Baylor College of Medicine
Accreditation History

First accredited: February 1973
Next review: June 2029
Maximum class size: 40

September 2020
Program Change: Change in graduation requirements (136 to 128 credits), effective May 26, 2020. The commission **accepted the report** providing additional information. The commission **acknowledged the proposed change** in credits awarded. No further information requested.

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.

Program Change: Change in graduation requirements (136 to 128 credits), effective May 26, 2020. Additional information (learning outcomes for Physical Medicine and Rehabilitation and narrative regarding length of program) due July 27, 2020.

June 2020
The commission **acknowledged the report** providing evidence of

- The proposed plan in response to COVID-19. No further information requested.

March 2020
The commission **accepted the report** addressing 4th edition

- ***Standard A1.03g*** (provided evidence the sponsoring institution is responsible for addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs),
- ***Standard A3.14h*** (provided evidence the program defines, publishes and makes readily available to enrolled and prospective students policies about student employment while enrolled in the program),
- ***Standard B3.02*** (provided evidence that the program determines supervised clinical practice experiences enable each student to meet the program's learning outcomes),
- ***Standards B3.03a-b*** (provided evidence of program defined requirements and methods to determine students, after SCPEs with patients seeking a) medical care across the life span and b) women's health),
- ***Standards B3.06a-b*** (provided evidence of SCPEs with a) physicians specialty board certified in their area of instruction and b) PAs teamed with physicians who are specialty board certified in their area of instruction),
- ***Standard C3.04*** (provided evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student is prepared to enter clinical practice). No further information requested.

June 2019
Accreditation-Continued; Next Comprehensive Evaluation: June 2029. Maximum Student Class Size: 40. Report due September 9, 2019 (*Standards*, 4th edition) -

- ***Standard A1.03g*** (lacked evidence the sponsoring institution is responsible for addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs),

- ***Standard A3.14h*** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students policies about student employment while enrolled in the program),
- ***Standard B3.02*** (lacked evidence that the program determines supervised clinical practice experiences enable each student to meet the program's learning outcomes),
- ***Standards B3.03a-b*** (lacked evidence of program defined requirements and methods to determine students, after SCPEs with patients seeking a) medical care across the life span and b) women's health),
- ***Standards B3.06a-b*** (lacked evidence of SCPEs with a) physicians specialty board certified in their area of instruction and b) PAs teamed with physicians who are specialty board certified in their area of instruction),
- ***Standard C3.04*** (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student is prepared to enter clinical practice).

Due August 20, 2021 (*Standards*, 4th edition) -

- ***Standards C2.01b-e***, modified Self-Study Report (lacked evidence of a self-study report that documents 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 and e) self-identified program strengths and areas in need of improvement).

<u>April 2016</u>
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 2018 to September 2019 due to this change.

<u>March 2014</u>
Accreditation-Continued; Administrative Probation removed post receipt of annual report on January 4, 2014.

<u>December 2013</u>
Accreditation-Administrative Probation; The program did not submit the Program Required Annual Report to the ARC-PA by December 31, 2013.

<u>September 2012</u>
The commission **accepted the report** providing evidence of

- Defined parameters used to meet published goals. No further information requested.

<u>March 2012</u>
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),
- ***Standard A3.15e*** (provided evidence the program defines, publishes and makes readily available to prospective students any required technical standards for enrollment),

- ***Standard B2.13*** (provided evidence the program curriculum includes instruction in patient safety) and
- ***Standard C3.04*** (provided evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student is prepared to enter clinical practice).

Additional information (defined parameters used to meet published goals) by July 1, 2012.

<u>September 2011</u>
Accreditation-Continued; Next Comprehensive Evaluation: September 2018. The program is approved for up to 120 students.
Report due December 31, 2011 (*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),
- ***Standard A3.15e*** (lacked evidence the program defines, publishes and makes readily available to prospective students any required technical standards for enrollment),
- ***Standard B2.13*** (lacked evidence the program curriculum includes instruction in patient safety) and
- ***Standard C3.04*** (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student is prepared to enter clinical practice).

<u>March 2006</u>
The commission **acknowledged the report** addressing 2nd edition

- ***Standard A2.11*** (provided evidence the program director supervises the medical director in all activities that directly relate to the PA program),
- ***Standard C2.2b*** (provided evidence of critical analysis of faculty attrition),
- ***Standards*** **C4.1a, d and g** (provided evidence the self-study report documents a) process and results of continuous evaluation, d) modifications that occurred as a result of self-evaluation and g) compliance with the *Standards*),
- ***Standard C5.5*** (provided evidence a summative evaluation of each student is completed and documented prior to program completion to assure that students meet defined program objectives for the knowledge, skills, and attitudes that demonstrate suitability for practice) and
- ***Standard D1.1*** (provided evidence in program files of documentation verifying that each student has completed health screening and meets program health requirements). No further information requested.

<u>September 2005</u>
Accreditation-Continued; Next Comprehensive Evaluation: September 2010.
Report due January 13, 2006 (*Standards*, 2nd edition) -

- ***Standard A2.11*** (lacked evidence the program director supervises the medical director in all activities that directly relate to the PA program),
- ***Standard C2.2b*** (lacked evidence of critical analysis of faculty attrition),

- ***Standards* C4.1a, d and g** (lacked evidence the self-study report documents a) process and results of continuous evaluation, d) modifications that occurred as a result of self-evaluation and g) compliance with the *Standards*),
- ***Standard C5.5*** (lacked evidence a summative evaluation of each student is completed and documented prior to program completion to assure that students meet defined program objectives for the knowledge, skills, and attitudes that demonstrate suitability for practice) and
- ***Standard D1.1*** (lacked evidence in program files of documentation verifying that each student has completed health screening and meets program health requirements).

September 2002
Personnel Change: New program director appointed, effective August 15, 2002.

March 2001
The commission **accepted the report** addressing 1st edition

- ***Standard I B 1 c(3)*** (provided evidence there is sufficient core faculty to provide the students with adequate attention, instruction, and didactic coordination necessary to acquire the knowledge and competence needed for entry to the profession) and
- ***Standard I B 3 a*** (provided evidence there is adequate laboratory space for student practice of physical diagnosis). No further information requested.

September 2000
Accreditation-Continued; Next Comprehensive Evaluation: September 2005. The program is approved for up to 90 students.
Report due January 15, 2001 (*Standards*, 1st edition) -

- ***Standard I B 1 c(3)*** (lacked evidence there is sufficient core faculty to provide the students with adequate attention, instruction, and didactic coordination necessary to acquire the knowledge and competence needed for entry to the profession) and
- ***Standard I B 3 a*** (lacked evidence there is adequate laboratory space for student practice of physical diagnosis).

NOTE: The ARC-PA commission action information available begins in September 2000. Information from initial accreditation in 1973 by the American Medical Association Council on Medical Education and subsequent accrediting organizations is not available.