University of North Texas Health Science Center – Ft. Worth
Accreditation History

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Maximum class size: 75
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March 2021
The commission **acknowledged the report** providing evidence of
- Update regarding changes in response to COVID-19. No further information requested.

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

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

September 2017
Program Change: Change in length of program (124 to 120 credits, 34 to 30 months and clinical phase 21 to 17 months), effective August 1, 2019. The commission **acknowledged the proposed changes**. 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 September 2021 to September 2024 due to this change.

March 2016
Program Change: Change in graduation requirements (136 to 133 credits), effective May 16, 2016. The commission **acknowledged the proposed change**. No further information requested.

March 2015
The commission **accepted the report** addressing 4th edition
- **Standard B3.02** (provided evidence that SCPEs enable students to meet program expectations and acquire competencies needed for entry into clinical practice). No further information requested.

The commission **acknowledged the report** providing evidence of
- Corrected SCPEs in the Portal. No further information requested.

The commission **acknowledged the report** providing evidence of
- Updated website. No further information requested.
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September 2014
Report due October 1, 2014
- Update accreditation statement and PANCE Pass Rate Summary Report on website.
Due November 14, 2014
- Correct supervised clinical practice experiences (SCPEs) in the Program Management Portal.
Due January 15, 2015 (Standards, 4th edition) -
  - **Standard B3.02** (lacked evidence that SCPEs enable students to meet program expectations and acquire competencies needed for entry into clinical practice).

March 2013
Program Change: Change in maximum student capacity (210 to 225), effective July 2015. The commission **approved the proposed change**. No further information requested.

September 2011
The commission **accepted the report** providing evidence of
- Clinical sites No further information requested.

September 2010
The commission **accepted the report** providing evidence of
- Clinical sites in pediatrics, psychiatry and ob/gyn. Additional information (update on securing clinical sites) due July 1, 2011.

September 2009
Program Change: Change in maximum student capacity (120 to 210), effective July 2010. The commission **acknowledged the proposed change**. Additional information (clinical sites in pediatrics, psychiatry and ob/gyn) due July 1, 2010.

September 2008
The commission **accepted the report** addressing 3rd edition
- **Standard B7.03d** (provided evidence supervised clinical practice experience is provided in long-term care settings). No further information requested.

September 2007
Accreditation-Continued; Next Comprehensive Evaluation: September 2014. Maximum Student Capacity: 120.
Report due July 11, 2008 (Standards, 3rd edition) -
- **Standard B7.03d** (lacked evidence supervised clinical practice experience is provided in long-term care settings).
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September 2003
The commission accepted the report addressing 2nd edition

- **Standards C2.2a-d, g** (provided evidence the self-study report includes critical analysis of
  - a) student attrition, deceleration, and remediation,
  - b) faculty attrition,
  - c) student failure rates in individual courses and rotations,
  - d) student evaluations of individual didactic courses, clinical experiences, and faculty and
  - g) aggregate student performance on the NCCPA exam),

- **Standard C4.1b** (provided evidence the self-study report documents analysis of outcome data collected in Appendix 1) and

- **Standard C5.5a** (provided evidence the summative evaluation of each student is completed and documented prior to program completion, to assure that students have met defined program objectives for the knowledge, skills and attitudes that demonstrated suitability for practice). No further information requested.

Personnel Change: Interim medical director appointed.

September 2002
Report due July 15, 2003 (Standards, 2nd edition) -

- **Standards C2.2a-d, g** (lacked evidence the self-study report includes critical analysis of
  - a) student attrition, deceleration, and remediation,
  - b) faculty attrition,
  - c) student failure rates in individual courses and rotations,
  - d) student evaluations of individual didactic courses, clinical experiences, and faculty and
  - g) aggregate student performance on the NCCPA exam),

- **Standard C4.1b** (lacked evidence the self-study report documents analysis of outcome data collected in Appendix 1) and

- **Standard C5.5a** (lacked evidence the summative evaluation of each student is completed and documented prior to program completion, to assure that students have met defined program objectives for the knowledge, skills and attitudes that demonstrated suitability for practice).

March 2001
The commission accepted the report providing evidence of

- Admission prerequisites and syllabi. No further information requested.
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September 2000
Program Change: Change in degree awarded (baccalaureate to master’s) and Increase program length (27 to 34 months), effective August 2000. The commission acknowledged the proposed changes. Additional information (admission prerequisites and syllabi for rearranged and new courses) due January 15, 2001.

March 2000
The commission accepted the report addressing 1st edition
- **Standard I D 1 f** (provided evidence the program publishes and makes readily available to all concerned policies and processes by which students may perform service work while enrolled) and
- **Standard I E 1** (provided evidence the program routinely secures sufficient qualitative and quantitative information regarding program graduate outcomes). No further information requested.

September 1999
Report due February 1, 2000 (Standards, 1st edition) -
- **Standard I D 1 f** (lacked evidence the program publishes and makes readily available to all concerned policies and processes by which students may perform service work while enrolled) and
- **Standard I E 1** (lacked evidence the program routinely secures sufficient qualitative and quantitative information regarding program graduate outcomes).

NOTE: The ARC-PA commission action information available begins in September 1999. Information from initial accreditation in 1997 by CAAHEP is not available.