Sacred Heart University
Accreditation History

First accredited: March 2016
Next review: March 2021
Maximum class size: 42

June 2020
The commission acknowledged the report providing evidence of
- The proposed plan in response to COVID-19. No further information requested.

The commission accepted the report providing evidence of
- Summary of July 2019 meeting including PANCE analysis and recommendations for improvement. No further information requested.

March 2020
The commission accepted the report providing evidence of
- Learning outcomes addressing preventive, emergent, acute and chronic care as well as care across the life span, women’s health, surgical management and behavioral and mental health, and the methods to determine each student has met the learning outcomes. No further information requested.

The program’s PANCE pass rate percentage was 85% or less for its 2018 cohort. The program submitted the required analysis of PANCE performance. The commission accepted the report. Additional reports (summary of July 2019 meeting including analysis and recommendations for improvement) due January 6 and (analysis of class of 2019 PANCE performance) due July 13, 2020.

September 2019
The commission did not accept the report addressing 4th edition
- Standard B2.12 (lacked evidence the curriculum included instruction in disease surveillance and reporting),
- Standard B3.02 (lacked evidence of defined learning outcomes for students in supervised clinical practice experiences [SCPEs] with preventive, emergent, acute and chronic patient encounters),
- Standards B3.03a-d (lacked evidence that SCPEs enabled all students to meet the program’s learning outcomes for patients seeking a) medical care across the life span, b) women’s health, c) surgical management and d) behavioral and mental health conditions) and
- Standard C1.01 (lacked evidence of implementation of an ongoing program self-assessment process which documented program effectiveness and fostered program improvement).

Additional information (learning outcomes addressing preventive, emergent, acute and chronic care as well as care across the life span, women’s health, surgical management and behavioral and mental health, plus the methods to determine each student has met the learning outcomes) due September 30, 2019.

March 2019 (following Provisional Monitoring review)
Accreditation-Provisional; Next Comprehensive Evaluation: March 2021 (Final Provisional). The program is approved for up to 42 students in the third class.
Report due June 12, 2019 (Standards, 4th edition) -
- Standard B2.12 (lacked evidence the curriculum included instruction in disease surveillance and reporting),
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- **Standard B3.02** (lacked evidence of defined learning outcomes for students in supervised clinical practice experiences [SCPEs] with preventive, emergent, acute and chronic patient encounters),
- **Standards B3.03a-d** (lacked evidence that SCPEs enabled all students to meet the program’s learning outcomes for patients seeking a) medical care across the life span, b) women’s health, c) surgical management and d) behavioral and mental health conditions) and
- **Standard C1.01** (lacked evidence of implementation of an ongoing program self-assessment process which documented program effectiveness and fostered program improvement).

March 2016
Accreditation-Provisional; Next Comprehensive Evaluation: March 2019 (Provisional Monitoring). The program is approved for up to 28 students in the first class of students, 34 in the second class and 42 in the third class. The commission noted zero areas of noncompliance with the *Standards*. 