timeline for addressing standards identified below
Due June 1, 2015 (for focused probation visit) (Standards, 4th edition) -
- **Standard A1.01** (lacked evidence the responsibilities of the respective institutions for instruction and supervision of students are clearly described and documented in a manner signifying agreement by the involved institutions [Towson University and CCBC Essex]),
- **Standard A1.03c** (lacked evidence the sponsoring institution is responsible for complying with ARC-PA accreditation Standards and policies),
- **Standard A1.08** (lacked evidence that the sponsoring institution provides the program with the human resources necessary to operate the educational program and to fulfill obligations to matriculating and enrolled students),
• **Standard A3.19e** (lacked evidence that student files include documentation of summaries of any formal academic/behavioral disciplinary action taken against a student),

• **Standard B1.04** (lacked evidence the curriculum design reflects sequencing that enables students to develop the competencies necessary for current and evolving clinical practice),

• **Standards B3.03b-d** (lacked evidence supervised clinical practice experience provide sufficient patient exposure with patients seeking b) women’s health, c) surgical management and d) behavioral and mental health conditions to allow each student to meet program defined requirements),

• **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 C2.01a-f** (lacked evidence of a self-study report that documents a) the program process of ongoing self-assessment, 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, e) self-identified program strengths and areas in need of improvement and f) plans for addressing areas needing improvement).

**March 2012**
The commission **accepted the report** providing evidence of
• The summative process. No further information requested.

**September 2011**
The commission **accepted the report** addressing 3rd edition/4th edition

**NOTE:** The review was conducted as the ARC-PA was transitioning from the 3rd to 4th edition of the *Standards*. The citations listing reflects the 3rd edition of the *Standards* and the corresponding standard in the 4th edition.

• **Standards B1.06/B1.09** (provided evidence for each didactic and clinical course, the program provides a published syllabus that defines expectations and guides student acquisition of expected competencies),

• **Standards B7.03b and e/B3.03b and d** (provided evidence every student has supervised clinical practice experiences with patients seeking b) prenatal care and women’s health care and care for psychiatric/behavioral conditions),

• **Standard B7.04e** (provided evidence supervised clinical practice experiences are provided in a long-term care setting),

• **Standards C1.01d-e/C1.01** (provided evidence the program collects and analyzes d) student evaluations of individual didactic courses, clinical experiences, and faculty and graduate evaluations of curriculum and program effectiveness),

• **Standard C1.02** (provided evidence the program applies the results of ongoing program assessment to the curriculum and other dimensions of the program),
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- **Standards C2.01b4, b5 and b7/C2.01b** (provided evidence the self-study report documents b4) student evaluations of individual didactic courses, clinical experiences and faculty, b5) graduate evaluations of curriculum and program effectiveness and b7) the most recent five-year first time and aggregate graduate performance on the PANCE).
- Provided evidence for the use of PACKRAT.

Additional information (explanation of summative process) due December 31, 2011.

**September 2010**

**NOTE:** The review was conducted as the ARC-PA was transitioning from the 3rd to 4th edition of the *Standards*. The citations listing reflects the 3rd edition of the *Standards* and the corresponding standard in the 4th edition.

- **Standards B1.06/B1.09** (lacked evidence for each didactic and clinical course, the program provides a published syllabus that defines expectations and guides student acquisition of expected competencies),
- **Standards B7.03b and e/B3.03b and d** (lacked evidence every student has supervised clinical practice experiences with patients seeking b) prenatal care and women’s health care and care for psychiatric/behavioral conditions),
- **Standard B7.04e** (lacked evidence supervised clinical practice experiences are provided in a long-term care setting),
- **Standards C1.01d-e/C1.01** (lacked evidence the program collects and analyzes d) student evaluations of individual didactic courses, clinical experiences, and faculty and e) graduate evaluations of curriculum and program effectiveness),
- **Standard C1.02** (lacked evidence the program applies the results of ongoing program assessment to the curriculum and other dimensions of the program),
- **Standards C2.01b4, b5 and b7/C2.01b** (lacked evidence the self-study report documents b4) student evaluations of individual didactic courses, clinical experiences and faculty, b5) graduate evaluations of curriculum and program effectiveness and b7) the most recent five-year first time and aggregate graduate performance on the PANCE).
- Explanation of the use of PACKRAT.

**March 2009**
The commission **accepted the report** addressing 3rd edition No further information requested.

- **Standard A1.07c** (provided evidence the sponsoring institution assures that the program has the human resources needed to process admission applications),
- **Standard A2.23** (provided evidence the program has sufficient administrative and technical support staff),
- **Standard A3.03** (provided evidence announcements and advertising accurately reflect the program offered),
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- **Standard A3.07i** (provided evidence the program defines, publishes and makes readily available to prospective and enrolled students first time PANCE pass rates for the five most recent graduating classes),
- **Standard A3.13c** (provided evidence student files kept by the program include documentation of remediation),
- **Standard B1.06** (provided evidence the program provides a published syllabus that defines expectations and guides student acquisition of expected competencies for each didactic and clinical course),
- **Standard B7.04e** (provided evidence supervised clinical practice experiences are provided in a long-term care setting),
- **Standards C1.01a, c, e and g** (provided evidence the program collects and analyzes a) student attrition, deceleration, and remediation, c) student failure rates in individual courses and rotations, e) graduate evaluations of curriculum and program effectiveness and g) graduate performance on the PANCE) and
- **Standards C2.01a, b1, b3, b5, b7 and c** (provided evidence the self-study report documents
  - a) the program’s process of ongoing self-assessment,
  - b1) student attrition, deceleration and remediation,
  - b3) student failure rates in individual courses and rotations,
  - b5) graduate evaluations of curriculum and program effectiveness,
  - b7) graduate evaluations of curriculum and program effectiveness and
  - c) self-identified program strengths and areas in need of improvement).

March 2008
Report due January 9, 2009 (Standards, 3rd edition) -
- **Standard A1.07c** (lacked evidence the sponsoring institution assures that the program has the human resources needed to process admission applications),
- **Standard A2.23** (lacked evidence the program has sufficient administrative and technical support staff),
- **Standard A3.03** (lacked evidence announcements and advertising accurately reflect the program offered),
- **Standard A3.07i** (lacked evidence the program defines, publishes and makes readily available to prospective and enrolled students first time PANCE pass rates for the five most recent graduating classes),
- **Standard A3.13c** (lacked evidence student files kept by the program include documentation of remediation),
- **Standard B1.06** (lacked evidence the program provides a published syllabus that defines expectations and guides student acquisition of expected competencies for each didactic and clinical course),
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- **Standard B7.04e** (lacked evidence supervised clinical practice experiences are provided in a long-term care setting),
- **Standards C1.01a, c, e and g** (lacked evidence the program collects and analyzes a) student attrition, deceleration, and remediation, c) student failure rates in individual courses and rotations, e) graduate evaluations of curriculum and program effectiveness and g) graduate performance on the PANCE) and
- **Standards C2.01a, b1, b3, b5, b7 and c** (lacked evidence the self-study report documents
  - a) the program’s process of ongoing self-assessment,
  - b1) student attrition, deceleration and remediation,
  - b3) student failure rates in individual courses and rotations,
  - b5) graduate evaluations of curriculum and program effectiveness,
  - b7) graduate evaluations of curriculum and program effectiveness and
  - c) self-identified program strengths and areas in need of improvement).

**September 2003**
The commission **accepted the report** providing evidence of
- Clarification of the anatomy course. No further information requested.

**March 2003**
The commission **accepted the report** providing evidence of
- The transition to the master’s degree. Additional information (clarification on the anatomy course) due July 15, 2003.

**September 2002**
The commission **accepted the report** providing evidence of
- Learning objectives and the associated exams for pathophysiology and pediatrics and internal medicine clinical practicums. No further information requested.

**December 2001**
The commission **did not accept the report** addressing 1st/2nd edition
  - **Standard II B 2 b/B1.4** (lacked evidence learning objectives in all didactic and clinical courses guide student learning).
Additional information (learning objective and associated exams for pathophysiology and pediatrics and internal medicine clinical practicums) due July 15, 2002.

**March 2001**
Report due August 1, 2001 *(Standards, 1st/2nd edition)*

**NOTE:** The review was conducted as the ARC-PA was transitioning from the 1st to 2nd edition of the Standards. The citations listing reflects the 1st edition of the Standards and the corresponding standard in the 2nd edition.
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- **Standard II B 2 b/B1.4** (lacked evidence learning objectives in all didactic and clinical courses guide student learning).
  Due February 1, 2003
  - Update on the transition to master’s degree program.