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June 2021

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.

<u>June 2020</u>

The commission acknowledged the report providing evidence of

• The proposed plan in response to COVID-19. 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.

March 2019

Program Change: Change in graduation requirements (116.5 to 113.5 credits awarded) and Length of program (27 to 24 months), effective January 1, 2020. The commission **acknowledged the proposed changes**. No further information requested.

June 2018

The commission accepted the report addressing 4th edition

- **Standard C1.02** (provided evidence results of the ongoing program self-assessment include data-driven modifications to the curriculum and other dimensions of the program) and
- **Standards C2.01b-c, e** (provided 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 and e) self-identified program strengths and areas in need of improvement). No further information requested.

July 2016 (following Final Provisional review)

Accreditation-Continued; Next Comprehensive Evaluation: September 2026. Maximum class size: 38. Report due May 1, 2018 (*Standards*, 4th edition) -

- **Standard C1.02** (lacked evidence results of the ongoing program self-assessment include datadriven modifications to the curriculum and other dimensions of the program) and
- **Standards C2.01b-c, e** (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 and e) self-identified program strengths and areas in need of improvement).

March 2016

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

• Documentation that all students have SCPEs with family practice providers. No further information requested.

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September 2015

The commission accepted the report addressing 4th edition

- **Standard A3.14c** (provided evidence the program publishes and makes readily available to enrolled and prospective students the first time PANCE rates for the five most recent graduating classes),
- **Standard B3.02** (provided evidence of defined learning outcomes for students in SCPEs with preventive, emergent, acute and chronic patient encounters),
- **Standards B3.03a-d** (provided evidence of program defined requirements for SCPEs with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions) and

• **Standard B3.07a** (provided evidence of SCPEs with preceptors practicing in family medicine). Additional information (documentation that all students have SCPEs with family practice providers) due January 20, 2016.

The commission acknowledged the report providing evidence of

• Updated SCPEs in the Portal. No further information requested.

March 2015 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: July 2016 (Final Provisional). The program's maximum class size remains 38 for the third class.

Report due May 1, 2015

• Update supervised clinical practice experiences [SCPEs] in the Program Management Portal. Due August 1, 2015 (*Standards*, 4th edition) -

- **Standard A3.14c** (lacked evidence the program publishes and makes readily available to enrolled and prospective students the first time PANCE rates for the five most recent graduating classes),
- **Standard B3.02** (lacked evidence of defined learning outcomes for students in SCPEs with preventive, emergent, acute and chronic patient encounters),
- **Standards B3.03a-d** (lacked evidence of program defined requirements for SCPEs with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions) and
- Standard B3.07a (lacked evidence of SCPEs with preceptors practicing in family medicine).

March 2014

The commission accepted the report providing evidence of

• Sufficient pediatric sites. No further information requested.

September 2013

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),

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- **Standard A2.14** (provided evidence there are sufficient instructional faculty to provide students with the necessary attention, instruction and supervised clinical practice experiences to acquire the knowledge and competence required for entry into the profession),
- **Standard A3.06** (provided evidence that students do not substitute for clinical or administrative staff during supervised clinical practice experiences),
- **Standard B3.02** (provided evidence that supervised clinical practice experiences [SCPEs] provide sufficient patient exposure to enable students to meet program expectations and acquire competencies needed for entry into clinical practice),
- **Standards B3.03a-d** (provided evidence that SCPEs provide sufficient patient exposure with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions to allow students to meeting program-defined requirements),
- **Standard B3.06a** (provided evidence of SCPEs with physicians specialty board certified in their area of instruction),
- **Standard B3.07f** (provided evidence of SCPEs with preceptors practicing in behavioral and mental health) and
- **Standard D1.07** (provided evidence the program has identified a sufficient number of clinical sites in women's health and pediatrics to meet the needs of the number of anticipated students).

Additional information (sufficient clinical sites in pediatrics) due December 31, 2013.

September 2012

Accreditation-Provisional; Next Comprehensive Evaluation: March 2015 (Provisional Monitoring). The program is approved for up to 38 students in year one, 38 in year two and 38 in year three. Report due March 30, 2013 (*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 A2.14** (lacked evidence there are sufficient instructional faculty to provide students with the necessary attention, instruction and supervised clinical practice experiences to acquire the knowledge and competence required for entry into the profession),
- **Standard A3.06** (lacked evidence that students do not substitute for clinical or administrative staff during supervised clinical practice experiences),
- **Standard B3.02** (lacked evidence that supervised clinical practice experiences [SCPEs] provide sufficient patient exposure to enable students to meet program expectations and acquire competencies needed for entry into clinical practice),
- **Standards B3.03a-d** (lacked evidence that SCPEs provide sufficient patient exposure with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions to allow students to meeting program-defined requirements),
- **Standard B3.06a** (lacked evidence of SCPEs with physicians specialty board certified in their area of instruction),

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- **Standard B3.07f** (lacked evidence of SCPEs with preceptors practicing in behavioral and mental health) and
- **Standard D1.07** (lacked evidence the program has identified a sufficient number of clinical sites in women's health and pediatrics to meet the needs of the number of anticipated students).