D'Youville College
Accreditation History

First accredited: September 1994
Next review: September 2029
Maximum class size: 40 (55, Aug 1, 2021)
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June 2021
The commission **reviewed and more information requested** for the change in program length form.
Additional information (narrative describing factors in the local market, any substantive changes made to the courses, rationale for eliminating four current supervised clinical practices experiences, and the impact the redistribution of credits will have on tuition and faculty workload) as well as Change in Requirements for Graduation form due June 4, 2021.

The commission **accepted the report** providing evidence of
- Confirmation all students in the class of 2020 met all program and supervised clinical practice experience learning outcomes and completed summative testing. No further information requested.

March 2021
Program Change: Change in class size (40 to 55 maximum entering class size), effective August 1, 2021. The commission **approved the proposed change** in class size. No further information requested.

Program Change: Change in class size (40 to 55 maximum entering class size), effective August 1, 2021. The commission **reviewed** the change materials and **requested more information**. Clarification of the proposed increased in maximum entering class size, due by March 15, 2021.

September 2020
The commission **accepted the report** addressing 4th edition
- **Standard B3.07c** (provided evidence of SCPEs with preceptors practicing in general surgery) and
- **Standard C3.01** (provided evidence the evaluation of students related to supervised clinical education components assessed the program’s learning outcomes). No further information requested.

June 2020
The commission **acknowledged the report** providing evidence of
- The proposed plan in response to COVID-19.
Additional information (follow-up for the class of 2020 on graduation; confirmation all students met all program and supervised clinical practice experience learning outcomes and completed summative testing) due February 10, 2021.

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 when instruction occurs at supervised clinical practice experience [SCPEs] sites) and

• **Standard B3.06a** (provided evidence of SCPEs with physicians specialty board certified in their area of instruction). No further information requested.

**September 2019**

Report due December 11, 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 when instruction occurs at supervised clinical practice experience [SCPEs] sites) and

• **Standard B3.06a** (lacked evidence of SCPEs with physicians specialty board certified in their area of instruction).

Report due June 17, 2020 (*Standards*, 4th edition) -

• **Standard B3.07c** (lacked evidence of SCPEs with preceptors practicing in general surgery) and

• **Standard C3.01** (lacked evidence the evaluation of students related to supervised clinical education components assessed the program’s learning outcomes).


• **Standards C2.01b, d-e** modified Self-Study Report (lacked evidence of a self-study report that documents b) results of critical analysis from the ongoing self-assessment, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).

**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.

**April 2016**
The program was notified of a change in the accreditation process (due to increase in program applications, commission meetings, in addition to March and September, to be conducted). Program’s next validation review changed from September 2018 to September 2019 due to this change.

**September 2011**
Accreditation-Continued; Next Comprehensive Evaluation: September 2018. Maximum Student Capacity: 120. The commission noted zero areas of noncompliance with the *Standards*. 
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September 2005
The commission acknowledged the report providing evidence of
- Analysis of student failure rates No further information requested.

Program Change: Increase in maximum aggregate student enrollment (80 to 120). The commission acknowledged the proposed change. No further information requested.

March 2005
The commission acknowledged the report addressing 2nd edition
- Standard A5.1 (provided evidence announcements and advertising accurately reflect the program offered) and
- Standard C2.2c (provided evidence the self-study report includes critical analysis of student failure rates in individual courses and rotations).

Additional information (analysis of student failure rates) due July 15, 2005.

September 2004
Report due January 14, 2005 (Standards, 2nd edition) -
- Standard A5.1 (lacked evidence announcements and advertising accurately reflect the program offered) and
- Standard C2.2c (lacked evidence the self-study report includes critical analysis of student failure rates in individual courses and rotations).

December 2001
The commission accepted the report addressing 1st edition
- Standard ID 1c (provided evidence academic costs to the student are accurately stated, published, and made known to all students),
- Standards IE 1a and b (provided evidence the self-study report adequately analyzes a) student attrition and b) student failure rates in individual courses and rotations) and
- Standard IE 3 (provided evidence of implementation of the self-evaluation process). No further information requested.

September 2000
Report due July 15, 2001 (Standards, 1st edition) -
- Standard ID 1c (lacked evidence academic costs to the student are accurately stated, published, and made known to all students),
- Standards IE 1a and b (lacked evidence the self-study report adequately analyzes a) student attrition and b) student failure rates in individual courses and rotations) and
- Standard IE 3 (lacked evidence of implementation of the self-evaluation process).
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NOTE: The ARC-PA commission action information available begins in September 2000. Information from initial accreditation in 1994 by CAAHEP is not available.