Rosalind Franklin University of Medicine and Science
Accreditation History

First accredited: May 1993
Next review: March 2023
Maximum class size: 67
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June 2020
The commission acknowledged the report providing evidence of
- The proposed plan in response to COVID-19. No further information requested.

December 2019
Accreditation-Administrative Probation. The Annual Report was due December 15, 2019. It was not submitted until December 16, 2019. Administrative-Probation removed post receipt of annual report.

March 2019
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.

March 2018
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.

March 2017
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.

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 2020 to March 2023 due to this change.

March 2015
The commission acknowledged the report providing evidence of
- Corrected tabs in the Portal. No further information requested.

September 2014
The commission accepted the report addressing 4th edition
- Standards B3.03a-d (provided evidence of program defined requirements for 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). No further information requested on standards; however, report due October 15, 2014 (correct Personnel and SCPEs tabs in Program Management Portal).

September 2013
The commission accepted the report addressing 4th edition
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- **Standard A3.14c** (provided evidence of publication of the five-year, first time PANCE pass rate).
  No further information requested.

**March 2013**
Report due May 1, 2013 (*Standards, 4th edition*) -
- **Standard A3.14c** (lacked evidence of publication of the five-year, first time PANCE pass rate).
Due August 1, 2014 (*Standards, 4th edition*) -
- **Standards B3.03a-d** (lacked evidence of program defined requirements for 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).

**September 2009**
The commission accepted the report providing evidence of
- The plan for clinical experiences in long-term care and information on preceptors. No further information requested.

**April 2008**
Focused visit conducted.

**September 2008**
The commission accepted the report addressing 2nd edition
- **Standard B6.2g** (provided evidence every student has clinical experiences in psychiatry/behavioral medicine) and
- **Standard B6.3** (provided evidence clinical experiences occur in a long-term care setting).
Additional information (information on results of plan for clinical experiences in long-term care and information on preceptors) due July 10, 2009.

**March 2008**
The commission did not accept the report addressing 2nd edition
- **Standard B6.2g** (lacked evidence every student has clinical experiences in psychiatry/behavioral medicine) and
- **Standard B6.3** (lacked evidence clinical experiences occur in a long-term care setting).
Report (previously requested information) due July 11, 2008. Focused site visit to clarify information provided in report.

**September 2007**
The commission did not accept the report addressing 2nd edition
- **Standard B6.2g** (lacked evidence every student has clinical experiences in psychiatry/behavioral medicine) and
- **Standard B6.3** (lacked evidence clinical experiences are provided in a long-term care setting).
Report (previously requested information) due January 11, 2008.
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September 2006 (Rosalind Franklin University of Medicine and Science) –
Accreditation-Continued; Next Comprehensive Evaluation: September 2012. Maximum Student Capacity: 120.
Report due July 12, 2007 (Standards, 2nd edition) -
- **Standard B6.2g** (lacked evidence every student has clinical experiences in psychiatry/behavioral medicine) and
- **Standard B6.3** (lacked evidence clinical experiences are provided in a long-term care setting).

September 2003
Informational Item: Permanent dean identified in June 2003.

March 2003
The commission **accepted the report** providing evidence of
- Long-term care experiences and the summative evaluation. No further information requested.

September 2002
The commission **acknowledged the report** providing evidence of

March 2002
The commission **accepted the report** addressing 2nd edition
- **Standard A5.8** (provided evidence of policies by which students may work within the program or institution, while enrolled in the program),
- **Standard B1.4** (provided evidence of measurable instructional objectives and expected student competencies in the syllabus for Gross Anatomy 2000),
- **Standard B6.3** (provided evidence of clinical experiences in a long-term care setting) and
- **Standard C5.5** (provided evidence of a summative evaluation of each student prior to program completion to assure that students meet defined program objectives for knowledge, skills and attitudes that demonstrate suitability for practice).

Additional information (plan for clinical experiences in long-term care and progress report for summative evaluation) due July 19, 2002.

December 2001 (Finch University of Health Sciences/The Chicago Medical School)
Report due February 1, 2002 (Standards, 2nd edition) -
- **Standard A5.8** (lacked evidence of policies by which students may work within the program or institution, while enrolled in the program),
- **Standard B1.4** (lacked evidence of measurable instructional objectives and expected student competencies in the syllabus for Gross Anatomy 2000),
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- **Standard B6.3** (lacked evidence of clinical experiences in a long-term care setting) and
- **Standard C5.5** (lacked evidence of a summative evaluation of each student prior to program completion to assure that students meet defined program objectives for knowledge, skills and attitudes that demonstrate suitability for practice).

NOTE: Commission action information available begins in December 2001. Information from initial accreditation in 1993 by CAHEA and subsequent accrediting organizations is not available.