George Washington University
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Next review: September 2023
Maximum class size: 70
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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.

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 September 2020 to September 2023 due to this change.

March 2014
Accreditation-Administrative Probation. The Annual Report was due December 31, 2013. It was not submitted until January 3, 2014. Administrative-Probation removed post receipt of annual report.

The commission accepted the report addressing 4th edition
• Standard A3.13 (provided evidence the program announcements and advertising accurately reflect the program offered). No further information requested.

September 2013
Accreditation-Continued; Next Comprehensive Evaluation: September 2020. The program is approved to accept up to a class size of 70.
Report due November 15, 2013 (Standards, 4th edition) -
• Standard A3.13 (lacked evidence the program announcements and advertising accurately reflect the program offered).

November 2011
At the request of the program, next Comprehensive Evaluation delayed until September 2013.

March 2009
The commission accepted the report addressing 3rd edition
• Standard A3.13e (provided evidence student files include documentation that the student has met institution and program health screening and immunization requirements),
• Standard B1.06 (provided evidence that syllabi for didactic courses define expectations and guide student acquisition of expected competencies),
• Standard B7.02 (provided evidence that all sites used for supervised clinical practice have been evaluated),
• Standard B7.04e (provided evidence that supervised clinical practice experiences are provided in a long-term care setting),
• Standard C4.01 (provided evidence that there are consistent and effective processes for the initial and ongoing evaluation of all sites and preceptors used for students’ clinical practice experiences),
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- **Standard C4.02** (provided evidence the program applies comparable evaluation processes to clinical sites regardless of geographic location) and
- **Standard C4.03** (provided evidence the program documents that all sites meet the program's prescribed expectations for student learning and performance evaluation measures). No further information requested.

**September 2008**
The commission **accepted the report** providing evidence of
- Student health screening and documentation of clinical site evaluation. No further information requested.

**March 2008**
Accreditation-Continued; Next Comprehensive Evaluation: September 2012. The program is approved for up to 122 students.
Report due July 11, 2008 regarding
- Student health screening and documentation of clinical site evaluation and
Due January 9, 2009 (Standards, 3rd edition) -
  - **Standard A3.13e** (lacked evidence student files include documentation that the student has met institution and program health screening and immunization requirements),
  - **Standard B1.06** (lacked evidence that syllabi for didactic courses define expectations and guide student acquisition of expected competencies),
  - **Standard B7.02** (lacked evidence that all sites used for supervised clinical practice have been evaluated),
  - **Standard B7.04e** (lacked evidence that supervised clinical practice experiences are provided in a long-term care setting),
  - **Standard C4.01** (lacked evidence that there are consistent and effective processes for the initial and ongoing evaluation of all sites and preceptors used for students’ clinical practice experiences),
  - **Standard C4.02** (lacked evidence the program applies comparable evaluation processes to clinical sites regardless of geographic location) and
  - **Standard C4.03** (lacked evidence the program documents that all sites meet the program's prescribed expectations for student learning and performance evaluation measures).

**December 2001**
The commission **accepted the report** providing evidence of
- List of core program faculty and
The commission **accepted the report** addressing 1st edition/2nd edition
  - **Standards I C 1/A5.17** (provided evidence of technical standards being given to students upon inquiry into the program),
  - **Standards I C 5/D3.1** (provided evidence of students being clearly identified as students within the program) and
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- **Standards I E 1 e/C2.2d** (provided evidence students evaluate program effectiveness).
  No further information requested.

March 2001
Accreditation-Continued; Next Comprehensive Evaluation: March 2008. The program is approved for up to 108 students.
Report due August 1, 2001 (**Standards**, 1\textsuperscript{st} edition/2\textsuperscript{nd} edition) -
  - List of core program faculty and
  - **Standards I C 1/A5.17** (lacked evidence of technical standards being provided to students upon inquiry into the program),
  - **Standards I C 5/D3.1** (lacked evidence of students being clearly identified as students within the program) and
  - **Standards I E 1 e/C2.2d** (lacked evidence students evaluate program effectiveness).

March 1998
Accreditation-Continued; Next Comprehensive Evaluation: March 2001. The commission noted zero areas of noncompliance with the **Standards**.

NOTE: The ARC-PA commission action information available begins in March 1998. Information from initial accreditation in 1972 by the American Medical Association Council on Medical Education and subsequent accrediting organizations is not available.