Bethel University
Accreditation History

First accredited: March 2008
Next review: March 2024
Maximum class size: 50
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June 2021
Program Change: Change in class size (one-time temporary increase from 50 to 51 students for year-one cohort), effective May 10, 2021. The commission approved the proposed change. 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.

July 2017
SACSCOC removed the institution from probation. No further information requested.

December 2016
The program notified the commission of SACSCOC’s December 2016 action in which the institution was continued in accreditation for good cause and placed on probation for six months.

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 March 2021 to March 2024 due to this change.

March 2016
The commission acknowledged the notification of the University’s Warning status with the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC). Updates due with any further changes in status.

March 2014
Accreditation-Continued; Next Comprehensive Evaluation: March 2021. Maximum class size: 50. The commission noted zero areas of noncompliance with the Standards.

September 2013
The commission accepted the report providing evidence of
- Clarification of maximum student capacity, budget and faculty. No further information requested.

March 2013
Program Change: Change in graduation requirements (149 to 147 credits), effective January 2013. The commission acknowledged the proposed change. Additional information (clarification of maximum student capacity, budget and faculty) due July 1, 2013.

September 2011
The commission accepted the report addressing 3rd/4th edition
Bethel University
Accreditation History

First accredited: March 2008
Next review: March 2024
Maximum class size: 50

NOTE: The review was conducted as the ARC-PA was transitioning from the 3rd to 4th edition of the Standards. The citations listing reflects the 3rd edition of the Standards and the corresponding standard in the 4th edition.

- **Standards B1.02/B1.03** (provided evidence the curriculum is of sufficient breadth and depth to prepare the student for the clinical practice of medicine) and
- **Standards B6.03b/B2.17** (provided evidence the program provides instruction on current trends of the PA profession). No further information requested.

Program Change: Change in maximum student capacity (90 to 150), effective January 2014. The commission acknowledged the proposed change. No further information requested.

March 2011
Report due July 1, 2011 (Standards, 3rd/4th edition) -

NOTE: The review was conducted as the ARC-PA was transitioning from the 3rd to 4th edition of the Standards. The citations listing reflects the 3rd edition of the Standards and the corresponding standard in the 4th edition.

- **Standards B1.02/B1.03** (lacked evidence the curriculum is of sufficient breadth and depth to prepare the student for the clinical practice of medicine) and
- **Standards B6.03b/B2.17** (lacked evidence the program provides instruction on current trends of the PA profession).

September 2010
Program Change: Change in graduation requirements (76 to 80 credits), effective January 2010. The commission acknowledged the proposed change. No further information requested.

April 2008
Accreditation-Provisional; Next Comprehensive Evaluation: March 2011. Maximum Student Capacity: 90. The commission noted zero areas of noncompliance with the Standards.

The commission accepted the report addressing 3rd edition

- **Standard E1.04** (provided evidence there is a qualified program director responsible for the development of the program). No further information requested.

March 2008
Defer Accreditation Action; The commission found the program to be in noncompliance with Standards, 3rd edition, **Standard E1.04** (lacked evidence there is a qualified program director responsible for the development of the program). Report due April 11, 2008.

The program was accredited from March 2001 through December 2006.
Bethel University
Accreditation History

First accredited: March 2008
Next review: March 2024
Maximum class size: 50

September-December 2006
Adverse Action-Accreditation-Withdrawn. Action based on noncompliance with Standards, 2nd edition

- **Standard A2.1** (lacked evidence the program has effective leadership and management),
- **Standard A2.5** (lacked evidence the core program faculty includes, at a minimum, two faculty positions for individuals currently certified as PAs),
- **Standard A2.10** (lacked evidence the program director is knowledgeable about the accreditation process and responsible for the organization, administration, continuous review and analysis, planning, and development of the program),
- **Standard A3.1** (lacked evidence financial resources to operate an educational program are sufficient to fulfill obligations to matriculating and enrolled students)
- **Standard A4.1** (lacked evidence classrooms and laboratories have sufficient seating to accommodate the class size),
- **Standard B1.2** (lacked evidence the curriculum design reflects learning experiences and sequencing that enable students to develop the clinical competence necessary for practice),
- **Standard B1.4** (lacked evidence for each didactic and clinical course, the program provides a clearly written course syllabus that includes measurable instructional objectives and expected student competencies),
- **Standard B1.5** (lacked evidence the program orients instructional faculty and preceptors to the specific educational competencies expected of PA students),
- **Standards B3.1a-f** (lacked evidence the program provides instruction in a) personality development, b) child development, c) normative responses to stress, d) psychosomatic manifestations of illness and injury, e) sexuality and f) responses to death and dying),
- **Standard B3.2** (lacked evidence the program provides instruction in basic counseling skills),
- **Standards B3.3a-d** (lacked evidence the program provides instruction in the counseling of patients regarding a) issues of health care management, b) normal growth and development, c) family planning and d) emotional problems of daily living),
- **Standard B3.4** (lacked evidence the program provides instruction in advance directives and end of life decisions),
- **Standard B3.5** (lacked evidence the program provides instruction on the influence of multicultural issues and their impact on the delivery of patient care),
- **Standards B4.1a-b and d** (lacked evidence the program provides instruction on a) the impact of socioeconomic issues affecting health care, b) health care delivery systems and d) quality assurance and risk management in medical care),
- **Standards B6.2c-e, g** (lacked evidence the program documents that every student has clinical experiences in c) pediatrics, d) prenatal care and gynecology, e) general surgery and g) psychiatry/behavioral medicine),
- **Standard B7.2** (lacked evidence the program provides an historical perspective of the PA profession),
• **Standards B7.4b and e** (lacked evidence instruction includes content relating to b) PA program accreditation and e) credentialing),

• **Standard C1.1** (lacked evidence the program has a formal self-evaluation process),

• **Standard C3.1** (lacked evidence results of ongoing program evaluation are reflected in the curriculum and other dimensions of the program),

• **Standards C4.1b, f and g** (lacked evidence the self-study report documents b) outcome data analysis, f) response to the last accreditation citations and g) compliance with the Standards) and

• **Standard C5.2** (lacked evidence objective evaluation methods are equitable and include content related to the objectives and competencies described in the curriculum for both didactic and supervised clinical education components).

The program requested reconsideration of the commission’s decision. The Appeal Review Panel upheld the commission’s decision. The program originally requested a Formal Appeal. Request withdrawn by the program in January 2007. The action of the commission to withdraw accreditation was effective December 1, 2006.

**March 2004**

The commission **acknowledged the report** addressing 2nd edition

• **Standard A2.16** (provided evidence there are sufficient faculty and instructors to provide students with the necessary attention, instruction and supervised practice experience to acquire the knowledge and competence needed for entry into the profession) and

• **Standard A4.4** (provided evidence the program facilities include meeting space for faculty meetings, program committees, and any other meeting space relevant to the program). No further information requested.

**September 2003**


Report due January 15, 2004 (*Standards, 2nd edition*) -

• **Standard A2.16** (lacked evidence there are sufficient faculty and instructors to provide students with the necessary attention, instruction and supervised practice experience to acquire the knowledge and competence needed for entry into the profession) and

• **Standard A4.4** (lacked evidence the program facilities include meeting space for faculty meetings, program committees, and any other meeting space relevant to the program).

**March 2002**

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

• The name and CV of the new clinical coordinator. No further information requested.

**September 2001**

The commission **accepted the report** addressing 1st/2nd edition
NOTE: The review was conducted as the ARC-PA was transitioning from the 1\textsuperscript{st} to 2\textsuperscript{nd} edition of the *Standards*. The citations listing reflects the 1\textsuperscript{st} edition of the *Standards* and the corresponding standard in the 2\textsuperscript{nd} edition.

- **Standards I B 1 c (3)/A2.16** (provided evidence the number of faculty is sufficient to provide students with adequate attention, instruction, and supervised practice),
- **Standards I B 3 b/A4.8** (provided evidence teaching equipment and related resources are adequate to meet the needs of the students),
- **Standards II B 1 c/B5.1** (provided evidence the clinical medicine component in clinical didactic instruction provides adequate time to present topics thoroughly) and
- **Standards I D 1 b/A5.2** (provided evidence admissions and college literature include statements of non-discrimination with regard to sexual orientation).

Additional information (name and CV of the clinical coordinator) due January 2002.

March 2001
Report due August 1, 2001 (*Standards, 1\textsuperscript{st}/2\textsuperscript{nd} edition*) –

NOTE: The review was conducted as the ARC-PA was transitioning from the 1\textsuperscript{st} to 2\textsuperscript{nd} edition of the *Standards*. The citations listing reflects the 1\textsuperscript{st} edition of the *Standards* and the corresponding standard in the 2\textsuperscript{nd} edition.

- **Standards I B 1 c (3)/A2.16** (lacked evidence the number of faculty is sufficient to provide students with adequate attention, instruction, and supervised practice),
- **Standards I B 3 b/A4.8** (lacked evidence teaching equipment and related resources are adequate to meet the needs of the students),
- **Standards II B 1 c/B5.1** (lacked evidence the clinical medicine component in clinical didactic instruction provides adequate time to present topics thoroughly) and
- **Standards I D 1 b/A5.2** (lacked evidence admissions and college literature include statements of non-discrimination with regard to sexual orientation).