# Albany Medical College Accreditation History

First accredited: November 1972 Next review: March 2028 Maximum class size: 42 Page 1 of 4

### September 2021

The commission acknowledged the report providing evidence of

• Clinical students met learning objectives, syllabi provided for two courses and graduation plan. No further information requested.

### September 2020

The commission accepted the report providing evidence of

• The follow-up in response to the COVID-19 plan.

#### <u>June 2020</u>

The commission acknowledged the report providing evidence of

• The proposed plan in response to COVID-19.

Additional information (narrative addressing clinical students meeting learning objectives, syllabi for two courses and graduation plan) due August 1, 2020.

### March 2020

The commission accepted the report addressing 4<sup>th</sup> edition

- **Standard C1.02** (provided evidence the program applies the results of ongoing program selfassessment to the curriculum and other dimensions of the program) and
- **Standard C2.01b**, modified Self-Study Report (provided evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment). No further information requested.

#### <u>June 2018</u>

The commission accepted the report addressing 4<sup>th</sup> edition

• **Standard A2.16** (provided evidence all instructional faculty serving as supervised clinical practice experience preceptors hold a valid license). No further information requested.

# March 2018

Accreditation-Continued; Next Comprehensive Evaluation: March 2028. The program's maximum class size remains 42.

Report due April 18, 2018 (Standards, 4th edition) -

• **Standard A2.16** (lacked evidence all instructional faculty serving as supervised clinical practice experience preceptors hold a valid license).

Due October 5, 2019 (Standards, 4th edition) -

- **Standard C1.02** (lacked evidence the program applies the results of ongoing program selfassessment to the curriculum and other dimensions of the program) and
- **Standard C2.01b**, modified Self-Study Report (lacked evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment).

First accredited: November 1972 Next review: March 2028 Maximum class size: 42 Page 2 of 4

#### March 2014

Program Change: Increase class size. The commission **approved the class size increase**; the program is approved to accept up to a class size of 42. No further information is requested.

### March 2011

Accreditation-Continued; Next Comprehensive Evaluation: March 2018. The program is approved for up to 120 students. The commission noted zero areas of noncompliance with the *Standards*.

### September 2010

Proposed Program Change: Maximum aggregate enrollment. The commission **acknowledged the change**; now set at 120. No further information requested.

### September 2008

The commission accepted the report addressing 3<sup>rd</sup> edition

- **Standard A1.07a** (provided evidence the sponsoring institution assures that the program has sufficient financial resources to operate the educational program and to fulfill obligations to matriculating and enrolled students),
- **Standard A3.01** (provided evidence program policies apply to all students and faculty regardless of location),
- **Standard A3.07g** (provided evidence the program defines, publishes and makes readily available to prospective and enrolled students estimates of all costs related to the program) and
- **Standard B7.01** (provided evidence the program provides medical and surgical clinical practice experiences that enable students to meet program expectations and acquire the competencies needed for clinical PA practice). No further information requested.

#### March 2008

The commission **accepted the report** addressing 3<sup>rd</sup> edition

- **Standard C4.02** (provided evidence the program applies comparable evaluation processes to clinical sites regardless of geographic location) and
- **Standard C4.03** (provided evidence the program ensures and documents that each clinical site provides the student access to the physical facilities, patient populations, and supervision necessary to fulfill the program's expectations of the clinical experience).

Due July 11, 2008 (Standards, 3rd edition) -

- **Standard A1.07a** (lacked evidence the sponsoring institution assures that the program has sufficient financial resources to operate the educational program and to fulfill obligations to matriculating and enrolled students),
- **Standard A3.01** (lacked evidence program policies apply to all students and faculty regardless of location),
- **Standard A3.07g** (lacked evidence the program defines, publishes and makes readily available to prospective and enrolled students estimates of all costs related to the program) and

First accredited: November 1972 Next review: March 2028 Maximum class size: 42 Page 3 of 4

• **Standard B7.01** (lacked evidence the program provides medical and surgical clinical practice experiences that enable students to meet program expectations and acquire the competencies needed for clinical PA practice).

# September 2007

The commission accepted the report addressing 3<sup>rd</sup> edition

- **Standard A1.08e** (provided evidence the sponsoring institution assures the program has secure storage for student files and records),
- **Standard A3.06** (provided evidence the program does not require that students supply their own clinical sites or preceptors for program-required clinical rotations),
- **Standard B6.01c** (provided evidence the program provides instruction in reimbursement, including documentation, coding, and billing),
- **Standard B7.03d** (provided evidence supervised clinical practice experience is provided in long-term care settings),
- **Standards C1.01c and e** (provided evidence the program regularly collects and analyzes c) student failure rates in individual courses and rotations and e) graduate evaluations of curriculum and program effectiveness),
- **Standards C2.01b1 and b3** (provided evidence the self-study report documents b1) student attrition, deceleration, and remediation and student failure rates in individual courses and rotations). No further information requested.

# March 2007

Accreditation-Continued; Next Comprehensive Evaluation: March 2011. Report due July 13, 2007 (*Standards*, 3<sup>rd</sup> edition) -

- **Standard A1.08e** (lacked evidence the sponsoring institution assures the program has secure storage for student files and records),
- **Standard A3.06** (lacked evidence the program does not require that students supply their own clinical sites or preceptors for program-required clinical rotations),
- **Standard B6.01c** (lacked evidence the program provides instruction in reimbursement, including documentation, coding, and billing),
- **Standard B7.03d** (lacked evidence supervised clinical practice experience is provided in long-term care settings),
- **Standards C1.01c and e** (lacked evidence the program regularly collects and analyzes c) student failure rates in individual courses and rotations and e) graduate evaluations of curriculum and program effectiveness),
- **Standards C2.01b1 and b3** (lacked evidence the self-study report documents b1) student attrition, deceleration, and remediation and student failure rates in individual courses and rotations).

Due January 11, 2008 (Standards, 3rd edition) -

• **Standard C4.02** (lacked evidence the program applies comparable evaluation processes to clinical sites regardless of geographic location) and

First accredited: November 1972 Next review: March 2028 Maximum class size: 42 Page 4 of 4

• **Standard C4.03** (lacked evidence the program ensures and documents that each clinical site provides the student access to the physical facilities, patient populations, and supervision necessary to fulfill the program's expectations of the clinical experience).

### September 2003

Informational Item: The commission reviewed a letter from the New York State Education Department verifying registration of the Albany Medical College Physician Assistant program leading to the Master of Science degree. No further action required.

### March 2003 (Albany Medical College)

Program Change: Transfer to a master's degree curriculum. The commission **acknowledged the change**.

Transfer of Sponsorship: Hudson Valley Community College relinquished its joint sponsorship of the program. The commission **acknowledged the sponsorship transfer**.

### September 2000 (Albany Medical College/Hudson Valley Community College)

The commission accepted the report addressing 1<sup>st</sup> edition

• **Standard II B 2 b** (provided evidence the learning objectives for didactic and clinical courses are sufficiently detailed to adequately specify the competence for student performance). No further information requested.

# March 2000 (Albany Medical College/Hudson Valley Community College)

Accreditation-Continued; Next Comprehensive Evaluation: March 2007. Report due August 1, 2000 (*Standards*, 1<sup>st</sup> edition) -

• **Standard II B 2 b** (lacked evidence the learning objectives for didactic and clinical courses are sufficiently detailed to adequately specify the competence for student performance).

NOTE: The ARC-PA commission action information available begins in March 2000. Information from initial accreditation in 1972 by the American Medical Association Council on Medical Education and subsequent accrediting organizations is not available.