



Accreditation Review Commission on Education  
for the Physician Assistant, Inc.

## NOTICE OF ACTIONS – ACCREDITATION STATUS (10.9.2019)

The ARC-PA took the actions displayed below at its **June 20-22, 2019** meeting. The accreditation decisions were based on the programs' compliance with the accreditation *Standards* or adherence to ARC-PA policies for accredited programs.

All accredited programs are required to file annual and periodic reports to document continuing compliance with the accreditation *Standards* throughout the accreditation cycle. Programs that received citations<sup>1</sup> from the commission are required to submit a report describing the manner in which the citation(s) have been addressed or resolved.

For definitions of accreditation statuses see <http://www.arc-pa.org/accreditation/accreditation-types-review-cycle/>.

For a complete listing of all accredited programs or for information about specific programs, see <http://www.arc-pa.org/accreditation/accredited-programs/>.

The programs, grouped by the purpose of the commission review, are listed in alphabetical order by state.

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THE FOLLOWING LIST REFLECTS RESULTS OF ACCREDITATION ACTIONS FOR NEW PROGRAMS APPLYING FOR ACCREDITATION - PROVISIONAL<sup>2</sup> INCLUDING COMMENTARY REGARDING PROGRAM-SPECIFIC REPORTS TO THE COMMISSION DESCRIBING THE CITATION(S)<sup>1</sup> THAT MUST BE ADDRESSED OR RESOLVED.

PA Program at:	Accreditation Status Granted	Next Comprehensive Review
University of the Cumberlands-Northern Kentucky, KY	Provisional <sup>2</sup>	TBD
<i>Report due December 17, 2019:</i>		
<ul style="list-style-type: none"><li>Standard B1.08 (lacked evidence the curriculum includes instruction to prepare students to work collaboratively in interprofessional patient centered teams including instruction in roles and responsibilities of various health care professionals),</li><li>Standard B2.12 (lacked evidence the curriculum includes instruction in concepts of public health including the role of health care providers in the prevention of disease, maintenance of population health or participation in disease surveillance, reporting and intervention),</li><li>Standard B2.13 (lacked evidence the curriculum includes instruction in patient safety and prevention of medical errors) and</li><li>Standard C3.01 (lacked evidence the program conducts documented evaluations of students that parallel the learning outcomes for supervised clinical education components).</li></ul>		
College of Saint Elizabeth, NJ	Provisional <sup>2</sup>	TBD
<i>Report due August 14, 2019:</i>		
<ul style="list-style-type: none"><li>Standard B1.08 (lacked evidence the curriculum includes</li></ul>		

PA Program at:	Accreditation Status Granted	Next Comprehensive Review
<i>instruction to prepare students to work collaboratively in interprofessional patient centered teams including opportunities within the curriculum to apply these principles of practice).</i>		
<i>Report due December 3, 2019:</i>		
<ul style="list-style-type: none"> <li>• <i>Standard C3.01 (lacked evidence the program conducts documented evaluations of students that parallel the learning outcomes for supervised clinical education components).</i></li> </ul>		
Presbyterian College, SC	Provisional <sup>2</sup>	TBD
<i>No report related to standards.</i>		
South College-Nashville, TN	Provisional <sup>2</sup>	TBD
<i>Report due September 5, 2019:</i>		
<ul style="list-style-type: none"> <li>• <i>Standard A3.07 (lacked evidence of a policy on immunization of students based on current CDC recommendations for health professionals),</i></li> <li>• <i>Standard A3.14b (lacked evidence the program publishes and makes readily available to enrolled and prospective students the success of achieving its goals),</i></li> <li>• <i>Standard A3.17f (lacked evidence the program defines, publishes and makes readily available to students upon admission policies and procedures for remediation and deceleration),</i></li> <li>• <i>Standard B1.05 (lacked evidence the curriculum includes instruction on appropriate academic conduct),</i></li> <li>• <i>Standards B3.06a-b (lacked evidence supervised clinical practice experiences occur with a) physicians who are specialty board certified in their area of instruction and b) PAs teamed with physicians who are specialty board certified in their area of instruction),</i></li> <li>• <i>Standard C1.02 (lacked evidence the program applies the results of ongoing program self-assessment to the curriculum and other dimensions of the program) and</i></li> <li>• <i>Standard C2.01a (lacked evidence the program prepares a self-study report that accurately and succinctly documents the program's process of ongoing self-assessment).</i></li> </ul>		

THE FOLLOWING LIST REFLECTS RESULTS OF ACCREDITATION ACTIONS FOR CURRENTLY ACCREDITED PROGRAMS INCLUDING COMMENTARY REGARDING PROGRAM-SPECIFIC REPORTS TO THE COMMISSION DESCRIBING THE CITATION(S)<sup>1</sup> THAT MUST BE ADDRESSED OR RESOLVED.

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
Samuel Merritt University, CA	Probation <sup>3</sup>	June 2021
<i>Report due December 16, 2019:</i>		
<ul style="list-style-type: none"> <li>• <i>Standard A3.14b (lacked evidence the program publishes and makes readily available to enrolled and prospective students the success of the program in achieving its goals),</i></li> <li>• <i>Standard A3.15a (lacked evidence the program publishes and makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),</i></li> <li>• <i>Standard A3.16 (lacked evidence the program makes student admission decisions in accordance with published practices of the institution and the program),</i></li> <li>• <i>Standard B3.02 (lacked evidence of clearly defined learning outcomes for students in supervised clinical practice experiences (SCPEs) and methods to determine all students meet the program's learning outcomes for preventive, emergent, acute and chronic patient encounters),</i></li> <li>• <i>Standards B3.03a-d (lacked evidence of clearly defined learning outcomes for students in SCPEs and methods to determine all students meet the program's learning outcomes for patients seeking a) medical care across the life span, b) women's health, c) care for conditions requiring surgical management and d) care for behavioral and mental health conditions),</i></li> <li>• <i>Standards B3.06a-b (lacked evidence SCPEs occur with a) physicians who are specialty board certified in their area of instruction and b) PAs teamed with physicians who are specialty board certified in their area of instruction) and</i></li> <li>• <i>Standard C3.04 (lacked evidence the program conducts and documents summative evaluations of each student within the final four months of the program to verify that each student is prepared to enter clinical practice).</i></li> </ul>		
<i>Report due January 8, 2021:</i>		
<ul style="list-style-type: none"> <li>• <i>Standard C3.07f (lacked evidence SCPEs occur with preceptors practicing in behavioral and mental health care) and</i></li> <li>• <i>Standards C2.01b-e, modified self-study report (lacked evidence the program prepares a self-study report that accurately documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).</i></li> </ul>		
University of Southern California, CA	Continued	June 2029
<i>Report due September 10, 2019:</i>		
<ul style="list-style-type: none"> <li>• <i>Standard A3.17e (lacked evidence the program makes readily available to students upon admission policies and procedures for withdrawal and dismissal) and</i></li> </ul>		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<ul style="list-style-type: none"> <li>Standard C3.01 (lacked evidence the program conducts documented evaluations of students that parallel the learning outcomes for supervised clinical education components).</li> </ul> <p>Report due February 1, 2021:</p> <ul style="list-style-type: none"> <li>Standards C2.01b-e, modified self-study report (lacked evidence the program prepares a self-study report that accurately documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).</li> </ul>		
AdventHealth University, FL	Probation <sup>3</sup>	June 2021
<p>Report due November 8, 2019:</p> <ul style="list-style-type: none"> <li>Standard A1.03a (lacked evidence the sponsoring institution is responsible for supporting the faculty in program assessment),</li> <li>Standard A2.09d (lacked evidence the program director is knowledgeable about and responsible for program continuous review and analysis),</li> <li>Standard A3.14b (lacked evidence the program provides factually accurate evidence of its success in achieving each of its published goals),</li> <li>Standard A3.17f (lacked evidence the program clearly defines to students upon admission academic performance and progression information to include policies and procedures for deceleration),</li> <li>Standard B1.05 (lacked evidence the curriculum includes instruction about intellectual honesty and appropriate academic conduct),</li> <li>Standard B3.02 (lacked evidence of clearly defined learning outcomes for students in supervised clinical practice experiences (SCPEs) and methods to determine all students meet the program's learning outcomes for preventive, emergent, acute and chronic patient encounters) and</li> <li>Standards B3.03b-d (lacked evidence of clearly defined learning outcomes for students in SCPEs and methods to determine all students meet the program's learning outcomes for patients seeking, b) women's health, c) care for conditions requiring surgical management and d) care for behavioral and mental health conditions).</li> </ul> <p>Report due January 4, 2021:</p> <ul style="list-style-type: none"> <li>Standards C2.01b-e, self-study report (lacked evidence the program prepares a self-study report that accurately documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).</li> </ul>		
Augusta University, GA	Continued	June 2029

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>Report due November 8, 2019:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard A3.15a (lacked evidence the program publishes and makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),</i></li> <li>• <i>Standard A3.16 (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program),</i></li> <li>• <i>Standard B2.06 (lacked evidence the program curriculum includes instruction in the provision of clinical medical care across the life span),</i></li> <li>• <i>Standard B2.08 (lacked evidence the program curriculum includes instruction in social and behavioral sciences related to the response to illness, injury and stress) and</i></li> <li>• <i>Standard B2.12 (lacked evidence the program curriculum includes instruction in concepts of public health as they relate to the role of the practicing PA).</i></li> </ul>		
<p><i>Report due May 1, 2020:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard B3.07c (lacked evidence supervised clinical practice experiences occur with preceptors practicing in general surgery).</i></li> </ul>		
<p><i>Report due February 15, 2021:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard C1.02 (lacked evidence the program applies the results of ongoing program self-assessment to the curriculum and other dimensions of the program) and</i></li> <li>• <i>Standards C2.01b-e, modified self-study report (lacked evidence the program prepares a self-study report that accurately and succinctly documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).</i></li> </ul>		
MGH Institute of Health Professions, MA	Probation <sup>3</sup>	June 2021
<p><i>Report due December 2, 2019:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard A1.03c (lacked evidence the sponsoring institution is responsible for complying with ARC-PA accreditation Standards and policies),</i></li> <li>• <i>Standard B2.14 (lacked evidence the program curriculum includes instruction about PA credentialing),</i></li> <li>• <i>Standard B2.17 (lacked evidence the program curriculum includes instruction about PA professional organizations),</i></li> <li>• <i>Standard B3.02 (lacked evidence of clearly defined learning outcomes for students in supervised clinical practice experiences (SCPEs) and methods to determine all students meet the program's learning outcomes for preventive, emergent, acute and chronic patient encounters) and</i></li> <li>• <i>Standards B3.03a-d (lacked evidence of clearly defined learning outcomes for students in SCPEs and methods to determine all students meet the program's learning outcomes for patients seeking a) medical care across the life span, b) women's health, c) care for conditions requiring surgical management and d) care</i></li> </ul>		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>for behavioral and mental health conditions).</i></p> <p>Report due January 4, 2021:</p> <ul style="list-style-type: none"> <li>Standards B3.07a and c (lacked evidence SCPEs occur with preceptors practicing in a) family medicine and c) general surgery).</li> </ul>		
<p>University of Detroit Mercy, MI</p> <p>Report due November 11, 2019:</p> <ul style="list-style-type: none"> <li>Standard A3.19a (lacked evidence student files include documentation that the student has met published admission criteria including advanced placement if awarded) and</li> <li>Standard C3.01 (lacked evidence the program conducts documented evaluations of students that parallel the learning outcomes for supervised clinical education components).</li> </ul> <p>Report due August 15, 2021:</p> <ul style="list-style-type: none"> <li>Standards C2.01a-f, modified self-study report (lacked evidence the program prepares a self-study report that accurately and succinctly documents a) the program process of ongoing self-assessment, b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment, e) self-identified program strengths and areas in need of improvement and f) plans for addressing areas needing improvement).</li> </ul>	Continued	June 2029
<p>Augsburg University, MN</p> <p>Report due December 11, 2019:</p> <ul style="list-style-type: none"> <li>Standard A2.09d (lacked evidence the program director is knowledgeable about and responsible for program continuous review and analysis),</li> <li>Standard A3.14b (lacked evidence the program publishes and makes readily available to enrolled and prospective students the success of the program in achieving its goals),</li> <li>Standard A3.15a (lacked evidence the program publishes and makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),</li> <li>Standard B2.08 (lacked evidence the program curriculum includes instruction in social and behavioral sciences related to the response to illness, injury and stress) and</li> <li>Standard B2.14 (lacked evidence the program curriculum includes instruction about PA licensure and credentialing).</li> </ul> <p>Report due December 20, 2019:</p> <ul style="list-style-type: none"> <li>Standard B3.02 (lacked evidence of clearly defined learning outcomes for students in supervised clinical practice experiences (SCPEs) and methods to determine all students meet the program's learning outcomes for preventive, emergent, acute and chronic patient encounters),</li> <li>Standards B3.03a-d (lacked evidence of learning outcomes for students in SCPEs and methods to determine all students meet the program's learning outcomes for patients seeking a) medical</li> </ul>	Probation <sup>3</sup>	June 2021

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>care across the life span, b) women's health, c) care for conditions requiring surgical management and d) care for behavioral and mental health conditions),</i></p> <ul style="list-style-type: none"> <li>Standards B3.06a-b (lacked evidence SCPEs occur with a) physicians who are specialty board certified in their area of instruction and b) PAs teamed with physicians who are specialty board certified in their area of instruction),</li> <li>Standard B3.07e (lacked evidence SCPEs occur with preceptors practicing in ob/gyn) and</li> <li>Standard C4.01 (lacked evidence the program documents effective processes for the initial and ongoing evaluation of all sites and preceptors used for SCPEs).</li> </ul> <p>Report due January 13, 2021:</p> <ul style="list-style-type: none"> <li>Standards C2.01b-f, modified self-study report (lacked evidence the program prepares a self-study report that accurately and succinctly documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment, e) self-identified program strengths and areas in need of improvement and f) plans for addressing areas needing improvement).</li> </ul>		
College of Saint Mary, NE <sup>2</sup>	Probation <sup>3</sup>	March 2021
No report related to standards.		
Mercy College, NY	Continued	June 2027
Report due December 11, 2019:		
<ul style="list-style-type: none"> <li>Standard B3.03a (lacked evidence of supervised clinical practice experiences that enable all students to meet the program's learning outcomes for patients seeking medical care across the life span) and</li> <li>Standard C3.01 (lacked evidence the program conducts documented evaluations of students that parallel the learning outcomes for supervised clinical education components).</li> </ul>		
Mercyhurst University, PA	Continued	June 2029
No report related to standards.		
High Point University, NC	Continued	June 2029
Report due February 4, 2021:		
<ul style="list-style-type: none"> <li>Standards C2.01b-e, modified self-study report (lacked evidence the program's self-study report documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).</li> </ul>		
University of South Carolina, SC	Probation <sup>3</sup>	June 2021
Report due September 6, 2019:		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<ul style="list-style-type: none"> <li>• <i>Standard A1.03c (lacked evidence the sponsoring institution is responsible for complying with ARC-PA accreditation Standards and policies),</i></li> <li>• <i>Standard A2.09g (lacked evidence the program director is knowledgeable about and responsible for program participation in the accreditation process),</i></li> <li>• <i>Standard A3.15a (lacked evidence the program publishes and makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),</i></li> <li>• <i>Standard A3.16 (lacked evidence the program makes student admission decisions in accordance with published practices of the institution and the program),</i></li> <li>• <i>Standards A3.17e-f (lacked evidence the program defines, publishes and makes readily available to students upon admission e) policies and procedures for withdrawal and f) deceleration),</i></li> <li>• <i>Standards A3.19a-b (lacked evidence student files include documentation a) that the student has met published admission criteria and b) institution and program health screening and immunization requirements),</i></li> <li>• <i>Standards B3.03b-d (lacked evidence of methods to determine, after having supervised clinical practice experiences, all students meet the program's learning outcomes for patients seeking b) women's health, c) care for conditions requiring surgical management and d) care for behavioral and mental health conditions),</i></li> <li>• <i>Standard C3.01 (lacked evidence the program conducts evaluations of students that parallel the learning outcomes for supervised clinical education components) and</i></li> <li>• <i>Standard C3.04 (lacked evidence the program's planned summative evaluation of each student correlates with the didactic and clinical components of the program's curriculum).</i></li> </ul>		
South College, TN	Distant Campus Approved	September 2027
<p><i>Report due November 1, 2019:</i></p> <ul style="list-style-type: none"> <li>• <i>Budgetary support for incremental class size increase.</i></li> </ul> <p><i>Report due March 1, 2020:</i></p> <ul style="list-style-type: none"> <li>• <i>Status of clinical sites to support cohort of 60 students.</i></li> </ul> <p><i>Report due March 1, 2021:</i></p> <ul style="list-style-type: none"> <li>• <i>Status of clinical sites to support cohort of 85 students.</i></li> </ul>		
Baylor College of Medicine, TX	Continued	June 2029
<p><i>Report due September 9, 2019:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard A1.03g (lacked evidence the sponsoring institution is responsible for addressing appropriate security and personal safety measures for students in all locations where instruction occurs),</i></li> <li>• <i>Standard A3.14h (lacked evidence the program makes readily</i></li> </ul>		



PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>available to prospective students the policies about student employment while enrolled in the program),</i></p> <ul style="list-style-type: none"> <li>• <i>Standard B3.02 (lacked evidence supervised clinical practice experiences (SCPEs) enable all students to meet the program's learning outcomes for preventive, emergent, acute and chronic patient encounters),</i></li> <li>• <i>Standards B3.03a-b (lacked evidence SCPEs enable all students to meet the program's learning outcomes for patients seeking a) medical care across the life span and b) women's health),</i></li> <li>• <i>Standards B3.06a-b (lacked evidence SCPEs occur with a) physicians who are specialty board certified in their area of instruction and b) PAs teamed with physicians who are specialty board certified in their area of instruction) and</i></li> <li>• <i>Standard C3.04 (lacked evidence the program conducts and documents summative evaluations of each student within the final four months of the program to verify that each student is prepared to enter clinical practice).</i></li> </ul>		
Report due August 20, 2021:		
<ul style="list-style-type: none"> <li>• <i>Standards C2.01b-e, modified self-study report (lacked evidence the program's self-study report documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).</i></li> </ul>		
University of Texas Medical Branch, TX	Continued	June 2027
Report due February 4, 2021:		
<ul style="list-style-type: none"> <li>• <i>Standards C2.01b-c, modified self-study report (lacked evidence the program's self-study report documents b) results of critical analysis from the ongoing self-assessment and c) faculty evaluation of the curricular and administrative aspects of the program).</i></li> </ul>		
South University – Richmond, VA	Provisional <sup>2</sup>	March 2021
Report due August 23, 2019:		
<ul style="list-style-type: none"> <li>• <i>Standard A3.15a (lacked evidence the program publishes and makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups) and</i></li> <li>• <i>Standards B3.06a-b (lacked evidence supervised clinical practice experiences (SCPEs) occur with a) physicians who are specialty board certified in their area of instruction and b) PAs teamed with physicians who are specialty board certified in their area of instruction).</i></li> </ul>		
Report due December 16, 2019:		
<ul style="list-style-type: none"> <li>• <i>Standard B3.07b (lacked evidence of SCPEs with preceptors practicing in internal medicine) and</i></li> <li>• <i>Standard C3.01 (lacked evidence the program conducts documented evaluations of students that parallel the learning</i></li> </ul>		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<hr/> <i>outcomes for supervised clinical education components).</i> <hr/>		

THE FOLLOWING LISTS REFLECT ACTIONS FOR PROGRAMS WHICH APPLIED FOR PROGRAM CHANGES OR HAD REQUIRED REPORTS DUE TO THE COMMISSION.

***Reports considered at the meeting***

<b>PA Program at:</b>	<b>Accepted/Not Accepted/Approved/ Defer Approval/Not Approved/Acknowledged/Not Acknowledged</b>	<b>Next Comprehensive Review</b>
Indiana University, IN <sup>*</sup>	Not approved	March 2027
Boston University, MA <sup>3*</sup>	Accepted first report/Not accepted second report	September 2020
Saint Louis University, MO <sup>*</sup>	Accepted	March 2023
MCPHS University Manchester/Worcester, NH <sup>3</sup>	Accepted	September 2019
Duquesne University, PA <sup>3*</sup>	Accepted	September 2020
Lincoln Memorial University, TN	Not approved	March 2025

\*Program is required to submit a follow up report to the ARC-PA

***Reports considered via expedited process***

<b>PA Program at:</b>	<b>Next Validation Review</b>
Chapman University, CA <sup>2*</sup>	September 2020
Rocky Vista University, CO <sup>2</sup>	March 2021
Indiana University, IN	March 2027
Anne Arundel Community College, MD	September 2019
University of North Carolina-Chapel Hill, NC	March 2020
University of North Dakota, ND <sup>*</sup>	September 2026
Rutgers University, NJ	September 2026
Seton Hall University, NJ	March 2027
Marist College, NY <sup>2</sup>	March 2020
Touro College-Bay Shore, NY <sup>*</sup>	September 2027
University of Findlay, OH <sup>*</sup>	September 2026
University of Mount Union, OH	March 2028
Oregon Health & Sciences University, OR <sup>*</sup>	September 2025
DeSales University, PA <sup>*</sup>	June 2027
Gannon University, PA	March 2027
Misericordia University, PA <sup>2</sup>	September 2020
Penn State University, PA <sup>*</sup>	September 2027
Salus University, PA	March 2024
Seton Hill University, PA <sup>*</sup>	March 2024
Slippery Rock University, PA	March 2020
Thomas Jefferson University, East Falls, PA	March 2028
Lipscomb University, TN <sup>2</sup>	March 2021
University of Lynchburg, VA	March 2029
Marquette University, WI	September 2023

\*Program is required to submit a follow up report to the ARC-PA

## ADDITIONAL ACTIONS

***The following programs provided informational actions for which no commission action was required.***

PA Program at:	Next Validation Review
University of the Pacific, CA <sup>2</sup>	March 2021
SUNY Downstate Medical Center, NY	September 2019
Touro College-Manhattan, NY	September 2024
University of Findlay, OH	September 2026
Temple University, PA <sup>2</sup>	June 2020
University of the Sciences, PA <sup>2,3</sup>	N/A
University of Texas Medical Branch, TX	June 2019
Mary Baldwin University, VA <sup>2,3</sup>	March 2020

<sup>1</sup> A **citation** is a formal statement referenced to a specific standard noting the area in which the program failed to provide evidence demonstrating that it meets the standard, or performs so poorly in regard to the standard that the efforts of the program are found to be unacceptable.

<sup>2</sup> Accreditation-**Provisional** is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA *Standards* or when a program holding accreditation-provisional status appears to demonstrate continued progress in complying with the *Standards* as it prepares for the graduation of the first class (cohort) of students. Accreditation-Provisional does not ensure any subsequent accreditation status. It is limited to no more than five years from matriculation of the first class. Accreditation-Provisional remains in effect until the program achieves Accreditation-Continued after its third review, closes or withdraws from the accreditation process, or until accreditation is withdrawn for failure to comply with the *Standards*.

<sup>3</sup> Accreditation-**Probation** is a temporary, status of accreditation, limited to two years, granted when a program holding an accreditation status of accreditation-provisional or accreditation-continued does not meet the *Standards* and when the capability of the program to provide an acceptable educational experience for its students is threatened. Once placed on probation, a program that fails to comply with accreditation requirements in a timely manner, as specified by the ARC-PA, may be scheduled for a probation site visit and/or risk having its accreditation withdrawn.

<sup>4</sup> Accreditation-**Administrative Probation** is a temporary status granted when a program has not complied with an administrative requirement, such as failure to pay fees or submit required reports. Once placed on administrative probation, a program that fails to comply with administrative requirements in a timely manner, as specified by the ARC-PA, may be scheduled for a focused site visit and/or risk having its accreditation withdrawn.