

NOTES TO PROGRAMS

Spring 2016

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

EXECUTIVE SUMMARY EXCERPTS FROM MARCH 2016 MEETING

Accreditation Actions as of April 1, 2016

Acknowledge **12** new PD, **8** New IPD, **12** new MD, **0** IMD program changes

Action Taken On:

- 4** Continuing program applications
- 13** Provisional program applications
- 7** Provisional monitoring applications
- 1** Final Provisional - Moving from provisional accreditation
- 0** Focused visit
- 3** Probation visit
- 1** Expansion to a Distant Campus application
- 0** Postgraduate third year renewal reports
- 1** Program changes (class size increase)
- 5** Program report due

Expedited Reviews – Total **36** reviews: **29** (report due); **7** (program change)

3 Referred to full commission

27 Program Informational 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 1, 2016 is **210**

The total number of accredited **clinical postgraduate** programs at present is **8**.

There are **8** programs with an accreditation status of Accreditation-Probation

There are **50** programs with an accreditation status of Accreditation-Provisional

Projected Workload

- The current projected workload includes an additional **64** new PA programs for initial provisional accreditation consideration through March 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.

NEW EXECUTIVE STAFF

Sharon L. Luke, MSHS, PA-C, has accepted the position of Executive Director of the ARC-PA. She becomes only the third executive leader of the ARC-PA since 1971. Ms. Luke, who currently serves as an Assistant Director with the ARC-PA, will begin her new role July 1, 2016. She will work in the Georgia offices of the ARC-PA. You can read more about Sharon on the News page of the ARC-PA website. <http://arc-pa.org/documents/Sharon%20Luke%20announcement%202016.pdf>

Suzanne York, PA-C, MPH, assumed the role of Associate Executive Director on April 1, 2016. She was working as an Assistant Director of the ARC-PA until that time. Sue is based in Detroit, Michigan.

STANDARDS CLARIFICATION / INTERPRETATION

The commission made several changes to the *Standards* at its March 2016 meeting, as noted below. A new version of the *Standards* will be available soon on the web. Applications not yet sent to programs will include the changes. Programs that are working on current applications will be asked to address the changes, if applicable to the program, at the time of their site visits.

Standard A2.02 was changed to eliminate the option to count a medical director working at 60% FTE or greater as one of the required non-PA principal faculty, as noted below:

A2.02 The program must have program faculty that include the program director, principal faculty, medical director, and instructional faculty.

- a) The program director must be assigned to the program on a 12 month full time basis. At least 80% of that time should be devoted to academic and administrative responsibilities in support of the program.

ANNOTATION: Program directors often hold other leadership roles within the institution or spend non program time in clinical practice or research.

- b) The program must have at least three FTE principal faculty positions. Two FTE principal faculty positions must be filled by PA faculty who currently are NCCPA-certified.

Standard A2.08 now has an annotation as noted below addressing effective leadership and management by the program director:

A2.08 The program director *must* provide effective leadership and management.

ANNOTATION: Effective leadership and management involve careful attention to all aspects of the program to assure a solid operational foundation. Effective leaders and managers give careful attention to issues related to personnel, program and institutional processes, and application of resources. They employ strong communication skills in all situations. They analyze and proactively problem solve. They monitor, oversee, mentor, supervise and delegate as appropriate to the individuals, setting, or issue.

[Standard A2.09g](#) now has an annotation as noted below addressing the expectations of a program director demonstrating knowledge about, and responsibility for, participation in the accreditation process:

A2.09 The program director must be knowledgeable about and responsible for program:

- a) organization,
- b) administration,
- c) fiscal management,
- d) continuous review and analysis,
- e) planning,
- f) development and
- g) participation in the accreditation process.

ANNOTATION: Knowledge and responsibility related to participation in the accreditation process involve more than simply completing applications and reports required by the ARC-PA. They are demonstrated by adhering to the *Standards* and ARC-PA policies, and following directions and guidelines provided by the ARC-PA.

[Standard A3.08](#) was edited to delete specific wording of “and the effects of infectious and environmental disease or disability on student learning activities,” as that is more appropriately and globally addressed in A3.07b.

A3.08 The program *must* inform students of written policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk.

ANNOTATION: Policies related to infectious and environmental hazards are expected to address methods of prevention; procedures for care and treatment after exposure, including definition of financial responsibility.

[Standard A3.14](#) was edited to revise the wording and placement of annotations related to subsections of the standard:

A3.14 The program must define, publish and make readily available to enrolled and prospective students general program information to include:

- a) the program’s ARC-PA accreditation status,

ANNOTATION: The program is expected to post on its web site the accreditation status statement provided to the program by the ARC-PA.

- b) the success of the program in achieving its goals,

ANNOTATION: The program is expected to provide factually accurate evidence of its effectiveness in meeting its goals.

- c) first time PANCE rates for the five most recent graduating classes,

ANNOTATION: The program is expected to publish on its web site the PANCE performance data of its graduates by publishing the NCCPA PANCE Pass Rate Summary Report, as provided by the NCCPA through its

program portal, of the most recent five-year first time graduate performance. The program is expected to update this performance data in a timely manner.

- d) all required curricular components,
- e) academic credit offered by the program,
- f) estimates of all costs (tuition, fees, etc.) related to the program,
- g) policies and procedures for refunds of tuition and fees and
- h) policies about student employment while enrolled in the program.

Standard A3.19 was edited to remove “copied for distribution,” to change the focus from what sounded like a requirement for paper documents. Change was to the annotation:

A3.19 Student files kept by the program must include documentation:

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 distributed to others with need and authority to access the files.

Standard B3.02 was edited to include preparing graduates for “entry into” clinical practice. Edits provide consistency of language with other standards.

B3.02 *Supervised clinical practice experiences must* enable students to meet program expectations and acquire the *competencies* needed for entry into clinical PA practice.

ANNOTATION: It is anticipated that the program expectations of students will address the types of patient encounters essential to preparing them for entry into practice. It is required that at a minimum these will include preventive, emergent, acute, and chronic patient encounters.

Standard B3.03 was edited to address “program expectations” as opposed to “program defined expectations.” This change, along with wording “acquire competencies for entry into” clinical practice provides consistency across the *Standards*:

B3.03 *Supervised clinical practice experiences must provide sufficient* patient exposure to allow each student to meet program expectations and acquire the competencies needed for entry into clinical PA practice with patients seeking:

- a) medical care across the life span to include, infants, children, adolescents, adults, and the elderly,
- b) women’s health (to include prenatal and gynecologic care),
- c) care for conditions requiring surgical management, including pre- operative, intra-operative, post-operative care and
- d) care for behavioral and mental health conditions.

The footnote from the C2 section referring to the “descriptive report” was eliminated as this is a term no longer used by the ARC-PA.

Standard C2.01 was edited to add “application” to the list of materials to be *accurately and succinctly documented*, as below:

C2.01 The program *must* prepare a self-study report as part of the application for continuing accreditation that *accurately and succinctly* documents the process, **application** and results of ongoing program self-assessment. The report *must* follow the guidelines provided by the ARC-PA and, at a minimum, *must* document:

Standard C4.01 was edited to remove “defined” from “program defined expectations” for consistency across documents:

C4.01 The program *must* define, maintain and document effective processes for the initial and ongoing evaluation of all sites and *preceptors* used for *supervised clinical practice experiences* to ensure that sites and *preceptors* meet **program expectations** for *learning outcomes* and performance evaluation measures.

ANNOTATION: An effective process or processes involves the program establishing criteria by which to initially evaluate new sites and *preceptors* as well as those that have an ongoing relationship with the program. The process(es) will focus on the established criteria and fit the individual program.

Standard E1.09d was edited to address the issue of approved class size. Programs will now have to report any increase in class size above the number approved by the ARC-PA as entering class size. They will have to submit a form explaining why they have exceeded the approved entering class size:

E1.09 The program must inform and/or receive approvals required from the ARC-PA in writing, using forms and processes developed by the ARC-PA, no less than six months prior to implementation of proposed changes in the following:

d) **any increase above the approved maximum entering class size,**

ANNOTATION: **The maximum entering class size is approved by the ARC-PA upon review of the program by the commission or after approval of a change request for a class size increase. Any increase above the ARC-PA approved maximum entering class size for any reason requires program notification to the ARC-PA.**

The glossary was edited for *Readily Available*:

Readily Available	Made accessible to others in a timely fashion via defined program or institution procedures. Navigation to digital content should take little effort or time.
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STANDARDS REVIEW AND REVISION

The ARC-PA will soon announce the multi-year *Standards* review and revision process. Stakeholder feedback will be sought via email, surveys and open forums. More information will be provided via the website and email as the process details are finalized.

ANNUAL PROGRAM FEES CHANGING MAY 2017

There has not been an increase in annual program fees since 2012, yet the work of the ARC-PA and the cost of doing that work continue to grow. The ARC-PA has and will continue to employ individuals to assure that

the accreditation process remains fair and thorough. A major *Standards* revision will begin shortly. The Portal revisions soon to be released will be accompanied by a transition to using the Portal for the SSR and application. Additionally the website will be transitioning to a new mobile friendly platform. The revised fee structure is available on the website at <http://www.arc-pa.org/about/accreditation-fees/>

NEW SITE VISITOR WORKSHOP

The ARC-PA is planning to host a new site visitor workshop in Minneapolis, Minnesota, October 15-16, 2016. This workshop will require an application from those interested in serving as a site visitor. More information will be sent to programs and posted on the ARC-PA website as it becomes available.

WHEN WILL THE ARC-PA VISIT MY PROGRAM?

As noted in the Fall 2015 Notes, the ARC-PA voted to extend the time between comprehensive validation reviews from seven to 10 years. ARC-PA staff are working on letters for programs to confirm the dates of their next validation review site visits. Program portals will be updated to reflect any changes after letters have been sent.

The ARC-PA continues to streamline the process of accreditation with its focus on the SSR and the use of interval reports as opposed to comprehensive evaluations. As the ARC-PA works to simplify the accreditation process for the future, it will focus on maintaining quality outcomes and consistency. The future holds increased use of the Program Management Portal (see below) and increased use of paperless processes (see below).

ARC-PA TO BE PAPERLESS BY END OF 2017

The ARC-PA plans to be paperless by the end of 2017. This plan will impact the way materials are received by the ARC-PA and sent from the ARC-PA. The paperless environment will affect programs, site visitors and commissioners. Stay tuned for more on the timing and nuances of this move to a better world.

IMPORTANT RESOURCES SUMMARY

The ARC-PA has several documents created to provide guidance to programs. Programs are encouraged to consider these resources over the course of their program planning and not just in relation to accreditation activities. All of these are listed and available on the [Resources](http://www.arc-pa.org/accreditation/resources/) section of the web site at <http://www.arc-pa.org/accreditation/resources/>

- Program Defined Expectations (this wording will be updated to Program Expectations, to parallel recent March 2016 changes to the *Standards*)
- Analysis and the SSR
- SCPE Directions for the Portal
- PANCE Required Report
- Syllabi, Competencies, Objectives
- Notes to Programs (yes, these and all past copies are maintained here)
- Portal Pointers

PORTAL CHANGES ON THE HORIZON

Speaking of a better world, the portal is soon to improve. Most of the changes will occur behind the scenes, but programs will notice a new more modern look and improved functionality. The tab for Affiliated Institutions will be eliminated to make room to add some SSR templates. The portal will track data and send alerts related to noncompliance with certain standards or ARC-PA policies. For example, if a program does not have three principal faculty entered with appropriate percentages of time as defined in the *Standards*, portal staff will receive an alert to that fact.

Some alerts will only be to ARC-PA staff who will follow up with programs. Other alerts will pop-up when a program attempts to enter data that is not in compliance with standards or policies.

Alerts to the ARC-PA will include the topics below. More information will be sent to programs before the roll out of these updates.

- Campus added
- Changes to degrees awarded
- Changes to program length
- Sponsoring institution name change
- Sponsoring institution regional accreditation status
- Chief administrative officer changed
- Program director changed
- Medical director changed
- Interim program director appointed
- Interim program director in place greater than 12 months
- Change in person to whom the program director reports
- Principal faculty total not per the *Standards*
- Class size exceeds maximum entering ARC-PA approved number
- PANCE first time taker pass rate drops below 82%
- SCPE not equal to number of students (active and agreement in place)
- Budget decrease of 20%
- Reports due, date missed

ENROLLMENT AT MULTI CAMPUS PROGRAMS

Programs newly approved for expansion to a distant campus receive notification of their ARC-PA approved entering class size in total and by campus. The sample of such wording below addresses issues regarding a program changing enrollment across campuses.

The SAMPLE PROGRAM is approved to accept a maximum entering class size of up to **12** students in the first class of students, **15** in the second class and **18** in the third class at the distant campus in CITY, STATE in addition to the maximum entering class size of **42** at the main campus in CITY, STATE. The program is not to exceed the approved maximum entering class size number for any reason without prior approval from the ARC-PA for a class increase. The program also is not to exceed the approved class size numbers for any individual campus or reallocate class sizes across campuses even if those totals remain within the approved maximum entering class size for the program.

Accreditation action letters to programs approved for more than one distant campus will find wording as follows.

The approved maximum entering class size remains **100: 24** at the distant campus in CAMPUS NAME/CITY, **24** at the distant campus in CAMPUS NAME/CITY and **52** at the main campus in CITY/STATE. The program is not to exceed that maximum entering class size number for any reason during its next and subsequent admission cycles without prior approval from the ARC-PA for a class increase. The program also is not to exceed the approved class size numbers for any individual campus or reallocate class sizes across campuses even if those totals remain within the approved maximum entering class size for the program.

DEADLINESARE THEY REALLY DEADLINES? ARE THERE CONSEQUENCES TO MISSING THESE?

This was an easy article to write. **YES**, there are deadlines and consequences.

For those of you who need more detail:

Accreditation Applications are due, completed and accurate, in the ARC-PA offices 12 weeks before a site visit. Dates are provided by the office to the program. Materials submitted late or materials submitted on time but which are incomplete, requiring additional information from a program, may result in a change in the timing of a site visit or the assignment of an accreditation status of Accreditation-Administrative Probation. Programs may also receive a citation for standard E1.03 if submitting incomplete materials.

Reports due to the ARC-PA for any reason and responses to observations from a site visit are due on the date noted in correspondence sent to the program.

Expansion to Distant Campus requests are scheduled for commission review on an ARC-PA March or September agenda. Such requests involve completion of an application with subsequent site visit. The program must obtain approval from the ARC-PA six months prior to matriculating students at the newly approved expansion site. Programs considered on a March agenda may matriculate students no sooner than September of the same year. Programs considered on a September agenda may matriculate students no sooner than March of the following year.

IMPORTANT REMINDER ABOUT APPENDIX 16 SYLLABI AND APPLICATION OF RECORD

Appendix 16 is the appendix of any provisional or continuing application in which the program is to place selected syllabi. The same syllabi are not requested in each application, as noted in the table below.

It is important for the program to remember that these syllabi are required to be submitted with the application of record submitted to the ARC-PA 12 weeks in advance of the visit. As a component of the application of record, they are considered final. Site visitors will not review or accept any changes to these at the time of the visit. As with any components of the application of record, the program also will not be permitted to submit changes to these documents after the visit.

Initial Provisional	Provisional Monitoring	Final Provisional	Continuing
<p>All expected student competencies/learning objectives for the following content areas:</p> <ul style="list-style-type: none"> physical diagnosis (B2.05) pharmacology (B2.02d) interprofessional patient-centered teams (B1.08) family medicine (SCPE) (B3.07a) 	<p>Syllabi for courses which contain all expected student competencies/ learning objectives for the following content areas:</p> <ul style="list-style-type: none"> pediatrics (SCPE) (3.07d) behavioral and mental health care (SCPE) (B3.07f) <p>Note: if the content areas above are covered in multiple syllabi do not submit all syllabi. Create a composite of the course information, instructional objectives, specific expected learning outcomes, methods of student assessment/evaluation and plan for grading.</p> <p>(effective for September 2016 agenda)</p>	<p>Syllabi for courses which contain all expected student competencies/ learning objectives for the following content areas</p> <ul style="list-style-type: none"> instruction to prepare students to provide medical care to patients from diverse populations.(B1.06) instruction in patient safety, quality improvement, prevention of medical errors and risk management.(B2.13) women's health, to include prenatal and gynecologic care (SCPE) (B3.03b) care for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care (SCPE)(B3.03c) <p>Note: if the content areas above are covered in multiple syllabi do not submit all syllabi. Create a composite of the course information, instructional objectives, specific expected learning outcomes, methods of student assessment/evaluation and plan for grading.</p>	<p>Syllabi for courses which contain all expected student competencies/ learning objectives for the following content areas:</p> <ul style="list-style-type: none"> care for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care (SCPE)(B3.03c) internal medicine (SCPE) (B3.07b) <p>Note: if the content areas above are covered in multiple syllabi do not submit all syllabi. Create a composite of the course information, instructional objectives, specific expected learning outcomes, methods of student assessment/evaluation and plan for grading.</p>

PANCE REQUIRED REPORTS FOR LOW FIRST TIME TAKER PASS RATES 2015

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 2015 cohort must submit an analysis of PANCE performance to the ARC-PA **by July 1, 2016**. 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.

APPLICATION OF RECORD MUST BE COMPLETE

Programs are reminded about the Application of Record terminology in accreditation applications, in letters to the program directors confirming the assignment of site visitors and in the Site Visit 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 ARC-PA will only accept and continue to process a program for its site visit if the application of record is completed correctly and received in the office on time. It is critical that program faculty and staff follow directions about completing materials as directed in the application packet. All appendices must be completed and submitted as directed, including the syllabi required for appendix 16.

Applicant programs that submit incomplete applications risk having their site visits canceled and moved to a later commission agenda. Accredited programs that submit incomplete applications risk having their site visits canceled and moved to a later commission agenda and will be placed on administrative probation until a completed application is received.

The site visit team is advised not to accept any new materials not already a component of the application of record. The team will review materials on site that were not to be included in the application of record, such as course syllabi not required as part of the application. Not accepting new materials means that **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 specifically required in the application (appendix 16).

In NO circumstance will the site visit 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 for very specific reasons. Specific examples would be documentation related to a change in faculty or a new hire since application submission, correction of substantive typographical errors, or to provide a page that was determined to be missing by ARC-PA staff as they reviewed the application. 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 EXPECTATIONS STILL AN ISSUE

Programs continue to have difficulty documenting their *program defined expectations* (wording changed in *Standards* as referenced in article above to *program expectations*) to students, faculty and the commission. Programs also continue to have difficulty developing means of assessing expectations as students progress through the program.

One or more sub sections of standard B3.03 is often an observation after a site visit or a citation from the commission. The commission believes that

“What programs have moved away from is the ability to define expectations 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 supervised clinical practice experiences (SCPEs) reinforces and aligns the important content areas of the didactic curriculum and provides a continuum of that material within the clinical year experiences.”

Correspondence to programs that receive a citation for this standard may include wording similar to the following:

The program has not defined what it determines as sufficient patient exposure to meet program requirements beyond indicating a number, which is inconsistent with the intent of this standard. A specific number of experiences is not required by the standard. Defining program expectations and competencies to be acquired during supervised clinical practice experiences reinforces and aligns the important content areas of the didactic curriculum and provides a continuum of that material within the clinical year experiences. The use of a set number to define experiences without having program-defined expectations of what needs to occur within each experience is not useful. Certainly more than one experience is needed for any level performance.

As noted in the article on Important Resources above, a Program Expectations PowerPoint presentation is available on the News section of the web site at <http://www.arc-pa.org/program-expectations/> 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 competencies needed for entry into clinical PA practice.

INSTRUCTIONAL OBJECTIVES REMINDER: STANDARD B1.09

The ARC-PA tracks the observations and citations connected with each standard. Standard B1.09 continues to be a source of observations and citations. The FALL 2015 NOTES included an article on this topic. Programs are encouraged to read that article again. Past issues of NOTES are on the ARC-PA web site at <http://www.arc-pa.org/accreditation/resources/notes-and-portal-updates/>

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/>