Northeastern University
Accreditation History

First accredited: September 1972
Next review: April 2035
Maximum class size: 52

September 2025
The commission **did not accept the report** addressing 5th edition

- ***Standard B3.06a*** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)

No further information requested as the program demonstrated compliance with comparable 6th edition standard A2.16b.

The commission **accepted the report** addressing 5th edition

- ***Standard B4.01b*** (provided evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)
- ***Standard C1.02a*** narrative (provided evidence the program implements its ongoing self-assessment process by conducting data collection)

No further information requested.

Report due November 14, 2025:

- Update SCPE, PANCE and budget data in the program management portal.

March 2025
Accreditation-Continued; Program has demonstrated continued and sufficient compliance with most ARC-PA *Standards*. The commission noted 3 areas of noncompliance with the *Standards*.
Next Comprehensive Evaluation: March 2035. Maximum class size: 52.
Report due June 15, 2025 (*Standards*, 5th edition):

- ***Standard B3.06a*** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)
- ***Standard B4.01b*** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)
- ***Standard C1.02a*** narrative (lacked evidence the program implements its ongoing self-assessment process by conducting data collection)

Report due April 5, 2027 (*Standards*, 5th edition) modified self-study report:

- ***Standard C1.02a*** (lacked evidence the program implements its ongoing self-assessment process by conducting data collection)

March 2021
The commission **accepted the report** providing evidence of

- Updated supervised clinical practice experience [SCPE] syllabi and assessments and notification of each cohort's return to SCPEs. No further information requested.

June 2020
The commission **acknowledged the report** providing evidence of

- The proposed plan in response to COVID-19.

Additional information (updated supervised clinical practice experience [SCPE] syllabi and assessments and notification of each cohort's return to SCPEs) due September 7, 2020.

March 2019
The commission **accepted the report** providing evidence of

- Modified Self-Study Report with updated appendices and copies of survey instruments. No further information requested.

September 2017
The commission **accepted the report** addressing 4th edition

- ***Standard C2.01b***, modified Self-Study Report (mSSR) (provided some evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment).

Additional information (mSSR, update two appendices and include copies of each survey instrument used to gather data for appendices) due June 1, 2018.

July 2017
Program Change: Dual Degree Program. The commission **acknowledged the proposed program** (combined Master of Science in Physician Assistant Studies and Master of Science in Health Informatics program [PA-MSHI]), effective August 20, 2018. No further information requested.

September 2016
Program Change: Increase in class size (incremental, 40 to 43, effective August 2017; to 46, effective August 2018; to 49, effective August 2019 and to 52, effective August 2020) The commission **approved the proposed change**. No further information requested.

Program Change: Dual Degree Program. The commission **acknowledged the Dual Degree Program** (MS in Physician Assistant Studies/Master of Public Health [PA-MPH]), effective August 27, 2017. No further information requested.

May 2016
The program was notified of a change in the accreditation process (time extended between regularly scheduled validation reviews from seven to ten years). Program's next validation review changed from March 2022 to March 2025.

September 2015
The commission **accepted the reports** addressing 4th edition

- ***Standard A2.03*** (provided evidence principal faculty are sufficient in number to meet the academic needs of enrolled students) and

- ***Standard B1.09*** (provided evidence, for each didactic course, the program defines and publishes instructional objectives that guide student acquisition of required competencies).
- ***Standard C3.04*** (provided evidence the summative evaluation of each student within the final four months of the program includes evaluation of patient care skills, interpersonal communication and professionalism) and
- ***Standard C4.02*** (provided evidence the program documents that each clinical site provides the student access to patient populations necessary to fulfill program expectations of the clinical experience). No further information requested.

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

- Updated PANCE pass rate in Program Management Portal. No further information requested.

March 2015

Accreditation-Continued; Next Comprehensive Evaluation: March 2022. The program's maximum class size remains 40.

Report due April 1, 2015

- Update PANCE pass rate in Program Management Portal.

Due June 1, 2015 (*Standards*, 4th edition) -

- ***Standard A2.03*** (lacked evidence principal faculty are sufficient in number to meet the academic needs of enrolled students) and
- ***Standard B1.09*** (lacked evidence, for each didactic course, the program defines and publishes instructional objectives that guide student acquisition of required competencies).

Due July 1, 2015 (*Standards*, 4th edition) -

- ***Standard C3.04*** (lacked evidence the summative evaluation of each student within the final four months of the program includes evaluation of patient care skills, interpersonal communication and professionalism) and
- ***Standard C4.02*** (lacked evidence the program documents that each clinical site provides the student access to patient populations necessary to fulfill program expectations of the clinical experience).

Due June 1, 2017 (*Standards*, 4th edition) –

- ***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).

Program Change: The commission **did not approve** the class size increase (40 to 50).

September 2014

Program Change: Class size increase incorporated into the validation review. The commission **acknowledged the proposed change**. No further information requested.

Northeastern University
Accreditation History

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Next review: April 2035
Maximum class size: 52

March 2014
Program Change: Increase in class size. The commission **did not approve the proposed change**. Information requested (willingness to consider class size increase during comprehensive evaluation) due April 11, 2014.

September 2012
Program Change: Increase in maximum student capacity (72 to 85), effective August 2012. The commission **acknowledged the proposed change**. No further information requested.

September 2009
The commission **accepted the report** addressing 3rd edition

- ***Standard A2.03*** (provided evidence core faculty are sufficient in number to meet the academic needs of enrolled students). No further information requested.

September 2008
Accreditation-Continued; Next Comprehensive Evaluation: September 2014. The program is approved for up to 72 students.
Report due July 10, 2009 (*Standards*, 3rd edition) -

- ***Standard A2.03*** (lacked evidence core faculty are sufficient in number to meet the academic needs of enrolled students).

March 2003
The commission **accepted the report** addressing 2nd edition

- ***Standard B1.4*** (provided evidence the program provides, for each didactic and clinical course, a clearly written syllabus that includes measurable instructional objectives and expected student competencies objectives). No further information requested.

September 2002
Accreditation-Continued; Next Comprehensive Evaluation: September 2008. Maximum Student Capacity: 60.
Report due January 15, 2003 (*Standards*, 2nd edition) -

- ***Standard B1.4*** (lacked evidence the program provides, for each didactic and clinical course, a clearly written syllabus that includes measurable instructional objectives and expected student competencies objectives).