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September 2019
The commission accepted the report providing evidence of
- Clarification of faculty FTE related to the class size change. No further information requested.

June 2019
Program Change: Change in class size (41 to 50), effective January 1, 2020. The commission approved the proposed change. No further information requested.

March 2018
Program Change: Request to decrease the amount of additional faculty support required due to decrease in temporary class size increase (41 to 44 [rather than 48]). The commission approved the request. The commission also acknowledged the update of the portal to reflect the addition of faculty.

July 2017
Program Change: Change in class size (temporary increase 41 to 48), effective January 1, 2018. The commission approved the one-time temporary increase to accommodate incoming students from another program. No further information requested. Program must update its Program Management Portal (addition of faculty) due December 1, 2017.

May 2016
The program was notified of a change in the accreditation process (time extended between regularly scheduled validation reviews from seven to ten years). Program’s next validation review changed from March 2021 to March 2024 due to this change.

September 2014
The commission accepted the report addressing 4th edition
- Standard A3.14b (provided evidence the program defines, publishes and makes readily available to enrolled and prospective students the program’s success in achieving its goals). No further information requested.

The commission accepted the report providing evidence of
- Report on class size discrepancy. No further information requested.

March 2014
Report due May 1, 2014 (Standards, 4th edition) -
- Standard A3.14b (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students the program’s success in achieving its goals).
- Report on class size discrepancy.
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September 2010
The commission accepted the report providing evidence of
- Analysis of data gathered on dismissals and decisions based on data and analysis. No further information requested.

September 2009
The commission accepted the report addressing 3rd edition
- **Standard A1.07b** (provided evidence the sponsoring institution assures that the program has the human resources needed to operate the program),
- **Standard A2.03** (provided evidence core faculty are sufficient in number to meet the academic needs of enrolled students),
- **Standard A3.03** (provided evidence announcements and advertising accurately reflect the program offered),
- **Standard A3.07c** (provided evidence the program defines, publishes and makes readily available to prospective and enrolled students policies regarding advanced placement),
- **Standards C1.01a and c** (provided evidence the program collects and analyzes a) student attrition, deceleration and remediation and c) student failure rates in individual courses and rotations) and
- **Standards C2.01b1 and b3** (provided evidence the self-study documents a) student attrition, deceleration and remediation and c) student failure rates in individual courses and rotations).

Additional information (analysis of data gathered on dismissals and decisions based on data and analysis) due June 30, 2010.

Program Change: Change in maximum aggregate number (78 to 108). The commission acknowledged the proposed change. No further information requested.

March 2009
Report due July 10, 2009 (Standards, 3rd edition) -
- **Standard A1.07b** (lacked evidence the sponsoring institution assures that the program has the human resources needed to operate the program),
- **Standard A2.03** (lacked evidence core faculty are sufficient in number to meet the academic needs of enrolled students),
- **Standard A3.03** (lacked evidence announcements and advertising accurately reflect the program offered),
- **Standard A3.07c** (lacked evidence the program defines, publishes and makes readily available to prospective and enrolled students policies regarding advanced placement),
- **Standards C1.01a and c** (lacked evidence the program collects and analyzes a) student attrition, deceleration and remediation and c) student failure rates in individual courses and rotations) and
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- **Standards C2.01b1 and b3** (lacked evidence the self-study documents a) student attrition, deceleration and remediation and c) student failure rates in individual courses and rotations).

September 2004
Program Change: Change in curriculum (baccalaureate to master’s). The commission acknowledged the proposed change. No further information requested.

March 2004
The commission acknowledged the report addressing 2nd edition
- **Standard D1.2** (provided evidence student health records are confidential). No further information requested.

September 2003
Report due January 15, 2004 (Standards, 2nd edition) -
- **Standard D1.2** (lacked evidence student health records are confidential).

September 2002
Program Change: Change in start of program (January rather than June) and Change in program length (23 to 27 months), effective January 2003. The commission approved the changes. No further information requested.

Program Change: Name change (Seton Hill College will become Seton Hill University), effective July 1, 2002.

March 2002
The commission responded to the program’s concern regarding compliance with standard A2.9 (program director should be assigned to the program on a full-time basis), noting the program was in compliance.

September-December 2001
The commission accepted the report providing evidence of
- The hiring of the half-time administrative assistant. No further information requested.

March 2001
The commission accepted the report addressing 1st edition
- **Standard I B 1 d** (provided evidence of an adequate number of clerical support staff available to program faculty),
- **Standard I B 3 c (1)** (provided evidence of an adequate supply of medical texts in the library),
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- **Standard I E** (provided evidence of a plan for the program to address continuous, systematic, formal self-evaluation),
- **Standard II B 1 c** (provided evidence of didactic education to address the skills needed for interpreting the medical literature),
- **Standard II B 2 a** (provided evidence of consistent objectives and measurable competencies) and
- **Standard II B 2 b** (provided evidence that all courses include learning objectives).

Report due when clerical staff is hired (no later than August 1, 2001).

**September 2000**
Report due January 15, 2001 (*Standards, 1st edition*) -
- **Standard I B 1 d** (lacked evidence of an adequate number of clerical support staff available to program faculty),
- **Standard I B 3 c (1)** (lacked evidence of an adequate supply of medical texts in the library),
- **Standard I E** (lacked evidence of a plan for the program to address continuous, systematic, formal self-evaluation),
- **Standard II B 1 c** (lacked evidence of didactic education to address the skills needed for interpreting the medical literature),
- **Standard II B 2 a** (lacked evidence of consistent objectives and measurable competencies) and
- **Standard II B 2 b** (lacked evidence that all courses include learning objectives).

**September 1998**
The commission accepted the report providing evidence of
- Hiring the second part-time PA. No further information requested.

**March 1998**
The commission acknowledged the report providing evidence of
- Program faculty and course syllabi.
Additional information (notification of hire of second part-time PA) due.

NOTE: The ARC-PA commission action information available begins in March 1998. Information from initial accreditation in 1997 by CAAHEP is not available.