Below are many important Notes to all programs. Some provide clarification and some refer to documents on the ARC-PA web site Accreditation Resource page (http://www.arc-pa.org/accreditation/resources/).

EXECUTIVE SUMMARY EXCERPTS FROM MARCH 2015 MEETING

Accreditation Actions as of April 6, 2015

Acknowledge **15** new PD, **12** New IPD, **8** new MD, **2** IMD program changes
Action Taken On:
10 Continuing program applications
7   Provisional program applications
6   Provisional monitoring application
2   Moving from provisional accreditation
2   Focused visit
2   Probation visit
0   Expansion to a Distant Campus application
0   Postgraduate third year renewal reports
3   Program changes (class size increase)
9   Program report due

Expedited Reviews – Total **24** reviews **20** (report due); **4** (program change)
1 Referred to full commission
31 Program Informational l items

(Accreditation actions are posted on the ARC-PA web site after each meeting and after all programs have been notified of commission decisions.)

The total number of accredited PA programs as of April 10, 2015 is **196.**
The total number of **clinical postgraduate** accredited programs at present is **8.**

11 programs are currently on Accreditation-Probation status
1 program is currently on Accreditation-Administrative Probation status
41 programs are currently on Accreditation-Provisional status

Projected Workload
- The current projected workload includes an additional **77** new PA programs for provisional accreditation consideration by **2020**

- While the need for PA healthcare providers remains strong, the commission remains concerned about the availability of clinical education sites for all types of healthcare students and requests that our collaborating organizations, when possible, promote to their members participation in clinical education. The ability of current and emerging programs to recruit qualified program leadership and faculty remains worrisome to the commission.

ARC-PA SUMMER WORKSHOP OPEN TO PROVISIONAL APPLICANT PROGRAMS

The ARC-PA summer workshop is open to faculty and staff from currently accredited programs **and** selected provisional applicant programs based on agenda date. This year's workshop will be held at a new venue, the historic Union Station Hotel in St. Louis, Missouri. The main workshop will be presented July 19-21, 2015. The workshop will include a separate session for programs preparing for a site visit of any type. Workshop information is available here http://www.arc-pa.org/workshops/summer2015.html . The deadline for registration is June 1, 2015. Seats remains but it is limited by space and the date when the program will next be reviewed by the commission.

ARC-PA PROVISIONAL PATHWAY CONFERENCE CHANGES DATES AND VENUE IN 2015

The Provisional Pathway Conference is now offered yearly in the summer. This conference will require one full day and can be attended as a stand-alone conference or in conjunction with the summer accreditation workshop. The conference will occur Saturday, July 18, 2015 at the historic Union Station Hotel in St. Louis, Missouri. All applicant programs must attend the conference at least once prior to application. Conference information is available here http://www.arc-pa.org/workshops/provisional2015.html. Conference registration deadline is June 1, 2015. Space is still available.

ARC-PA DECISIONS: QUELLING THE RUMOR MILL

The familiar "The onus of demonstrating compliance with the *Standards* resides with the applicant program" directly correlates to the following:

> Demonstration by an applicant or accredited program of their compliance with the Accreditation Standards for Physician Assistant Education is the determinant in the accreditation decision-making process of the ARC-PA.

In other words, regardless of street rumors, ARC-PA decisions are based on nothing more or nothing less.

SPECIAL EDITION NOTES TO PROGRAMS: THE SSR

A special edition Notes to Programs on the SSR will be published on the ARC-PA web site and sent to all programs in the next few weeks. This edition will address issues applicable to writing the SSR whether it be for the SSR two years before a comprehensive review, due with an application, or due as a required report.

FEE ADJUSTMENTS (BOTH LINGUISTICALLY AND MONETARILY)

At its March 2015 meeting, the ARC-PA changed the fees charged to applicant and accredited programs for accreditation services. The fee structure is found on the ARC-PA web site at http://www.arc-pa.org/about/accreditation-fees/

Annual Accreditation Maintenance Fee replaces Annual Accreditation Fee to better reflect the multitude of services provided to programs throughout the year. These include access to the program portal, monitoring of data, review of program reports, updated application materials and manuals, provision of educational programming and accreditation related activities. The fee remains at **$10, 000** annually. Next fall an adjustment will be announced that will be effective in 2018.

Provisional Application Fee – A fee of **$10,000** was assessed last year for all new applicant programs that had not at the time made their initial down payment for placement on a future commission agenda. The fee is designed to recover the significant amount of staff time needed to assist applicant programs through the process, complete document reviews, manage the preparation and conduct the site visit and facilitate document management through and beyond the commission meeting.

Having achieved Accreditation-Provisional status, a program is billed a prorated Annual Accreditation Maintenance Fee to cover the period until the next regular 12 month billing cycle.

Expansion to a Distant Campus Application Fee – This **$4,000** fee is assessed for each Expansion to a Distant Campus application to recover expenses and the cost of the site visit.

Interval Assessment Fee – This new fee covers the commission's costs in monitoring and assisting a program through the Accreditation-Provisional process until it achieves Accreditation-Continued status (applies to #1 and #2 below).

The fee will also be charged to programs with Accreditation-Probation status. In an effort to be as supportive as possible to programs that find themselves on probation, the commission requests and reviews more data and documentation in an effort to afford the program every opportunity to be successful. This includes incorporating a site visit near the end of the probationary period to verify and validate that changes made by the program are in place.

The Interval Assessment Fee is $5,000 for each category below:
1. Provisional Monitoring (includes site visit expense)
2. Final Provisional (transition to Accreditation-Continuing, includes site visit expense)
3. Probation Monitoring (includes site visit expense)
4. Focused Assessment Fee + direct expenses associated with a site visit if required. A Focused Assessment may be conducted at any time to evaluate specific program/institution compliance issues or to obtain information relative to an issue or issues that, if not corrected may lead to an adverse accreditation decision. This requires significant staff time throughout the process.

Appeals Fee - These fees were increased as of January 1, 2015, to capture the additional expenses incurred to implement the process and engage legal counsel.

Reconsideration - **$5,000**
Appeal - **$8,000**
(In addition to other expenses as detailed in the Appeals Policy)

PANCE REQUIRED REPORTS FOR LOW FIRST TIME TAKER PASS RATES
The ARC-PA continues to review the PANCE first time pass rate percentages by student cohort. Any program with a PANCE pass rate percentage of 82 % or less for the 2014 cohort must submit an analysis of PANCE performance to the ARC-PA **by July 1, 2015**. In any year that a program's PANCE pass rate for first time takers by cohort for that year has a pass rate percentage of 82% or less, the program must submit an analysis of PANCE performance by July 1 of the following year. The NCCPA usually provides programs their previous year's data in February.

The basis for the report is the ARC-PA's Four Key Elements of Analysis. The report format is the same as that used within the self-study report. The report form is available on the Program Change Forms page of the ARC-PA web site.

POSTING OF ACCREDITATION ACTIONS

In an attempt to provide enhanced transparency for the public, the commission continues to post the results of accreditation actions from commission meetings. The actions for each program reference the major categories or subcategories within the *Standards* for which the program must submit a report. For example, a program receiving a citation for standard A3.15 may be listed as having citations related to policies; standard A2.18 program personnel; standard B3.05 supervised clinical practice.   The standard reference is not provided in the posting.

ACCREDITATION PROCESS CHANGE IMPLEMENTATION

The ARC-PA continues its transition to the new accreditation process. Changes have been implemented over several years. **It is important for programs to note that many of the dates related to materials submission are based on the dates of the validation review site visit.** Site visits often occur months before a program is discussed at a commission meeting. The date of the site visit is the date used by the commission in assessing the program's compliance with the *Standards*.

The ARC-PA distributes new application materials as they become available, with the goal of having materials to programs one year in advance of the submission deadline. Updated sample applications for new provisional applicants, provisional monitoring and validation visits, as well as a sample SSR to be submitted 2 years before a validation review, are posted on the ARC-PA web site in the Continuing and Provisional sections. Programs will be able to begin drafting potential responses to questions using Word 2010 or later. These sample application components are not to be used for submission to the ARC-PA.

Beginning with programs on the 2016 September agenda, the ARC-PA will use the SSR submitted two years before the visit (2014) to help customize the site visit agenda.

APPLICATION OF RECORD

Programs are reminded about the Application of Record terminology in the application, in the letter to the program director confirming the assignment of site visitors and in the SV Protocol for Program Directors.

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 and will not 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 must be sent with the program's response to observations.

The SV team is advised not to accept any new materials not already a component of the application of record. The team will not accept changes to or new appendices to the original application, which includes

not accepting new or updated course syllabi replacing those required in the application. In NO circumstance will the SV team accept a NEW application document.

However, there may be an occasion for a program to present some revised or new information at the time of the visit. Specific examples would be documentation related to a change in faculty or a new hire since application submission, correction of substantive typographical errors, or provision of a page that was determined to be missing by ARC-PA staff as they reviewed the application prior to the visit. In such cases, the team may consider these documents in its review of the program and make a determination as to whether the information should be submitted with the program response to the site visit team observations.

PROGRAM DEFINED EXPECTATIONS

In 2013, the commission began a renewed focus on the topic of "program defined expectations" as referenced in the *Standards* and used by programs. The Spring 2013 Notes addressed this issue (*Standards Related to Program Expectations and Requirements for Practice*) by clarifying several related standards.

At the fall 2013 PAEA meeting, the ARC-PA shared a power point presentation about this topic as it relates to programs defining the expectations in ways that demonstrate students' preparation for entry into practice. Additionally the session focused on the assessment of student performance and demonstration that they meet the expectations. This power point remains on the ARC-PA Manuals and Guides web page.

Programs still have difficulty in documenting their program defined expectations for students and faculty, conveying their program defined expectations to the commission, and developing means of assessing these as students progress through the program.

The commission believes that

> "What programs have moved away from is the ability to define requirements in the form of measurable learning outcomes. The concept of measurable learning outcomes does not equate to a number. Rather than just relying on numerical evidence of case logs, successful programs indicate it is the continuum of experiences of increasing rigor and interrelationship that guides learners to develop as clinicians. This approach can help the student develop from novice to skilled learner, even to expert, as the learner moves through an appropriately sequenced curriculum. Defining program expectations and competencies to be acquired during SCPEs reinforces and aligns the important content areas of the didactic curriculum and provides a continuum of that material within the clinical year experiences."

Programs are encouraged to review the presentation and engage in and document substantive discussions within their programs about their curricula and performance evaluation mechanisms related to the well-defined expectations for competency.

CHEA RECOGNITION

The ARC-PA is in the final stage of its review by the Council for Higher Education Accreditation (CHEA) for ongoing Recognition. An observer from CHEA attended the fall 2014 ARC-PA meeting, doing much the same as an ARC-PA site visitor at a program. The observer reviewed materials in advance of the meeting and, following CHEA procedures, verified and validated that the commission was following its policies related to review of programs. ARC-PA staff presented before the CHEA Committee on Recognition in March 2015. The CHEA Board will review the recommendation and take action at its May 2015 meeting.

APPLICATION APPENDIX 16 SYLLABI REQUIRED

There has been some confusion as to what is to be included in Appendix 16 of any of the applications for accreditation. Appendix 16 is to have syllabi which contain the instructional objectives for the specific course content areas listed. Including representative syllabi as a component of the application of record allows commissioners to review both instructional objectives and program syllabi for selected content areas.

The course content listed varies by type and date of application. For most programs the content listed will equate to one syllabus for each course content area listed. However, if the course content covers several different courses in the program, such as content for interprofessional education or physical diagnosis, the program is to submit the syllabus that covers most of the content and supplement that with a listing of other instructional objectives, referenced to the other courses which complete the content area.

Programs completing application materials should direct questions about the application to staff through accreditationservices@arc-pa.org.

SITE VISITOR ROLE

A site visit is the peer evaluation component of the accreditation process. Its success depends on the mutual respect and performance of appropriate responsibilities by all parties involved. After being selected by the ARC-PA for an assignment, site visitors are asked to identify any potential conflicts of interest that would disqualify them.

The role of the site visitor is to verify, validate and clarify the information provided by the program in its application materials and on site as evidence presented in support of the program's compliance with the *Standards*. Site visitors are not allowed to suggest improvements, provide consultation or discuss how they might approach an issue in their own program. Their role is strictly defined by the ARC-PA.

Site visitors do not speak on behalf of the ARC-PA and cannot predict the accreditation actions that will be taken by the ARC-PA. The report they submit is only one part of the assessment conducted by the commission, which is solely responsible for accreditation decisions.

EXAMPLES OF EXAMINATIONS USED FOR STUDENT EVALUATION REMINDER

The ARC-PA no longer requires that programs submit examples of examinations used for student evaluation as a component of the appendices. The site visit team chair will determine in advance which evaluation instruments may be needed for review at time of the site visit in support of the C3 standards.

Standard A3.14 addresses the general program information that *must* be defined, published and made *readily available* to enrolled and *prospective students*.

A3.14a refers to the program's accreditation status. **In order to be in compliance with A3.14a**, the program must publish the official wording provided by the ARC-PA exactly as written. *The expectation is that this will be published and available on the home page of the program's web site or as a link directly from the home page with the category Program Accreditation.*

A3.14b indicates that one such area is "the success of the program in achieving its goals." This is above and beyond the PANCE data. **In order to be in compliance with A3.14b**, the program must first define and publish its goals. *The expectation is that this document will be easily recognizable from the home page of the program web site in a category related to program goals.*

A3.14c refers to the first time PANCE results. As a reminder, in **order to be in compliance with A3.14c**, the program is expected to publish the official NCCPA PANCE Pass Rate Summary Report as provided by the NCCPA through its program portal. *The expectation is that this document will be easily recognizable from the home page of the program web site, in a category related to graduate outcomes, not hidden within other categories. If the link connects to a separate web page in the site, the PANCE report must be readily evident.*

Standard A3.19 addresses issues related to student files. To clarify that files may be electronic and that being kept does not mean must be physically housed in the program offices, an annotation to this standard has been developed.

A3.19   Student files kept by the program *must* include documentation:
a)   that the student has met published admission criteria including advanced placement if awarded,
b)   that the student has met institution and program health screening and immunization requirements,
c)   of student performance while enrolled,
d)   of remediation efforts and outcomes,
e)   of summaries of any formal academic/behavioral disciplinary action taken against a student and
f)   that the student has met requirements for program completion.

ANNOTATION: Files kept by the program may be kept in paper or electronic format and need not be physically located in the program offices. If not located in the program offices, they are to be accessible by appropriate program personnel. File documents must be able to be copied for distribution for others with need and authority to access the files.

Standard B3.06 addresses the individuals with whom supervised clinical practice experiences (SCPEs) should occur.

B3.06   *Supervised clinical practice experiences should* occur with:

ANNOTATION: It is expected that the program will provide *supervised clinical practice experiences* with *preceptors* who are prepared by advanced medical education or by experience. The ARC-PA will only consider *supervised clinical practice experiences* occurring with physician preceptors who are not board certified or with other licensed health care providers serving as *preceptors* when they are evaluated and determined by the program faculty to be appropriate for the specified area of instruction, under circumstances unique to the program.

a) physicians who are specialty board certified in their area of instruction,
b) PAs teamed with physicians who are specialty board certified in their area of instruction or
c) other licensed health care providers experienced in their area of instruction.

It is the program's responsibility to demonstrate compliance with the *Standards*, and a standard using the word *should* is still a required standard. The term *should* designates requirements so important that their absence must be justified by the program. Programs that do not meet this standard are expected to address why they are unable to do so with compelling reason, acceptable to the ARC-PA. Programs will be cited for failure to provide adequate justification for not meeting a "should" standard.

For standard B3.06 a-c, questions arise about the annotation related to the stipulation for SCPE with preceptors not board certified, or other licensed health care providers experienced in their area of instruction, "when they are evaluated and determined by the program faculty to be appropriate for the specified area of instruction, under circumstances unique to the program." Programs want to know what criteria they can use to present a compelling reason the ARC-PA will accept. Since the circumstances must be "unique to the program," there are no uniform compelling reasons. Programs often look at the availability of board certified preceptors in their communities, the years of experience and skill of non-board certified licensed preceptors, previous board certification, specialty discipline related CME, or specialty related residency experience. Evaluations by students and faculty over time are sometimes presented. What is important, as noted in the annotation, that the program develop a standard and evaluate the preceptor to determine that the preceptor is appropriate to serve in the role required of the discipline specific SCPE.

The ARC-PA realizes that there are many reasons why individuals without board certification may be excellent preceptors and does not want programs to eliminate these qualified practitioners and educators from their instructional faculty. This standard allows programs the flexibility to provide the best possible education, using preceptors who it has determined by evaluation to be otherwise qualified and appropriate.

POLICY CHANGES
Programs are reminded of policy changes approved by the commission at its March 2014 meeting related to expansion in class size and expansion to a distant campus. Updated policies 9.2, 10.1 and 10.2 may be found on the Policies and Bylaws page of the ARC-PA web site

Provisional Applicant programs should note these policies apply to them regardless of the policies that may have been in place when they first started planning several years ago.

USE OF ARC-PA LOGO

The ARC-PA policy is provided here in response to questions received from programs about using the ARC-PA log on web sites and in printed materials.

5.9   Use of ARC-PA Logo by Programs and Sponsoring Institutions

The ARC-PA logo is the exclusive property of ARC-PA. The ARC-PA allows accredited programs and their sponsoring institutions to use the ARC-PA logo in publications and displays. All other entities must obtain permission from the ARC-PA prior to use of the logo. All users must adhere to the following:

1.   The logo must be used in its entirety and not modified except that it may be reduced or enlarged to suit the use. The scale of the elements must be retained.
2.   The logo may be reproduced in black and white.
3.   The logo may NOT be used by programs that have applied for, but not yet received, accreditation.
4.   When programs that are not accredited by the ARC-PA are included in the publication and/or displays, then accompanying text must be included clarifying which programs are ARC-PA accredited.
5.   Use of the logo shall be subject at all times to revocation and withdrawal by ARC-PA when, in its sole judgment, its continued use would not serve the best interests of ARC-PA or the public.

Programs interested in using the logo should contact Loretta Waldron, Director of Accreditation Services.

DEGREE DEADLINE REMINDER
The *Standards* require that programs not currently offering a graduate degree *must* transition to conferring a graduate degree upon all PA students who matriculate into the program after 2020. The degree *should* be awarded by the sponsoring institution.

Programs housed in institutions unable to offer a graduate degree, those that do not yet offer a graduate degree or those that currently affiliate with institutions separate from their sponsoring institutions should review the ARC-PA document about the *Standards* degree deadline, available on the ARC-PA web site Accreditation Resources Page.

Programs should review the Change Forms page of the ARC-PA web site to find the forms and steps needed to demonstrate compliance with the degree requirement. There are separate forms for programs changing degrees within their own institutions and those affiliated with a separate institution.

QUESTIONS OR COMMENTS?
Programs that have questions or comments about these Notes or any issue related to the accreditation process are encouraged to contact the ARC-PA by email or phone. All contact information is posted on the ARC-PA web site at http://www.arc-pa.org/contact/staff/.