Gannon University
Accreditation History

First accredited: October 1978
Next review: March 2027
Maximum class size: 58
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September 2021
The commission acknowledged the report providing evidence of
- Updated changes in response to COVID-19. No further information requested.

March 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.

The commission acknowledged the report providing evidence of
- Updated changes in response to COVID-19. No further information requested.

The commission acknowledged the report providing evidence of

June 2020
The commission acknowledged the report providing evidence of
- The proposed plan in response to COVID-19. No further information requested.

June 2019
The commission accepted the report addressing 4th edition

July 2017
The commission accepted the report providing evidence of
- Website updated with clearly identified total program costs. No further information requested.

The commission accepted the report providing evidence of
- Website updated with all costs related to the program.
Additional information (update website with clearly identified total costs) due June 21, 2017.

The commission accepted the report addressing 4th edition
- **Standards A3.14d-h** (provided evidence the program publishes and makes readily available to enrolled and prospective students d) all required curricular components, e) academic credit offered by the program, f) estimates of all costs [tuition, fees, etc.] related to the program and h) policies about student employment while enrolled in the program) and
- **Standard A3.15e** (provided evidence the program makes readily available to prospective students any required technical standards for enrollment). No further information requested.

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- Updated website with success in achieving goals and PANCE Pass Rate Summary Report.
Additional information (update website with all costs) due June 26, 2017.

January 2017
Report due March 24, 2017 (Standards, 4th edition) -
  - **Standards A3.14d-h** (lacked evidence the program publishes and makes readily available to enrolled and prospective students d) all required curricular components, e) academic credit offered by the program, f) estimates of all costs [tuition, fees, etc.] related to the program and h) policies about student employment while enrolled in the program) and
  - **Standard A3.15e** (lacked evidence the program makes readily available to prospective students any required technical standards for enrollment).
  - Update website with success in achieving goals and PANCE Pass Rate Summary Report.
Due February 1, 2019 (Standards, 4th edition) -

September 2013
Program Change: Change in class size (48 to 58), effective January 1, 2016. The commission approved the proposed change. No further information requested.

September 2010
The commission accepted the report addressing 3rd edition
  - **Standard A1.07h** (provided evidence the sponsoring institution assures that the program has readily available access to the full text of current books, journals, periodicals and other reference material related to the curriculum for students and faculty).
  - **Standard B7.03e** (provided evidence the program documents that every student has supervised clinical practices experience with patients seeking long-term care). No further information requested.

March 2010
Report due July 1, 2010 (Standards, 3rd edition) -
  - **Standard A1.07h** (lacked evidence the sponsoring institution assures that the program has readily available access to the full text of current books, journals, periodicals and other reference material related to the curriculum for students and faculty).
December 30, 2010 (Standards, 3rd edition) -
  - **Standard B7.03e** (lacked evidence the program documents that every student has supervised clinical practices experience with patients seeking long-term care).

September 2009
The commission accepted the report providing evidence of
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- New faculty. No further information requested.

March 2009
Program Change: Change in aggregate enrollment (120 to 144). The commission accepted the report. Additional information (new faculty) due July 1, 2009.

September 2007
The commission accepted the report providing evidence of
- Program announcements and student health records. No further information requested.

March 2007
The commission accepted the report addressing 2nd edition
- Standards C2.2c and d (provided evidence the self-study includes critical analysis of c) student failure rates in individual courses and rotations and d) student evaluations of individual didactic courses, clinical experiences, and faculty),
- Standard C4.1b (provided evidence the self-study documents outcome data analysis) and
- Standard D1.2 (provided evidence student health records are confidential).
Additional information (program announcements and clarification regarding student health records) due July 13, 2007.

Program Change: Change in length of program (87 to 105 credits), effective August 2007. The commission acknowledged the proposed change. Maximum Student Capacity: 120 (due to increase in length of program). No further information requested.

March 2006
Report due January 12, 2007 (Standards, 2nd edition) -
- Standards C2.2c and d (lacked evidence the self-study includes critical analysis of c) student failure rates in individual courses and rotations and d) student evaluations of individual didactic courses, clinical experiences, and faculty),
- Standard C4.1b (lacked evidence the self-study documents outcome data analysis) and
- Standard D1.2 (lacked evidence student health records are confidential).

September 2002
The commission accepted the report providing evidence of
- Learning objectives for patient care in geriatrics. No further information requested.

September/December 2001
The commission accepted the report addressing 2nd edition
- Standard A5.17b (provided evidence the program publishes policies regarding transfer of credit),
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- **Standard A5.8** (provided evidence the program publishes and makes readily available policies and processes by which students may perform service work while enrolled in the program),
- **Standard B1.4** (provided evidence all students have clinical experiences in emergency medicine) and
- **Standard B6.2f** (provided some evidence of learning objectives specific to the care of geriatric patients).

Additional information (learning objectives for patient care in geriatrics) due August 1, 2002.

**March 2001**
Report due August 1, 2001 (**Standards**, 2nd edition) -
- **Standard A5.17b** (lacked evidence the program publishes policies regarding transfer of credit),
- **Standard A5.8** (lacked evidence the program publishes and makes readily available policies and processes by which students may perform service work while enrolled in the program),
- **Standard B1.4** (lacked evidence all students have clinical experiences in emergency medicine) and
- **Standard B6.2f** (lacked evidence of learning objectives specific to the care of geriatric patients).

**September 1999**
The commission accepted the report providing evidence of
- The sequencing of curriculum. No further information requested.

**March 1998**
Program Change: Change in degree awarded (baccalaureate to master’s curriculum), effective Fall 1999.
The commission acknowledged the proposed change. Additional information (sequencing of curriculum) due by February 1, 1999.

NOTE: The ARC-PA commission action information available begins in March 1998. Information from initial accreditation in 1978 by CAHEA and subsequent accrediting organizations is not available.