Lake Erie College Accreditation History

First accredited: September 2013 Next review: September 2028 Maximum class size: 26

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September 2020

The commission accepted the report addressing 4th edition

• **Standard C2.01c** (provided evidence of a self-study report that faculty evaluation of the curricular and administrative aspects of the program). No further information requested.

June 2020

The commission acknowledged the report providing evidence of

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

September 2018 (following Final Provisional review)

Accreditation-Continued; Next Comprehensive Evaluation: September 2028. Maximum class size: 26. Report due June 15, 2020 (*Standards*, 4th edition) -

• **Standard C2.01c** (lacked evidence of a self-study report that faculty evaluation of the curricular and administrative aspects of the program).

September 2017

The commission accepted the report addressing 4th edition

• **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.

The commission accepted the report providing evidence of

• Clarification from faculty senate minutes. No further information requested.

March 2017

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

- **Standard A2.04** (provided evidence principal faculty have academic appointments and privileges comparable to other faculty with similar academic responsibilities in the institution),
- **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 B1.05** (provided evidence of the curriculum including instruction in intellectual honesty and appropriate academic and professional conduct),
- **Standard B2.12** (provided evidence the program curriculum includes instruction in the prevention of disease and maintenance of population health or participation in disease surveillance, reporting and intervention) and
- **Standard B3.07d** (provided evidence of supervised clinical practice experiences with preceptors practicing in pediatrics).

Additional information (clarification of faculty senate minutes) due May 1, 2017.

<u>September-November 2016 (following Provisional Monitoring review)</u>

Adverse Action-Accreditation-Probation; Next Comprehensive Review: September 2018 (Final Provisional). The program is approved to accept up to 26 students per class. The program appealed the

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commission's decision. The Reconsideration Review Panel upheld the accreditation status of Accreditation-Probation.

Report due December 31, 2016 (Standards, 4th edition) -

- **Standard A2.04** (lacked evidence principal faculty have academic appointments and privileges comparable to other faculty with similar academic responsibilities in the institution),
- **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 B1.05** (lacked evidence of the curriculum including instruction in intellectual honesty and appropriate academic and professional conduct),
- Standard B2.12 (lacked evidence the program curriculum includes instruction in the prevention
 of disease and maintenance of population health or participation in disease surveillance,
 reporting and intervention) and
- **Standard B3.07d** (lacked evidence of supervised clinical practice experiences with preceptors practicing in pediatrics).

Due April 30, 2017 (Standards, 4th edition) -

• **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 May 5, 2018 (Standards, 4th edition) -

- **Standard C1.01** (lacked evidence of an ongoing self-assessment process designed to document program effectiveness and foster program improvement) and
- **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).

September 2013

Accreditation-Provisional; Next Comprehensive Evaluation: September 2016 (Provisional Monitoring). The program is approved for up to 24 students in the first class of students, 26 in the second class and 26 in the third class.

No report due (Standards, 4th edition) -

- **Standard A3.15a** (lacked evidence at the time of the site visit that the program publishes and makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups; corrected subsequent to the visit).
- **Standard B1.09** (lacked evidence at the time of the site visit that for each didactic course, the program publishes instructional objectives that guide student acquisition of required competencies; corrected subsequent to the visit).

The program was previously accredited from March 1977 to July 1987. No further information available.