



*Accreditation Review Commission on Education  
for the Physician Assistant, Inc.*

## **Virtual Site Visit Manual**

*Standards, 5<sup>th</sup> edition*

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# ARC-PA Virtual Site Visit Manual

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## **Introduction**

The ARC-PA recognizes the importance of the many individuals who volunteer their time in support of ARC-PA activities. Without the tireless efforts and dedication of the commissioners and site visitors, the accreditation process would not exist as it does today.

This manual has been developed by the ARC-PA to provide:

- an easy-to-use resource document with answers to frequently asked questions about the ARC-PA and the accreditation process
- a resource document for virtual site visits (teams and programs)
- a framework for ongoing site visitor preparation activities
- assistance to site visit teams in preparing for and participating in virtual site visits and program reviews

## **Accreditation Defined**

Accreditation is a process of external peer review. In the United States, the accreditation system is administered primarily by non-governmental, voluntary organizations that grant recognition to institutions or specialized programs of study that meet established qualifications and educational standards. Compliance with such standards is determined through initial and subsequent periodic reviews.

## **The Accreditation Process**

- Encourages educational institutions and programs to continuously evaluate and improve their processes and outcomes
- Helps prospective students identify programs that meet nationally accepted standards
- Protects programs from internal and external pressures to make changes that are not educationally sound
- Involves faculty and staff in comprehensive program evaluation and planning and stimulates self-improvement by setting national standards against which programs can be measured

Accreditation also benefits society by providing reasonable assurance of quality educational preparation for professional licensure and practice.

## History of the ARC-PA

### The PA Profession

The physician assistant profession originated in the mid-1960s with leadership from Duke University, the University of Colorado and the University of Washington. The early 1970s brought a rapid growth in the number of physician assistant educational programs, which were supported initially with \$6.1 million appropriated under the authority of the Health Manpower Act of 1972. This funding also supported some of the initial organization and administration of a national accreditation system for physician assistant programs, specifically those designed to prepare assistants to primary care practitioners.

### Accreditation Committee/Commission History Timeline

Date	Action
<b>May 28, 1971</b>	The development of the <i>Essentials of an Accredited Educational Program for the Assistant to the Primary Care Physician</i> was undertaken by the American Medical Association (AMA) Subcommittee of the Council on Medical Education's Advisory Committee on Education for Allied Health Professions and Services. The Subcommittee included representatives from the American Academy of Family Physicians (AAFP), American Academy of Pediatrics (AAP), American College of Physicians (ACP), American Society of Internal Medicine (ASIM), American Medical Association (AMA) and Association of American Medical Colleges (AAMC). The <i>Essentials</i> prepared by the Subcommittee were approved by those organizations except for the AAMC, which declined to approve or endorse the <i>Essentials</i> .
<b>November 30, 1971</b>	The AMA House of Delegates, with the endorsements noted and on recommendation of the Committee on Medical Education, adopted the <i>Essentials</i> , clearing the way for the approval of educational programs that met or exceeded these requirements.
<b>December 18, 1971</b>	Organizational meeting of the then-titled Joint Review Committee for Educational Programs for the Assistant to Primary Care Physicians (JRC-PA).
<b>February 7, 1972</b>	The first formal meeting of the JRC-PA was convened. Dr. Malcolm L. Peterson, representative of the American College of Physicians, was elected the first chairman of the JRC-PA.
<b>June 1972</b>	The JRC-PA made its first accreditation recommendations to the AMA.
<b>1973</b>	The American College of Surgeons (ACS) adopted <i>Essentials for an Educational Program for the Surgeon's Assistant</i> . Originally the ACS Committee on Allied Health Personnel reviewed applicant programs' compliance with the <i>Essentials</i> . In April, the JRC-PA added three graduate PAs as members-at-large for one-year terms.
<b>March 1974</b>	The sponsors of the JRC-PA and the AMA recognized the American Academy of Physician Assistants (AAPA) as the fifth sponsor of the JRC-PA.
<b>September 1975</b>	The ACS became a sponsor of the JRC-PA.

Date	Action
<b>1976</b>	The review committees for primary care PAs and for surgeon's assistants were merged into the Joint Review Committee on Educational Programs for Physician Assistants.
<b>December 1976</b>	<p>The AMA House of Delegates voted to delegate its responsibility for adoption of proposed educational standards (also known as "<i>Essentials</i>") to the AMA Council on Medical Education and authorized the transfer of responsibility for accreditation from the AMA Council on Medical Education to its Committee on Allied Education and Accreditation (CAHEA).</p> <p>This new committee was a modification of the Council's former advisory Committee on Allied Health Education. These changes were instituted to achieve complete compliance with the US Office of Education criteria for national accrediting agencies. CAHEA was designed to represent communities of interest for which accreditation actions were taken. CAHEA was composed of representatives of allied health professions, medicine, the Council on Medical Education and the public.</p>
<b>1978</b>	The JRC-PA sponsors recognized the Association of Physician Assistant Programs (APAP) as the seventh sponsor of the JRC-PA.
<b>December 1981</b>	The ASIM withdrew its sponsorship of the JRC-PA.
<b>September 1982</b>	The sponsoring organizations reduced their representation from three to two individuals each, except for the American Academy of Physician Assistants (AAPA), which continued to have three representatives.
<b>1988</b>	The JRC-PA was renamed the Accreditation Review Committee on Education for the Physician Assistant (ARC-PA).
<b>March 1991</b>	The AMA requested that administrative responsibility for the ARC-PA be undertaken by another sponsoring organization.
<b>September 1991</b>	The AAPA accepted administrative responsibility for the ARC-PA. The corporate offices of the ARC-PA were established in Marshfield, Wisconsin.
<b>1994</b>	<p>CAHEA was dissolved and accreditation activities were transferred to a new independent agency, the Commission on Accreditation of Allied Health Education Programs (CAAHEP).</p> <p>The AMA became the seventh sponsoring organization of the ARC-PA.</p>
<b>March 1995</b>	The ARC-PA approved the addition of a third representative from APAP.
<b>September 1995</b>	The ARC-PA was incorporated.
<b>March 1996</b>	A study was initiated to determine the feasibility of the ARC-PA withdrawing from the CAAHEP system and establishing itself as a freestanding accrediting agency.
<b>1998</b>	ASIM returned as a sponsor of the ARC-PA when the association merged with the American College of Physicians.
<b>March 2000</b>	The commissioners of the ARC-PA voted to become a freestanding accrediting agency for the PA profession as of January 1, 2001.
<b>January 1, 2001</b>	The Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) began operation.
<b>March 2001</b>	The Commission awarded first program accreditation as a new agency. The Commission became a member of Association of Specialized and Professional Accreditors (ASPA).

Date	Action
January 26, 2004	The Commission was awarded recognition by the Council for Higher Education Accreditation (CHEA).
October 1, 2004	The Commission moved to corporate offices in Duluth, Georgia.
March 2006	The Commission voted to begin accreditation of clinical postgraduate PA programs.
September 2006	Accreditation <i>Standards</i> for PA programs, 3 <sup>rd</sup> edition, became effective.
March 2007	The Commission voted to approve accreditation standards for clinical postgraduate PA programs.
March 2008	The Commission accredited the first two clinical postgraduate PA programs.
January 2009	The Commission added a second public commissioner.
January 2010	The Commission added a dean commissioner.
March 2010	Accreditation <i>Standards</i> for PA programs, 4 <sup>th</sup> edition, published (effective date September 2010).
January 2012	The Commission added two commissioners-at-large for 3-year terms.
September 2013	The Commission changed accreditation process to focus on program ongoing self-assessment. The Commission changed entry into the provisional accreditation process.
August 2014	The Commission placed the accreditation process for clinical postgraduate programs into abeyance
2015	Feasibility study component removed as a requirement for provisional applicant programs beginning with the September 2016 Commission agenda.
September 2015	ARC-PA changed interval between validation reviews from 7 to 10 years.
September 2017	The Commission voted to take the accreditation process for clinical postgraduate programs out of abeyance. A taskforce is charged with developing a proposal for a new accreditation process, timeline and standards.
September 2019	Accreditation <i>Standards</i> for PA programs, 5 <sup>th</sup> edition, published (effective date September 2020).
November 2019	Accreditation Standards for Clinical Postgraduate PA Programs, 3 <sup>rd</sup> edition, published (effective date January 2020)
March 2020	The Commission approved revised Clinical Postgraduate accreditation process and voted for nominees of Clinical Postgraduate SubCommission
September 2020	Accreditation <i>Standards</i> for PA programs, 5th edition, effective.

## Mission, Philosophy and Goals

### Mission

The ARC-PA is the recognized accrediting agency that protects the interests of the public, current and prospective PA students, and the PA profession by defining the standards for PA education and evaluating PA educational programs within the territorial United States to ensure their compliance with those standards.

## Philosophy

- High quality education for all physician assistants best serves the interests of both the public and the PA profession
- Continuous self-study is the foundation for improving quality in the content and processes of education

PA program accreditation must:

1. Be voluntary, private, and non-governmental
2. Encourage efforts toward maximal educational effectiveness and outcomes
3. Be built on mutual trust among all parties involved
4. Be devoid of conflict of interest
5. Assure due process

The ARC-PA derives its identity from:

1. Its history
2. Its involvement with other accreditation organizations
3. Its collaborating organizations
4. The PA profession

The role of the ARC-PA is to:

1. Establish educational standards utilizing broad-based input
2. Define and administer the process for comprehensive review of applicant programs
3. Define and administer the process for accreditation decision-making
4. Determine if PA educational programs are in compliance with the established standards
5. Work collegially with its sponsoring organizations
6. Define and administer a process for appeal of accreditation decisions

## Goals

The ARC-PA will:

- Foster excellence in PA education through the development of uniform national standards for assessing educational effectiveness and workforce preparedness
- Foster excellence in PA programs by requiring continuous self-study and review
- Assure the general public, current and prospective PA students, as well as professional, educational, and licensing agencies and organizations, that accredited programs, through comprehensive program assessment, have met defined educational standards for preparing PAs for practice
- Provide information and guidance to individuals, groups and organizations regarding PA program accreditation and its decision-making process

## Accreditation Types and Terms

The accreditation process is voluntary and is initiated only at the invitation of the PA program and sponsoring institution.

Accreditation remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the *Standards*.

An institution/program may voluntarily withdraw from the accreditation process at any time.

## Categories of Accreditation

The ARC-PA confers eight statuses of accreditation for entry level PA programs:

### For PA Programs

1. Accreditation-Provisional
2. Accreditation-Continued
3. Voluntary Inactive Status
4. Accreditation Administrative Probation
5. Accreditation-Probation
6. Accreditation Withheld
7. Accreditation Withdrawn

Accreditation-Provisional is the status of accreditation granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA *Standards* or when a program holding accreditation-provisional status appears to demonstrate continued progress in complying with the *Standards* as it prepares for the graduation of the first class (cohort) of students.

- Accreditation-Provisional is limited to no more than five years from matriculation of the first class.
- Accreditation-Provisional does not ensure any subsequent accreditation status.
- Accreditation-Provisional remains in effect until the program achieves Accreditation-Continued after its third review, closes or withdraws from the accreditation process, or until accreditation is withdrawn for failure to comply with the *Standards*.
- Programs applying for provisional status are not eligible to begin more than one cohort/class per calendar year or include a distant campus as part of the application. Programs that have their accreditation withheld must re-apply via the provisional accreditation pathway starting from the beginning.

Accreditation-Continued is the status of accreditation granted when a currently accredited program is in compliance with the *Standards*, in the case of a program holding Accreditation-Probation, when the program has demonstrated that it is once again in compliance with the *Standards*, or when a program holding Accreditation-Provisional demonstrates compliance with the *Standards* after completion of the provisional accreditation review process. Accreditation-Continued status remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the *Standards*.

Voluntary Inactive Status is a status that may be granted to programs that temporarily suspend instruction and cease to matriculate students but is not an eligible category if, at the time of request, the program is on Accreditation-Probation status.

Accreditation-Probation is a temporary accreditation status initially of not less than two years. However, that period may be extended by the ARC-PA for up to an additional two years if the ARC-PA finds that the program is making substantial progress toward meeting all applicable standards but requires

additional time to come into full compliance. Probation accreditation status is granted, at the sole discretion of the ARC-PA, when a program holding an accreditation status of Accreditation-Provisional or Accreditation-Continued does not, in the judgment of the ARC-PA, meet the *Standards* or when the capability of the program to provide an acceptable educational experience for its students is threatened. Once placed on probation, a program that fails to comply with accreditation requirements in a timely manner, as specified by the ARC-PA, may be scheduled for a focused site visit and is subject to having its accreditation withdrawn.

Accreditation-Administrative Probation is a temporary status granted when a program has not complied with an administrative requirement, such as failure to pay fees or submit required reports. Once placed on Administrative Probation, a program that fails to comply with administrative requirements in a timely manner, as specified by the ARC-PA, may be scheduled for a focused site visit and/or risk having its accreditation withdrawn.

Accreditation Withheld is a status granted when a PA program, seeking Accreditation-Provisional, is not in compliance with the *Standards*.

- The program may voluntarily withdraw from the accreditation process within the 30-day appeal timeframe.

Accreditation Withdrawn is a status granted when an established program is determined no longer to be in compliance with the *Standards* and is no longer capable of providing an acceptable educational experience for its students, or when the program has failed to comply with ARC-PA accreditation requirements, actions or procedures.

- The program may voluntarily withdraw from the accreditation process within the 30-day appeal timeframe.
- Programs that have their accreditation withdrawn or voluntarily withdraw from the accreditation process must wait 12 months before being eligible to apply for accreditation again.

## **Commissioners**

Commissioners of the ARC-PA include individuals nominated by each of the collaborating organizations of the Commission, as well as public commissioners including a dean commissioner. Appointments are for three-year terms and commissioners may be reappointed for a second consecutive term. Commissioners-at-Large are nominated by ARC-PA staff from a pool of previous commissioners or current site visitors.

Collaborating organizations include the:

- American Academy of Family Physicians
- American Academy of Pediatrics
- American Academy of Physician Assistants
- American College of Physicians
- American College of Surgeons
- American Medical Association
- Physician Assistant Education Association

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## Accreditation Standards

The accreditation standards have undergone periodic revision and improvement since their initial development in 1971 when PA program accreditation was tied to the AMA. The first set of changes to the *Essentials for the Education of Assistants to Primary Care Physicians* was made in 1978. In 1985, the standards were modified again, and the title was changed to *Essentials for an Educational Program for the Physician Assistant*. In 1990 the accreditation standards for physician assistants and surgeon assistants were consolidated to ensure that all students received a comparable base of knowledge and skill in primary care medicine. The *Essentials*, now termed *Standards*, were again reviewed and revised in 1996, and became effective in 1997. In 2000, the *Accreditation Standards for Physician Assistant Education* were reviewed and revised in concert with the ARC-PA's separation from the Commission on Accreditation of Allied Health Education Programs (CAAHEP). Subsequent editions of the Standards went into effect in September 2006 and September 2010. Most recently, the fifth edition of the *Standards* became effective September 1, 2020.

The Commission conducts a comprehensive review of the *Standards* periodically but can make clarifying changes and additions between such comprehensive reviews.

## The Virtual Site Visit

The purpose of the virtual site visit is to validate the confidential information the program has provided to demonstrate its compliance with the *Standards*, the nature and manner in which the program's objectives are being pursued, and how the program's self-identified concerns and problems are being addressed.

1. The primary responsibility of the site visit team is to **verify, validate and clarify** the confidential information supplied by the program in its application and the information supplied about the program by the ARC-PA from previous accreditation actions, progress reports, or correspondence.
2. The report of the site visit team is compiled on the basis of its review of the application document, observations of the program, interviews with those involved in the site visit, information supplied to the site visit team by the program director and other officials, and information supplied by the ARC-PA.
3. The site visit team does not have the authority to speak on behalf of the ARC-PA regarding a program's compliance with the *Standards*. Accreditation decisions rest with the ARC-PA, which has the sole and exclusive right to determine whether accreditation is to be granted or continued.
4. The task of the site visit team is to review the program based on the program's evidence in support of compliance with the *Standards* and convey its findings to the ARC-PA in light of the evidence presented **at the time of the site visit**.
5. In compiling the report to the ARC-PA, the site visit team findings must be firmly grounded in the *Standards*.

## Site Visit Reports

The “Site Visit Report” is the means by which the site visit team conveys its conclusions about the site visit to the program and to the ARC-PA. The site visit team sends a report of the visit to the ARC-PA. The ARC-PA in turn sends a written summary of the report to the program director.

## Program Response

Within a specified period of time, program directors are invited, but not required, to respond to any of the observations contained in the summary of the site visit in order to eliminate errors of fact or challenge perceived ambiguities and misperceptions. The response is not to be used to provide new information regarding changes made since the visit or plans for future changes in response to the observations contained in the report.

## Types of Virtual Site Visits

Validation Visits are made to programs with Accreditation-Continued status. Such visits are scheduled at the direction of the Commission to review the program’s compliance with the *Standards* and the annually required information submitted by programs via the Program Management Portal. The visits also examine the program’s demonstration of continuous oversight of processes and outcomes of education. An application is required with each validation visit. Multi-campus programs may have site visitors also at the distant campus(es). The site visit team submits a report of the visit in the form of “observations” to which the program is offered an opportunity to respond.

Focused Visits may be conducted at any time to evaluate one or more specific *Standards*-related problems identified by a site visit team, the ARC-PA, or in response to a concern received by the ARC-PA. Details about requirements for the focused visit are conveyed to the program in writing prior to the visit. Focused visit teams must include commissioner(s) of the ARC-PA or ARC-PA staff. A report of the visit is written for consideration and action by the ARC-PA. The site visit team submits a report of the visit in the form of “observations” to which the program is offered an opportunity to respond.

### Provisional Visits

1. An initial provisional site visit is made to a new developing program that is within six to 12 months of matriculation of students. This visit verifies an institution’s ability to begin a program in compliance with the *Standards* and the program’s readiness to matriculate students. An application is required with the initial provisional visit. The site visit team submits a report of the visit in the form of “observations” to which the program is offered an opportunity to respond.

2. A provisional monitoring visit is conducted within six months of graduation of the first cohort of students. This visit verifies the sponsoring institution’s and provisionally accredited program’s progress in delivering the program in compliance with the *Standards* and their ability to continue to do so. An application is required with the provisional monitoring visit. The site visit team submits a report of the visit in the form of “observations” to which the program is offered an opportunity to respond.

3. A final provisional visit is conducted 18-24 months following the second provisional review by the Commission. This visit verifies the institution’s and program’s demonstration of compliance with the *Standards*, including their ability to incorporate and report the findings of a robust self-assessment process as required by the ARC-PA. An application is required with the final provisional visit. The site

visit team submits a report of the visit in the form of “observations” to which the program is offered an opportunity to respond.

Distant Campus Expansion Visits are conducted for a program with Accreditation-Continued status that is applying to expand to a distant campus location. The visit is conducted at the site(s) of the proposed campus and is made at the direction of the Commission. The visit may involve a concurrent visit to the main program campus. The site visit team submits a report of the visit in the form of “observations” to which the program is offered the opportunity to respond.

Probation Visits are conducted near the end of a period of probation to programs with an accreditation status of Accreditation-Probation. Details about requirements for these visits are conveyed to the program in writing prior to the visit. Probation visit teams must include commissioner(s) of the ARC-PA or ARC-PA staff. The site visit team submits a report of the visit in the form of “observations” to which the program is offered the opportunity to respond.

## **Virtual Site Visit Team**

### **Team Membership and Responsibilities**

All site visit teams are appointed on an ad hoc basis. They are charged:

- To study the PA program in relation to its compliance with the *Standards*
- To make on-site observations and verify, validate and clarify the information and data provided by the program to the ARC-PA
- To incorporate the team's findings and conclusions into a written report and to transmit the report to the ARC-PA. The report of the site visit team is compiled on the basis of its observations of the program, interviews with those involved in the site visit, information supplied to the site visit team by the program director and other officials, and information supplied by the ARC-PA.

### **Selection of Team Members**

The ARC-PA invites qualified persons to serve as team members. The pool of site visitors is composed of PA educators, practitioners, past and present members of the ARC-PA commission, and others who have insight into the education and practice of PAs.

Those interested in serving as site visitors must apply to the ARC-PA. All site visitors must be approved by the ARC-PA and must attend a site visitor preparation workshop. Individuals accepted into the site visitor pool should have the time and flexibility to participate in approximately two to three visits per year.

The ARC-PA assigns members to teams based upon the type of visit and the experience of site team members. Timing of the visit during the calendar year may also affect the assignment of team members.

### **Team Member Preparation**

The ARC-PA staff conduct accreditation site visitor preparation workshops for new and current site visitors. Experienced site team members are expected to attend periodic workshops or participate in

online review sessions. Additionally, all site visitors have attended a site visitor preparation webinar on the conduct of virtual site visits.

Site visitors are provided an ARC-PA email address which is used for all communication from the ARC-PA.

Site visitors are required to annually sign a conflict of interest and confidentiality form prior to conducting any site visits.

### **Team Composition**

Virtual on-site teams generally consist of at least two individuals. The ARC-PA assigns members of the site visit team from the pool of active site visitors. The chair of the site visit team is an experienced site visitor who is knowledgeable about accreditation and PA education. New site visitors are added to a two-person team for at least their first site visit. Focused visits are conducted by site visitors who must include a commissioner of the ARC-PA or ARC-PA staff.

Site visitors are expected to notify the Director of Accreditation Services of any potential conflict of interest or the appearance of conflict of interest before accepting assignment to a site visit team.

### **Multi-Campus Programs**

Programs with one or more distant campuses have a team member or a separate team virtually visit each distant campus. Programs submit an application designed for multiple campuses. Depending on the nature of the distant campus affiliation, the site visit team may interact virtually during the visit. Additionally, while there is one final site visit report submitted by the team chair to the ARC-PA, site visitors may be asked to complete special worksheets for distant campus locations.

### **Site Visit Team Chair Responsibilities**

The chair of the team sets the tone and serves as the coordinator of the visit. The chair has specific responsibilities, as follows.

#### Prior to the virtual visit, the chair:

- Contacts the ARC-PA offices with any questions about the materials received from the office.
- Reviews the site visit agenda developed by the program, making suggestions to the program for alterations as needed. Programs are advised to follow the site visit schedule developed by the ARC-PA. Reviews the virtual site visit agenda prepared from the agreed upon site visit agenda, ensuring that there is sufficient time to interview all required individuals and review documents and materials within the time frame of the virtual site visit.
- Verifies that the program director is aware of the additional materials that the team will review during the site visit (i.e., syllabi, meeting and student records), and other documents listed as part of the application sent to the program by the ARC-PA and available on the ARC-PA website.

- Informs the program director of any additional materials the team may want to see, based on the review of the application and supporting materials in sufficient time for the program to have these materials in a secure document sharing application at least three days prior to the visit.
- Verifies that the revised agenda has been sent to each team member **and the ARC-PA office**.

#### At the site visit, the chair:

- Facilitates active participation by all team members.
- Intervenes should any team member or institutional representative discuss inappropriate topics.
- Reads the Concluding Script from the Talking Points document to close the visit.
- Assumes responsibility for completing the final version of the site visit worksheet and forwards it to [accreditationservices@arc-pa.org](mailto:accreditationservices@arc-pa.org) in a timely manner (preferably within 3-5 calendar days of completion of the site visit).

After the visit, the chair has no further contact with institutional representatives, the program director, faculty or students. If contacted, the chair should refer the individual(s) to the ARC-PA Director of Accreditation Services and notify Accreditation Services at [accreditationservices@arc-pa.org](mailto:accreditationservices@arc-pa.org) of the contact.

## Preparing for the Virtual Site Visit

### Virtual Site Visit Schedule

Eight weeks prior to the visit, the site team chair should receive a draft schedule of activities for the visit from the program. **The team chair has final approval of this schedule.** He or she should consult the program director and/or the team member(s) about the schedule and necessary arrangements for the visit. The program director may send correspondence only to the team chair and the chair may ask for copies to be sent to others on the team. **The team chair is the official spokesperson for the team and there should be no need for other team members to contact the program being visited.**

Once the team chair approves the schedule, Accreditation Services works with the site visit chair to put the agenda into a virtual site visit agenda template. The final virtual site visit schedule is sent to the program director and all team members **from the ARC-PA office** ([accreditationservices@arc-pa.org](mailto:accreditationservices@arc-pa.org)). Site visitors should review the final site visit schedule to be sure that time is allowed for all activities of the visit. Any questions regarding previous correspondence or unexpected problems should be addressed to the ARC-PA as soon as possible.

### Application of Record

**SPECIAL NOTE:** The application submitted by the program to the ARC-PA office is considered the program's application of record. It is one component of the official program record used by the Commission throughout the accreditation review process. Site visitors have been instructed **not** to accept any new or revised application materials from the program at the time of the visit. If, during the process of the visit, the site visitors suggest additional information or materials be submitted to the ARC-PA office, these materials should be sent with the program's response to observations.

The above notice is provided to the program on the application, in the letter to the program director confirming the assignment of site visitors and in the SV Protocol for Program Directors. It is also included in the memo sent to site visitors about the visit.

The site visit team should not accept any new materials **not included in the Application of Record**. Obviously, the team will review materials during the virtual site visit, such as meeting records and student files, not required as part of the Application of Record. Not accepting new materials means **the team may not accept changes to or new appendices to the original application**, which includes not accepting new or updated course syllabi replacing those that may be required in the application.

## Accreditation Manual

The ARC-PA Accreditation Manual is available on the ARC-PA website as a downloadable PDF document. The manual includes general information about the ARC-PA, policies related to the accreditation process and suggestions for how programs can demonstrate their compliance with the *Standards* as they prepare for site visits.

Site visitors should review the Manual before each site visit, specifically the section related to demonstrating compliance with the *Standards*. An excerpt from the manual addresses the fact that it is the program's responsibility to demonstrate compliance with the *Standards*:

It is the responsibility of the PA program to demonstrate its compliance with the *Standards*. The role of the site visitors is to verify, validate and clarify information and evidence as presented by the program. In some cases, the ARC-PA is very prescriptive about what it needs to review, i.e., specific materials as listed in the application, appendices and required materials for review at the time of the visit. However, the ARC-PA does not generally address process issues, allowing programs and institutions to develop those as best suited to their programs. Examples of process topics include the number of credits or hours assigned, format for curriculum and courses (i.e., traditional vs. problem-based), and delivery mechanisms. While the ARC-PA may require specific information to clarify process issues that may affect accreditation, it is the program's responsibility to address these in detail as specified in the *Standards*. For example, programs using a problem-based approach are still required to demonstrate their compliance with standards related to breadth and depth of curriculum and those that relate to instructional objectives and guiding student acquisition of learning outcomes.

## The Visit Itself

### Schedule

A virtual site visit team can conduct a thorough and accurate assessment of an educational program for physician assistants in two days or less. These site visits should provide the site visit team members with a thorough understanding of the didactic and supervised clinical practice components of the educational program. The visit provides the team with opportunities to meet virtually and discuss the program with its administrative staff, faculty, preceptors, representatives of the sponsoring institution and clinical affiliates, students and graduates.

### Special Notes

1. The only individual(s) that may be present at meetings occurring during the site visit to the PA program are institutional and program administrators, faculty and students, as may be determined by the site visit team chair. The chair has sole responsibility for the final decision regarding who should be interviewed and who may be present during the interviews. (Consultants used by the program are not to be included in any of the meetings during the visit.)
2. The use of any recording device by the program or institution during any portion of the site visit is strictly prohibited.
3. Site visitors may not accept any new application materials from the program at the time of the visit. Site visitors may, however, request that additional information or materials be submitted to the ARC-PA office with the program's response to observations.
4. In preparing for the visit, programs are reminded to review the Site Visit Protocol, Site Visit Schedule, and Organizing Materials documents from the appropriate sections of the ARC-PA website. Programs must use the agenda templates available from the web.

### First Day of the Visit

The first day is a busy one and it is important to stay on time and focused. The site visit schedule developed by the ARC-PA is designed in a manner that supports the best use of visitors' time in a sequence that makes their tasks easier.

### Document Review

The team is responsible for reviewing the documents provided as evidence of the program's compliance with the *Standards*. A list of documents to be reviewed is part of the application.

### Review and Clarification of Application and Appendices

The team begins the process of reviewing and clarifying the application and its supporting documentation with the program personnel. The session should include the program director and individuals identified by the program to meet the *Standards* definition for principal faculty; i.e., individual(s) responsible for didactic and clinical phases of the program. The medical director is often only available for a portion of this time, depending on any other non-program responsibilities he or she may have.

The process of application clarification is designed to streamline the time needed for team members to understand the program's structure and compliance with the *Standards*. The team chair should be sure the program director understands that the clarification approach is led by the team and is not a presentation by the program.

### Meeting with Others

During the visit, in order to **verify, validate** and **clarify** program information contained in the application, the team should have the opportunity to meet and interview specific individuals. Those typically invited to meet with the team (depending on the type of visit) include representatives from the institutional administration, faculty providing large components of didactic instruction, students, graduates, clinical preceptors and members of the advisory committee (if one exists).

Team members should meet with individuals alone, individually or in groups but without the program director or program faculty/staff included in these meetings.

Teams may choose to meet with students in the didactic phase as one group or may divide into two smaller groups, depending on class size and the number of students the team wants to interview. It is important that the students with whom the team meets are selected in a random manner to produce the least bias. Students may be selected in advance by the program or by the site visit team.

The team *must* meet with current students when only the team members and students are present.

The selection of clinical students to interview may be more complicated as students may be at sites distant from the program office or on rotations that do not lend themselves well to student absences. While still trying to maintain as random a student selection as possible, the team may give the program more latitude in selecting clinical phase students for interviews.

#### Tour of Facilities—Provisional or Distant Campus application ONLY

The program is responsible for describing the adequacy of the office, classroom, laboratory and library space, as noted in the *Standards*.

To demonstrate compliance with **standard A1.08** the program must provide narrated video evidence of the following resources to support the institution's plans for compliance with standard A1.08 as described in the application and in the **ARC-PA Physical Facilities TEMPLATE**, Appendix 1.

- Faculty offices (sufficient for the number of faculty planned)
- Classroom space (sufficient in number and size, and appropriate in design to meet their intended use and conducive to student learning)
- Laboratory space (sufficient in number and size, and appropriate in design to meet their intended use and conducive to student learning)
- Educational space to provide confidential academic counseling to students by the program director and principal faculty
- Space for program meetings
- Space for secure storage of student files and records

It is suggested programs use the video feature on a phone or iPad to create the video. The video must only include the areas listed above and show how the spaces are sufficient in size to accommodate maximum enrollment (for example, classroom images show sufficient seating for the maximum number of planned students). The duration of the video may not exceed 30 minutes. Still photos and or architectural renderings may accompany a video presentation as appropriate.

The video must be emailed to [VirtualTour@arc-pa.org](mailto:VirtualTour@arc-pa.org) no later than **1 week prior** to the first day of the virtual site visit. The video file size is limited to 100 mb, however file size may be limited by the sender's email. Programs may need to break up the tour into multiple videos/emails in order to send.

#### Breaks

It is important for the team to allow themselves some time for breaks during the day.

### Ending the First Day

The team typically ends the day by meeting with the program director. The purpose of this meeting is to verify that the schedule and activities for the day were accomplished and to confirm or make changes to the schedule for the second day. Any questions or issues that need clarification before the second day can be addressed at this closing meeting.

### Second Day Late Morning/Lunch

Over a private lunch, the team completes its tasks of reviewing information and documenting its findings on the worksheet. Often the team may find that it still has questions and should consult with the program director if this is the case.

### **Closure**

The chair *must* read the Script for Visit Closure from the Talking Points document. The Visit Closure Script provides the timeline for the rest of the process, including ARC-PA review of the site visit report, correspondence with the program and ARC-PA accreditation action. The ARC-PA will be asking the program to complete an evaluation of the visit and the visitors.

The filed written report submitted by the team in most cases will be sent to the program from the ARC-PA within 21 days of the visit. The program may choose to respond to any of the observations noted in the site visitor report. The purpose of the program's response is to eliminate errors of fact or challenge perceived ambiguities and misperceptions.

**The site visit team does not have the authority to speak on behalf of the ARC-PA regarding a program's compliance with the *Standards*.** Accreditation decisions rest with the Commission which has the sole and exclusive right to determine whether accreditation is to be granted or continued.

### **After the Site Visit**

After the visit is over, the program will remove access to the materials in the secure document sharing application and the team should have no further communication with the program.

### **Post Visit Evaluation**

The program director is given the opportunity to comment on the site visit process and the performance of the site visit team through the use of a standardized web-based Post Site Visit Questionnaire. This form is returned to the ARC-PA for QA review.

### **Virtual Site Visit Materials**

Available on ARC-PA Website (<http://www.arc-pa.org/vsv/>)

The following documents are found in the Information About Virtual Site Visits:

Virtual Site Visit Agreement

Virtual Site Visit Protocol

Virtual Tour of Program Facilities

Using Zoom for Virtual Site Visits

## Appendix A: Virtual Site Visit Agreement

Accreditation of PA programs is a process initiated by the sponsoring institution. It includes a comprehensive review of the program relative to the *Standards*. It is the responsibility of the PA program and the sponsoring institution to demonstrate its compliance with the *Standards*. Accreditation decisions are based on the ARC-PA's evaluation of information contained in the accreditation application, the report of the site visit evaluation team, any additional requested reports or documents submitted to the ARC-PA by the program and the program accreditation history. All accreditation standards will be reviewed and are expected to be met, regardless of the format of the site visit.

This agreement identifies the responsibilities of the sponsoring institution, the PA program, and the ARC-PA.

**The sponsoring institution** listed on the Application for Accreditation (the "institution") and the PA program (the "program") agree that:

- the only individual(s) present at virtual meetings occurring during the site visit will be the institution and program administrators, program faculty and staff, students, and program committee members as determined by the site visit team chair and as listed on the site visit agenda.
  - All individuals participating in Zoom meetings must pre-register and be sure the name entered into their individual Zoom profile matches the name listed on the site visit agenda.
- the site visit chair has sole responsibility for the final decision regarding who should be interviewed and who may be present during the interviews.
- the program director is responsible for ensuring the confidentiality of all meetings by identifying all participants who are allowed to be present during the interviews and to the extent practical, limiting those present for interviews to only those listed on the site visit agenda.
- consultants used by the program are not to be included in any of the meetings during the visit.
- the use of any recording device by the institution or the program during any portion of the site visit is strictly prohibited.
- they will provide a virtual tour of program facilities as required by the Standards and the type of site visit or as otherwise requested of the site visit chair.
- they will provide all materials that the site visit team would ordinarily review on-site (faculty and student files, affiliation agreements etc.) in a secure document sharing application (such as Dropbox, Blackboard, etc.).
  - The program will remove access to these materials at the conclusion of the virtual visit.

- they will participate in a scheduled pre-visit virtual meeting with ARC-PA staff to test technology and to assure any problems are identified and corrected prior to the date of the virtual site visit.
- they will ensure that contingency plans are in place should the primary technology fail at the time of or during the site visit.
- they will ensure that technology requirements are in place for all participants listed on the site visit agenda including:
  - An internet connection – broadband wired or wireless (3G or 4G/LTE)
  - Speakers and a microphone – built-in or USB plug-in or wireless Bluetooth
  - A webcam or HD webcam - built-in or USB plug-in
  - Or, a HD cam or HD camcorder with video capture card

Preceptors who may be interviewed need only be available by phone.

- the program director is responsible for informing all participants who may be present during the interviews of the *Virtual Site Visit Protocol* provided by the ARC-PA
- all other instructions (with the exception of making hotel reservations for each site visitor) described in the site visit notification letter to the program director will be followed including:
  - On time submission of the program's application
  - On time submission of the program information sheet
  - On time submission of the draft of the proposed schedule/agenda for the site visit

**The ARC-PA staff and site visitors will:**

- host and control the platform for the virtual visit. Only the site visitors listed in the letter confirming the virtual site visit and ARC-PA tech support staff will have access to the virtual site visit meetings.
- schedule a pre-visit virtual meeting to test technology and identify and correct problems prior to the date of the virtual site visit.
- assist the institution with developing a contingency plan should the primary technology fail at the time of or during the site visit.
- provide the *Virtual Site Visit Protocol* to the program with the ARC-PA notice confirming the virtual site visit.
- monitor participants and ensure that only the individuals who log into the various interviews and meetings are those who have pre-registered for the site visit and whom the site visit chair has determined should be present during the interviews.
- provide instructions to the program for joining virtual meetings.
- assure that, to the extent necessary to protect confidentiality of interviewees, interviews with students, faculty, administrators etc. is accomplished with separate technology controlled by the ARC-PA, or individual telephone calls.
- assure that the password provided by the program and used to access the secure document sharing application is kept confidential
- provide the program with a list of materials to be shared via the secure document sharing application in a timely manner

- provide guidelines and training to the virtual site visit team.
- not record/archive or use audio/video recordings or chat messages sent during virtual site visit as part of the program's comprehensive review.

**Privacy and confidentiality:**

The institution and program understand that any information or material received or generated by the **ARC-PA** in connection with the accreditation process will be kept confidential except to the extent necessary to enable the ARC-PA to make informed accreditation decisions and will not be released outside of the ARC-PA unless the institution has authorized such release or such release is required by law.

ARC-PA uses Zoom products which fall under the Zoom Privacy Policy. The institution and the program acknowledge that they are informed of and agree to the Zoom Privacy Policy. ARC-PA requires passwords for participation in all site visit meetings and will utilize the Zoom Waiting Room feature. Any Zoom URLs or passwords provided by ARC-PA will be confidential and will be given out by the institution and program only to the extent necessary to complete the site visit.

**Chief Administrative Officer** of Program's Sponsoring Institution:

*As listed in the Program Management Portal or on the program application (provisional only)*

**Enter name**      **Enter date**

*The name that appears here is deemed an electronic signature.*

**Program Director:**      **Enter name**      **Enter date**

*The name that appears here is deemed an electronic signature.*

**Executive Director ARC-PA:** Enter name      Enter date

*The name that appears here is deemed an electronic signature.*

## Appendix B: Virtual Site Visit Protocol (for provisional, provisional monitoring, final provisional, distant campus and continuing accreditation visits)

As program directors prepare for the virtual site visit, keep the following in mind.

After reading this document, program directors with questions about planning for the virtual site visit are encouraged to contact [accreditationservices@arc-pa.org](mailto:accreditationservices@arc-pa.org).

### Before the Visit

- **Twelve** weeks before the visit, the application materials as detailed in the application and as directed in the email from the ARC-PA must be received by the ARC-PA office.
- **Eight** weeks before the visit, the **site visit schedule/agenda** must be emailed to [accreditationservices@arc-pa.org](mailto:accreditationservices@arc-pa.org) and the site visit chair. Accreditation services will work with the site visit chair to put the agenda into a virtual site visit agenda template and return the final agenda to the program.
- **Eight** weeks before the visit, a copy of the completed **Information Summary Sheet** (found on the ARC-PA website at <http://www.arc-pa.org/site-visits/site-visit-protocol/>) must also be emailed to [accreditationservices@arc-pa.org](mailto:accreditationservices@arc-pa.org) only. The Information Sheet includes program contact information for the site visitors. Hotel and travel information can be left blank.
- **One week** prior to the site visit, provisional and distant campus applicants must provide a virtual tour of the program facilities. (See separate document, **Virtual Tour of Program Facilities** for details.)
- **Three days** prior to the site visit, materials the site visit team would usually review on site (faculty and student files, affiliation agreements, etc.) must be available in a secure document sharing application (Dropbox, Blackboard, etc.) and the login to access the documents must be provided to the site visit chair. The program will remove access to these materials at the conclusion of the virtual visit.
- Prior to the virtual visit, a pre-visit virtual meeting with ARC-PA staff will be scheduled to test technology so any problems are identified and corrected prior to the date of the virtual site visit and contingency plans are made should the primary technology fail at the time of or during the site visit.
  - Be sure the site visit chair has a way to reach the program director during the visit.
- Technology requirements must in place for all participants listed on the site visit agenda including:
  - An internet connection – broadband wired or wireless (3G or 4G/LTE)
  - Speakers and a microphone – built-in or USB plug-in or wireless Bluetooth
  - A webcam or HD webcam - built-in or USB plug-in
  - Or, a HD cam or HD camcorder with video capture card

- All individuals listed on the virtual site visit agenda will register in order to access the Zoom meeting. The program director will be provided a registration link to send to everyone on the agenda. Only those individuals registered will be allowed into the meetings.

Attendees must not share their confirmation emails with other participants as the links are specific to each attendee. Only those listed on the agenda will be allowed to register. Names used to register must match those listed on the agenda.

- The program director is responsible for informing all participants who may be present during interviews, what is expected during the virtual site visit.

### **Scheduling the Activities**

As program directors begin developing the agenda for the site visit and thinking of the details of the visit, remember the following:

- Start with the ARC-PA site visit agenda template on the ARC-PA website but work out specific times and sequencing of events for the visit in consultation with the site visit team chair.
  - For provisional site visits: <http://www.arc-pa.org/provisional-accreditation/provisional-accreditation-site-visit-schedule/>
  - For continuing site visits: <http://www.arc-pa.org/continuing-accreditation/continuing-accreditation-site-visit-schedule/>
- The agenda includes the names, degrees (MD, PhD, EdD, etc.) and position titles or teaching assignments of each person with whom the team will be meeting. Be sure to include the names of the graduates (with year of graduation), students and preceptors on the agenda (as needed and as identified on the template). The names must match the individual Zoom profile names.
- A virtual site visit agenda will be created from the agreed upon agenda sent to Accreditation Services. The virtual site visit agenda will include:
  - Breaks for the team between meetings and sufficient time for the next group of individuals to log into Zoom.
  - Time for the team to review the documents the program has posted on its secure site.
  - Time before the team completes its reports for the visitors to again meet with the program director and program faculty to clarify issues or answer questions they may still have.
- The program director must be available for the entire active period of the site visit in case s/he is needed for clarifications.
- Communicate with the team chair more than once prior to the visit. If the program director has not heard from the chair about confirming the schedule, s/he should contact the chair as opposed to waiting for the chair to initiate contact.
- Schedule changes must be discussed with the team chair who will share the information with ARC-PA staff and the other site visitor(s).

- Faculty and students must be available for the entire interview period for which they are scheduled, with their cell phones turned off.

### **During the Site Visit**

- Ensure all participants have audio and video functioning properly, and if there are problems, someone from the institution's IT department must be available to address the issue(s).
- The program may share a document with the site visitors via the chat function in Zoom. However, if a document is shared via the chat function in Zoom, the site visitors will delete the document at the end of the site visit.
- The only individual(s) present at virtual meetings occurring during the site visit are the institutional and program administrators, program faculty and staff, students or program committee members as determined by the site visit team chair and as listed on the site visit agenda. All participants in the interviews will introduce themselves and state their role in the program.
- To the extent practical, the program director must limit individuals present for interviews to only those listed on the site visit agenda.
- Consultants used by the program are not to be included in any of the meetings during the visit.
- The site visit chair has sole responsibility for the final decision regarding who should be interviewed and who may be present during the interviews.
- The use of any recording device by the program during any portion of the site visit is strictly prohibited.

### **The Visit Schedule**

- Be prepared for changes. The team recognizes that the site visit is a stressful time for program faculty and staff. Nevertheless, it is the team's responsibility to ensure that they speak with the people, see the facilities and read the documents that will give them the fullest, most accurate picture of the program. The site team chair will do everything in his or her power to follow the agenda as agreed to with the program director in advance of the visit, but the materials and individuals involved may necessitate last minute changes.
- The site visit team will meet with senior administration, instructional faculty and students without program faculty present.
- Depending on the size of the class and the team, some team chairs will ask to meet with all students in a class. Others will ask the program to select students using a specific method, for example, every third student alphabetically. If the chair does not indicate a preference, use a similar random method.

- The team may ask for additional material or clarification of material. Sometimes it may seem as if visitors are asking for material that has already been provided. Sometimes, the manner in which the material is organized may require clarification or appear to the site visitors to be incomplete. Please understand that the team members want to ensure that programs are given every opportunity to demonstrate compliance with the *Standards*. If the team's requests are unclear, seek clarification.
- The team has limited time to review materials. The application submitted by the program/institution is the document of record for the comprehensive review process including the site visit. The team may not accept additional application materials voluntarily provided by the program which the team did not request. However, the team may ask the program to submit additional materials to the ARC-PA in the program's response to the site visit observation(s). It is the responsibility of the program, not the responsibility of the site visitors, to submit those additional requested documents to the ARC-PA. The program should only send materials to the ARC-PA if the team so requests.

### Visit Conclusion

The ARC-PA site visitors do not conduct a formal exit report before departing from the program. The site visit team will take a few minutes at the conclusion of the site visit to express thanks to the program for its assistance in facilitating the visit. The following points are important as the visit ends:

- The filed written report submitted by the team will be sent from the ARC-PA to the program director, and to the individual to whom the program director reports, as identified by the program director on the program data sheet, usually within 21 days of the visit.
- The program is offered the opportunity to respond to any of the observations noted in the site visit report within 21 days of receipt of the report. The purpose of the program's response is to eliminate errors of fact, or challenge perceived ambiguities and misperceptions, providing clarification as the program sees fit. The program may not respond with new information or changes made since the site visit.
- The site visit team does not have the authority to speak on behalf of or bind the ARC-PA regarding a program's compliance with the *Standards*, as these responsibilities and decisions rest solely with the ARC-PA.
- Any communication about the visit after the visit should be directed to the ARC-PA Accreditation Services staff ([accreditationservices@arc-pa.org](mailto:accreditationservices@arc-pa.org)), not to the site visitors.

### After the Visit

After the visit, the ARC-PA will ask the program director to complete a web-based evaluation of the visit process and the visitors. This evaluation is especially helpful to the ARC-PA as part of its ongoing internal review of processes and individuals. The ARC-PA urges the program to complete the evaluation as fairly and candidly as possible. Feedback and comments remain anonymous and will in no way effect the ARC-PA's decision about the program's accreditation status.

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**APPLICATION OF RECORD:**

The application submitted by the program to the ARC-PA office is considered the program's application of record. It is one component of the official program record used by the commission throughout the accreditation review process. Site visitors have been instructed not to accept any new or revised application materials from the program at the time of the visit. If, during the process of the visit, the site visitors suggest additional information or materials be submitted to the ARC-PA office, these materials should be sent with the program's response to observations.

## **Appendix C: Using Zoom for Virtual Site Visits**

The meeting host (listed on the Virtual Site Visit agenda) will email the program director a registration link for the virtual site visit. The program director must forward the registration link and the final virtual site visit agenda to everyone on the agenda.

Only those listed on the agenda will be allowed to register.

Names used to register must match those listed on the agenda. Please do not use nicknames.

Registrations are confirmed manually against the agenda by the host, so it is important for the program director to forward the registration link as soon as s/he gets it.

Those getting the link to register should register as soon as the emailed link arrives. After registration, a confirmation email is sent to each attendee confirmed to be on the agenda. Email the host if confirmation is not received within 24 hours.

Attendees must not share their confirmation emails with other participants as the links are specific to each attendee.

Each person on the agenda will register for the DAY but will only be allowed to join the meeting at their agenda TIME.

Only the site visit chair makes changes to the agenda so the program director must contact the site visit chair, not the host, if changes to the agenda are needed.

## Appendix D: Instructions for Organizing Secure Site Documents

The following instructions are provided the program director as to how the documents included in the secure document sharing application (e.g., OneDrive, Google Drive, Dropbox, Blackboard) should be organized. These materials must be available to the site visitors at least three business days prior to the visit with the login provided to the site visit chair. Material should include items listed on the “On Site Materials List” included in the application and be selected in consultation with the site visit chair.

There should be an **overall “Table of Contents”** identifying information in the folders and subfolders.

**Documents should be organized by standard** (e.g., the master folder A Standards, subfolders for each standard A1.01, A1.02)

- Include relevant evidence of compliance that is highlighted or clearly identified in some way. Please do not include an entire document, but only the material relevant to that specific standard. For example, if the evidence is located within the student handbook, include only the page(s) specific to the standard. Or if the evidence is in a course syllabus, only include the page(s) specific to the standard.
- Evidence must include items listed on the “On Site Materials List” included in the application.

### Folders with other required documents

- Student records with the documentation as required by the standards, selected per the direction of the site visit chair, including but not limited to:
  - Evidence students met published admission criteria
  - Evidence students met institution and program health screening and immunization requirements
- Student records with the documentation as required by the standards, selected per the direction of the site visit chair, including but not limited to, at least one file per cohort as applicable documenting:
  - Advanced placement
  - Remediation efforts and outcomes
  - Deceleration
  - Dismissal
  - Academic/Behavioral Disciplinary action
- Graduate records with the documentation as required by the standards, selected per the direction of the site visit chair, including but not limited to:
  - Evidence the graduate met the requirements for program completion.
- Faculty records for the program director, medical director, all principal faculty and course directors with the documentation required by the standards.
- Preceptor records with the documentation as required by the standards including but not limited to:
  - Evidence preceptors hold a valid license
  - Evidence physician preceptors are specialty board certified in their area of instruction
  - Evidence PA preceptors are NCCPA certified
  - Evidence other health care providers are qualified in their area of instruction

- Committee meeting minutes as needed to support compliance with the standards (organized chronologically and by type)

**An empty folder** to submit any items/documents requested by the site visit team before or during the visit.

Although this may seem time consuming, in the long run, a program with well-organized documentation will be able to focus on the interactions with the site visitors, rather than trying to find documents requested by the team. As a reminder, access to these materials will be removed by the program at the conclusion of the virtual visit.

If you have questions, do not hesitate to contact the site visit chair.