



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

## NOTICE OF ACTIONS – ACCREDITATION STATUS (9.9.2022)

The ARC-PA took the actions displayed below at its **June 23-25, 2022** 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
Franklin Pierce University, AZ	Provisional <sup>2</sup>	TBD
<i>Report due September 1, 2022:</i>		
<ul style="list-style-type: none"><li>Standard A3.12d (lacked evidence program defines, publishes and makes readily available to enrolled and prospective students, general program information to include all required curricular components including required rotation disciplines),</li><li>Standard A3.13a (lacked evidence the program defines, publishes, consistently applies and makes readily available to prospective students, policies and procedures to include admission and enrollment practices that favor specified individuals or groups),</li><li>Standard A3.14 (lacked evidence the program makes student admission decisions in accordance with clearly defined and published practices of the institution and program),</li><li>Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction),</li><li>Standard B4.01b (lacked evidence student assessment in the didactic and supervised clinical practice experience components allows the program to identify and address any student deficiencies in a timely manner),</li><li>Standard D1.04e (lacked evidence the program provides detailed information for each course and rotation offered in the program, to include learning outcomes and instructional objectives), and</li><li>Standard D1.04g (lacked evidence the program provides detailed</li></ul>		

PA Program at:	Accreditation Status Granted	Next Comprehensive Review
<p><i>information for each course and rotation offered in the program, to include methods of student assessment/evaluation).</i></p> <p>No report due:</p> <ul style="list-style-type: none"> <li>Standard D1.02c (lacked evidence the developing program publishes and makes readily available to everyone who requests information, applies, or plans to enroll, implications of non-accreditation by the ARC-PA) and</li> <li>Standard E1.03 (the program did not submit documents as required by the ARC-PA ).</li> </ul>		
West Coast University, CA	Provisional <sup>2</sup>	TBD
<p>No report due:</p> <ul style="list-style-type: none"> <li>Standard A3.12f (lacked evidence the program defines, publishes, and makes readily available to enrolled and prospective students, general program information to include estimates of all costs (tuition, fees, etc.) related to the program),</li> <li>Standard B4.01b (lacked evidence student assessment in the didactic and supervised clinical practice experience components allows the program to identify and address any student deficiencies in a timely manner), and</li> <li>Standard D1.01c (lacked evidence program has 2.0 FTE PA-C principal faculty and 1.0 FTE support staff hired by the institution on a permanent basis at least 9 months prior to the date of the scheduled site visit).</li> </ul>		
Touro College Illinois, IL	Provisional <sup>2</sup>	TBD
<p>Report due October 15, 2022:</p> <ul style="list-style-type: none"> <li>Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction),</li> <li>Standard B3.06c (lacked evidence supervised clinical practice experiences occur with other licensed health care providers qualified in their area of instruction) and</li> <li>Standard B4.01a (lacked evidence student assessment in the didactic and supervised clinical practice experience components aligns with what is expected and taught).</li> </ul> <p>No report due:</p> <ul style="list-style-type: none"> <li>Standard D1.01b (lacked evidence program has a medical director appointed by the institution on a permanent basis at least 15 months prior to the date of the scheduled site visit) and</li> <li>Standard D1.01c (lacked evidence program has 2.0 FTE PA-C principal faculty and 1.0 FTE support staff hired by the institution on a permanent basis at least 9 months prior to the date of the scheduled site visit).</li> </ul>		
Delaware Valley University, PA	Provisional <sup>2</sup>	TBD
<p>Report due August 8, 2022:</p> <ul style="list-style-type: none"> <li>Standard B4.01a (lacked evidence student assessment in the didactic and supervised clinical practice experience components aligns with what is expected and taught) and</li> <li>Standard B4.01b (lacked evidence student assessment in the didactic and supervised clinical practice experience components allows the program to identify and address any student deficiencies in a timely</li> </ul>		

PA Program at:	Accreditation Status Granted	Next Comprehensive Review
<p><i>manner).</i></p> <p>No report due:</p> <ul style="list-style-type: none"> <li>Standard D1.02b (lacked evidence the program publishes and makes readily available to everyone who requests information, applies or plans to enroll that the program is not yet accredited) and</li> <li>Standard D1.02c (lacked evidence the program publishes and makes readily available to everyone who requests information, applies or plans to enroll the implications of non-accreditation by the ARC-PA).</li> </ul>		
Meharry Medical College, TN	Provisional <sup>2</sup>	TBD
<p>Report due August 8, 2022:</p> <ul style="list-style-type: none"> <li>Standard B4.01b (lacked evidence student assessment in the didactic and supervised clinical practice experience components allows the program to identify and address any student deficiencies in a timely manner).</li> </ul> <p>No report due:</p> <ul style="list-style-type: none"> <li>Standard A3.11 (lacked evidence the sponsoring institution and announcements and advertising accurately reflect the program offered) and</li> <li>Standard A3.13a (lacked evidence the program defines, publishes, consistently applies and makes readily available to prospective students, policies and procedures to include admission and enrollment practices that favor specified individuals or groups.)</li> </ul>		
Randolph-Macon College, VA	Provisional <sup>2</sup>	TBD
<p>Report due August 19, 2022:</p> <ul style="list-style-type: none"> <li>Standard A2.02b (lacked evidence the program has at least three FTE principal faculty, of which two FTE principal faculty must be PAs who are currently NCCPA-certified).</li> </ul> <p>No report due:</p> <ul style="list-style-type: none"> <li>Standard A2.01 (lacked all program faculty possesses the educational and experiential qualifications to perform their assigned duties),</li> <li>Standard D1.02a (lacked evidence the developing program publishes and makes readily available to everyone who requests information, applies, or plans to enroll, its ARC-PA applicant status as provided to the program by the ARC-PA) and</li> <li>Standard E1.03 (the program did not submit documents as required by the ARC-PA ).</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
University of La Verne, CA	Probation <sup>3</sup>	June 2024
<i>Report due September 2, 2022:</i> <ul style="list-style-type: none"> <li>Standard A2.09h (lacked evidence the program director is knowledgeable about and responsible for adherence to the Standards and ARC-PA policies),</li> <li>Standard A3.12b (lacked evidence program must defines, publishes and makes readily available to enrolled and prospective students general program information to include evidence of its effectiveness in meeting its goals),</li> <li>Standard B3.01 (lacked evidence program secures clinical sites and preceptors in sufficient numbers to allow all students to meet the program's learning outcomes for supervised clinical practice experiences), and</li> <li>Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction).</li> </ul>		
<i>No report due:</i> <ul style="list-style-type: none"> <li>Standard C1.02b (lacked evidence program implements its ongoing self-assessment process by performing critical analysis of data),</li> <li>Standard C1.02c.i. (lacked evidence program implements its ongoing self-assessment process by applying results leading to conclusions that identify program strengths),</li> <li>Standard C1.02c.ii. (lacked evidence program implements its ongoing self-assessment process by applying results leading to conclusions that identify program areas in need of improvement),</li> <li>Standard C1.02c.iii. (lacked evidence program implements its ongoing self-assessment process by applying results leading to conclusions that identify action plans),</li> <li>Standard C1.03 (lacked evidence the program's self-study report accurately and succinctly documents the application and results of ongoing program self-assessment) and</li> <li>Standard E1.03 (the program did not submit documents as required by the ARC-PA ).</li> </ul>		
Yale Physician Assistant Online Program, CT	Probation <sup>3</sup>	June 2024
<i>Report due December 1, 2022:</i> <ul style="list-style-type: none"> <li>Standard A2.03 (lacked evidence program faculty is sufficient in number to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program),</li> <li>Standard A2.04 (lacked evidence principal faculty and program director have academic privileges comparable to other faculty with similar academic responsibilities in the institution),</li> <li>Standard B3.03b (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning</li> </ul>		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>outcomes across the life span, to include infants, children, adolescents, adults, and the elderly),</i></p> <ul style="list-style-type: none"> <li>• <i>Standard B4.01a (lacked evidence student assessment in the supervised clinical practice experience components aligns with what is expected and taught) and</i></li> <li>• <i>Standard B4.01b (lacked evidence student assessment in the supervised clinical practice experience components allows the program to identify and address any student deficiencies timely).</i></li> </ul> <p><i>Report due December 30, 2023</i></p> <ul style="list-style-type: none"> <li>• <i>Standard C1.01f (lacked evidence program defined its ongoing self-assessment process to include sufficiency and effectiveness of principal and instructional faculty and staff),</i></li> <li>• <i>Standard C1.02b (lacked evidence program implements its ongoing self-assessment process by performing critical analysis of data),</i></li> <li>• <i>Standard C1.02c.i (lacked evidence program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program strengths) and</i></li> <li>• <i>Standard C1.03 (lacked evidence the self-study report accurately and succinctly documents the application and results of ongoing program self-assessment).</i></li> </ul> <p><i>No report due:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction).</i></li> </ul>		
University of Dubuque, IA	Continued	March 2031
<p><i>Report due October 15, 2022:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard B1.03 (lacked evidence that for each didactic and clinical course, the program defines and publishes learning outcomes and instructional objectives in measurable terms that can be assessed and that guide student acquisition of required competencies).</i></li> </ul>		
University of the Cumberlands-Northern Kentucky Campus, KY	Provisional <sup>2</sup>	June 2024
<p><i>Report due October 15, 2022:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard B2.10c (lacked evidence the curriculum prepares students to work collaboratively in interprofessional patient centered teams, including instruction of application of these principles in interprofessional teams),</i></li> <li>• <i>Standard B2.19b (lacked evidence the curriculum includes instruction in academic integrity),</i></li> <li>• <i>Standard B3.06a (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction),</i></li> <li>• <i>Standard B4.01a (lacked evidence student assessment in the didactic and supervised clinical practice experience components aligns with what is expected and taught), and</i></li> <li>• <i>Standard B4.01b (lacked evidence student assessment in the didactic and supervised clinical practice experience components allows the program to identify and address any student deficiencies in a timely manner)</i></li> </ul> <p><i>No report due:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard A1.11a (lacked evidence sponsoring institution demonstrates its commitment to student, faculty and staff diversity</i></li> </ul>		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>and inclusion by supporting the program in defining its goal(s) for diversity and inclusion),</i></p> <ul style="list-style-type: none"> <li>• <i>Standard A1.11b (lacked evidence sponsoring institution demonstrates its commitment to student, faculty and staff diversity and inclusion by supporting the program in implementing recruitment strategies),</i></li> <li>• <i>Standard A1.11c (lacked evidence sponsoring institution demonstrates its commitment to student, faculty and staff diversity and inclusion by supporting the program in implementing retention strategies),</i></li> <li>• <i>Standard A3.03 (lacked evidence the program defines, publishes, makes readily available and consistently applies a policy for prospective and enrolled students that they must not be required to provide or solicit clinical sites or preceptors), and</i></li> <li>• <i>Standard E1.03 (the program did not submit documents as required by the ARC-PA ).</i></li> </ul>		
Xavier University of Louisiana, LA	Provisional <sup>2</sup>	June 2024
<p><i>No report due:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard E1.03 (the program did not submit documents as required by the ARC-PA ).</i></li> </ul>		
College of St. Mary, NE	Continued	March 2031
<p><i>Report due April 15, 2025:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard C1.03 (lacked evidence the program's self-study report accurately and succinctly documents the application and results of ongoing program self-assessment).</i></li> </ul>		
Lewis Katz School of Medicine at Temple University, PA	Continued	June 3030
<p><i>Report due August 8, 2022:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard B4.01b (lacked evidence student assessment in the didactic and supervised clinical practice experience components allows the program to identify and address any student deficiencies in a timely manner)</i></li> </ul> <p><i>No report due:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard C1.01 (lacked evidence program defines its ongoing self-assessment that addresses preparation of graduates to achieve program defined competencies),</i></li> <li>• <i>Standard C1.02c.i. (lacked evidence program implements its ongoing self-assessment process by applying results leading to conclusions that identify program strengths), and</i></li> <li>• <i>Standard C1.03 (lacked evidence the program's self-study report accurately and succinctly documents the application and results of ongoing program self-assessment).</i></li> </ul>		
Milligan University, TN	Continued	June 2032
<p><i>Report due December 16, 2022:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard B1.03 (lacked evidence that for each didactic and clinical course, the program defines and publishes learning outcomes and instructional objectives in measurable terms that can be assessed and that guide student acquisition of required competencies) and</i></li> </ul>		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<ul style="list-style-type: none"> <li>Standard C1.03 (lacked evidence the program's self-study report accurately and succinctly documents the application and results of ongoing program self-assessment).</li> </ul> <p>No report due:</p> <ul style="list-style-type: none"> <li>Standard A3.12b (lacked evidence program must defines, publishes and makes readily available to enrolled and prospective students general program information to include evidence of its effectiveness in meeting its goals) and</li> <li>Standard C2.01c (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to supervision).</li> </ul>		
West Virginia University, WV	Provisional <sup>2</sup>	June 2024
<p>Report due August 29, 2022:</p> <ul style="list-style-type: none"> <li>Standard A2.05a (lacked evidence principal faculty and the program director are responsible for, and actively participate in the processes of developing, reviewing and revising as necessary the mission statement, goals and competencies of the program),</li> <li>Standard B2.08b (lacked evidence the curriculum includes instruction in preventive, emergent, acute, chronic, and rehabilitative patient encounter),</li> <li>Standard B3.03c (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes for women's health (to include prenatal and gynecologic care),</li> <li>Standard B3.03d (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care),</li> <li>Standard B4.01b (lacked evidence student assessment in the didactic and supervised clinical practice experience components allows the program to identify and address any student deficiencies in a timely manner)</li> <li>Standard C2.01a (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to physical facilities),</li> <li>Standard C2.01b (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to patient populations), and</li> <li>Standard C2.01c (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to supervision).</li> </ul>		

PA Program at:	Accreditation Status Granted/ Confirmed	Next Comprehensive Review
<p><i>No report due:</i></p> <ul style="list-style-type: none"> <li>• <i>Standard C1.02c.i. (lacked evidence program implements its ongoing self-assessment process by applying results leading to conclusions that identify program strengths,</i></li> <li>• <i>Standard C1.03 (lacked evidence the program’s self-study report accurately and succinctly documents the application and results of ongoing program self-assessment), and</i></li> <li>• <i>Standard E1.03 (the program did not submit documents as required by the ARC-PA ).</i></li> </ul>		



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 Decision /Not Approved/Acknowledged/Not Acknowledged/Reviewed, More Information Requested</b>	<b>Next Comprehensive Review</b>
University of La Verne, CA <sup>2,3*</sup>	Reviewed, More Information Requested	June 2024
Augusta University, GA <sup>*</sup>	Reviewed, More Information Requested	June 2029
University of St. Francis, NM	Not Accepted	March 2030
Lewis Katz School of Medicine at Temple University, PA <sup>*</sup>	Reviewed, More Information Requested	June 2030
Christian Brothers University, TN <sup>2,3*</sup>	Reviewed, More Information Requested	March 2023
Trevecca Nazarene University, TN	Not Approved	March 2023
Concordia University, WI <sup>3*</sup>	Reviewed, More Information Requested	September 2026

\*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>
University of Alabama at Birmingham, AL*	March 2024
Loma Linda University, CA	March 2027
University of California – Davis, CA*	March 2027
Sacred Heart University, CT	March 2031
Augusta University, GA*	June 2029
Morehouse School of Medicine, GA <sup>2</sup>	September 2023
Rush University, IL	March 2024
Towson University CCBC Essex, MD	September 2023
University of Maryland / Ann Arundel Community College, MD	September 2029
University of Maryland / Ann Arundel Community College, MD	September 2029
Eastern Michigan University, MI	March 2028
Michigan State University, MI <sup>2</sup>	September 2024
Methodist University, NC	June 2027
Wingate University, NC	September 2024
Fairleigh Dickinson University, NJ <sup>2</sup>	June 2024
Monmouth University, NJ	March 2029
University of Saint Francis, NM*	March 2030
Ithaca College, NY <sup>2,*</sup>	March 2024
Touro College Middletown, NY <sup>2</sup>	September 2024
Yeshiva University, NY <sup>2</sup>	March 2024
Oklahoma City University, OK	March 2030
Oklahoma City University, OK*	March 2030
Penn State University, PA	September 2027
Saint Joseph's University, PA <sup>2</sup>	March 2023
Saint Joseph's University, PA*	March 2023
Thomas Jefferson University, Center City, PA*	June 2028
Thomas Jefferson University, East Falls & New Jersey, PA	March 2028
Thiel College, PA <sup>2</sup>	September 2023
Presbyterian College, SC <sup>2</sup>	September 2023
University of Charleston, SC	September 2026
Middle Tennessee State University, TN <sup>2</sup>	September 2024
Trevecca Nazarene University, TN*	March 2023

<b>PA Program at:</b>	<b>Next Validation Review</b>
Baylor College of Medicine, TX	June 2029
University of Texas Rio Grande Valley, TX	September 2023
Utah Valley University, UT <sup>2,*</sup>	June 2024
Eastern Virginia Medical School, VA*	March 2026

\*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
Chapman University, CA	September 2030
University of La Verne, CA <sup>2,3</sup>	June 2024
Samuel Merritt University, CA	June 2029
Southern California University of Health Sciences, CA <sup>2,3</sup>	TBD
University of Bridgeport, CT	September 2023
University of Bridgeport, CT	September 2023
Florida Gulf Coast University, FL	March 2032
Dominican University, IL	September 2030
University of Kentucky, KY	March 2027
Tufts University, MA	March 2026
Springfield College, MA	September 2026
University of Missouri-Kansas City, MO	September 2027
University of North Carolina-Chapel Hill, NC	March 2030
Franklin Pierce University, NH	September 2027
Rutgers University, NJ	September 2026
D'Youville College, NY	September 2029
Gannon University, PA	March 2027
Penn State University, PA	September 2027
Christian Brothers University, TN <sup>2</sup>	March 2023
University of North Texas Health Science Center, TX	September 2024
James Madison University, VA	September 2026
University of Wisconsin-Madison, WI	September 2025

<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 accreditation status initially of not less than two years. However, that period may be extended by the ARC-PA for up to an additional two years if the ARC-PA finds that the program is making substantial progress toward meeting all applicable standards but requires additional time to come into full compliance. Accreditation-Probation is granted when a program holding an accreditation status of Accreditation-Provisional or Accreditation-Continued does not, in the judgement of the ARC-PA meet the *Standards* or 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 focused site visit and is subject to 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.