



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

Accreditation Review Commission on Education for the Physician Assistant

Application for Continuing Accreditation[®]

Revised 03.2023

For Accreditation *Standards*, fifth edition as of 3.2023

SINGLE CAMPUS PROGRAMS

IF the program has more than one campus used for the PA program, use the application for programs with multiple campus locations.

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|--|---|
| Name of Program: Click here to enter program name | Sponsoring Institution: Click here to enter institution |
| City and State: Click here to enter city and state | Dates of Site Visit: Click here to enter dates |

ARC-PA
3325 Paddocks Parkway
Suite 345
Suwanee, Georgia 30024

www.arc-pa.org

PROGRAM REVIEW

Accreditation of PA programs is a process initiated by the sponsoring institution. It includes a comprehensive review of the program relative to the *Standards* and it is the responsibility of the PA program to demonstrate its compliance with the *Standards*. Accreditation decisions are based on the ARC-PA's evaluation of information contained in the accreditation application, the report of the site visit evaluation team, any additional requested reports or documents submitted to the ARC-PA by the program and the program accreditation history.

The program management portal and the program website must be maintained and be up to date and compliant with the *Standards* at all times. The program management portal and the program website will be reviewed by the commission in conjunction with this application. It is the responsibility of the program to maintain both the website and the portal on an on-going basis. Failure to maintain either may result in reconsideration of the program's accreditation status. A user manual is available on the portal to provide guidance and answer questions about the portal.

PLEASE NOTE

- The term "student(s)" as used in this document refers to those individuals enrolled in the PA program.
- *Italics* are used to reflect words and terms defined in the glossary of the *Standards*. The glossary may be found at the end of this document as well.

APPLICATION FORMAT

This application does not require the program to narratively address each standard or to complete an appendix for each standard. That does not mean, however, that the program is not responsible for continuing to demonstrate compliance with all standards. Programs may be asked about any standard during its validation visit or at any time as part of the comprehensive review of the program. Those standards for which the program is unable to demonstrate compliance may be cited by the Commission. Standards not requiring a narrative or completion of an appendix for this application are in grey font.

NOTE ABOUT APPENDICES

Throughout the application packet documents, references are made to required content and data for required appendices. In some cases, the content is to be provided by completion of ARC-PA developed TEMPLATES. In other cases, the program is given the latitude of displaying the data in a graphic display it designs. The program must also respond to all required narratives for the appendices.

Additionally, programs are required to include specific information, as listed in the table of required appendices, which may not otherwise be addressed in the body of this document.

TECHNICAL DIRECTIONS FOR COMPLETING THE APPLICATION

This application and its appendices were developed for use with Word 2010 or later for PC. As some features of the documents are NOT compatible with Word for Mac, the use of a Mac for completion is NOT recommended.

The application and appendices require programs to complete tables, provide narratives and mark text boxes. To complete the tables, left click inside the cells and type the required information. To provide

narratives, left click inside the narrative boxes and begin typing. Although the fields may appear small, they will expand to allow as much text as needed. If the text extends beyond the page, the document will automatically repaginate. **DO NOT** insert tables or graphs into the boxes or fields. Please append if required. To mark a check box, left click inside the box.

Provide log-in information for any links that require passwords.

Note that words appearing in *italics* are defined in the glossary of the Accreditation Standards. The glossary can be found at the end of the application.

The **Provide Narrative** sections are to be answered with brief and succinct answers.

The application and appendices are “protected.” You will be unable to insert or delete pages or modify anything that is not inside a text or form field. **DO NOT** attempt to unprotect the document. If you unprotect the document, there is a strong possibility that all entered data will be lost.

After you have completed the application and each appendix, use the “Save” or “Save As” command under the File menu. The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program’s name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.** The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format. The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

If you have any difficulties or questions, contact the ARC-PA offices at accreditationservices@arc-pa.org.

Please return the completed application and appendices to the ARC-PA office as directed in the Saving and Submissions Instructions at the end of the application.

THE SHOULD STANDARDS

Should is term used to designate requirements that must be met unless there is a compelling reason, acceptable to the ARC-PA, for not complying. Programs not meeting any component(s) of a *should* standard are expected to describe in detail efforts to meet the standard and explain why they are unable to do so. At the time of the review by the commission, a program or institution may be cited for failing to comply with a requirement that includes the term ‘should.’

INFORMATION ABOUT THE SELF-ASSESSMENT PROCESS AND SELF-STUDY REPORT

Programs completing this application may have been required to submit a self-study report (SSR) approximately three years prior to submitting this application. Program must follow the directions in **this application** which requires the completion of templates and narrative questions related to the ongoing self-assessment process which will constitute the content of the Self-Study Report. The SSR included with this application is to demonstrate ongoing self-assessment while addressing the expectations of the commission as shared with the program in the letter it received from the review of the SSR done three years ago. It is essential that programs give careful thought to providing responses

that address the critical *analysis* of data. Programs should review helpful resources, including the *Data Analysis Resource* and *Notes to Programs SSR Editions*, and the Ongoing Program Self-Assessment portion of the Accreditation Manual:

<https://www.arc-pa.org/accreditation-manual/>

Directions in the box below apply to all materials related to the Application and supporting documents. Directions must be followed.

1. ***An electronic copy of the complete application submitted by the program 12 weeks prior to the site visit must be readily available for site visitors at the time of the site visit. The onsite copy must be IDENTICAL to the electronically submitted application of record, with no changes or edits.***
2. *Copies of each document that support the program's compliance with the Standards must be readily available for site visitors as directed in the Organizing Materials Using a Secure Document Sharing Application instructions and as requested by the commission.*
3. *Complete web addresses for web pages designed in support of compliance with the Standards must be readily available for site visitors and as requested by the commission.*
4. *Copies of ALL signed agreements with other entities providing didactic or supervised clinical practice experiences must be readily available for site visitors and as requested by the commission.*
5. *Source documents for data summaries and analysis within the application and appendices must be readily available for site visitors and as requested by the commission.*
6. *Data and activities presented in ARC-PA TEMPLATES and program-designed graphic presentations must be verifiable. Documents and materials in support of entries must be available for review and as requested by the commission.*

APPLICATION OF RECORD: 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 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 should be sent with the program's response to observations.

SECTION A: ADMINISTRATION

INTRODUCTION

The administrative operation of a PA program involves collaboration between the faculty and administrative staff of the program and the sponsoring institution. The program *must* provide an environment that fosters intellectual challenge and a spirit of inquiry. The sponsoring institution *must* be committed to the success of the program and *must* provide effective oversight of operations and personnel. Well-defined policies *must* reflect regional accreditation requirements as well as the missions and *goals* of the program and sponsoring institution. Program documents *must accurately* reflect lines of institutional and programmatic responsibility as well as individual responsibilities. Adequate resources *must* be devoted to supporting the program in accomplishing its mission.

Follow the instructions in Appendix 1 to download and save the **Program Data Sheet** from the program's program management portal and **include** it as a PDF in **Appendix 1a**.

A1 SPONSORSHIP

A1.01 When more than one institution is involved in the provision of academic and/or clinical education, responsibilities of the respective institutions for instruction and supervision of students *must* be clearly described and documented in a manner signifying agreement by the involved institutions. Signed affiliation agreement(s) *must* define the responsibilities of each party related to the educational program for students, *must* specify whose policies govern, and *must* document student access to educational resources and clinical experiences. While one agreement between the sponsoring institution and each clinical entity to cover multiple professional disciplines is acceptable, these agreements are expected to include specific notations acknowledging the terms of participation between the PA program and each clinical entity. Agreements are expected to be signed by an authorized individual(s) of each participating entity.

Materials related to this standard *must* be available to the site visit team.

INSTITUTION RESPONSIBILITIES

The program will document faculty evaluation of institutional responsibilities in the **self-study report, Appendix 14**, addressing standards C1.01, C1.02 and C1.03.

Include the following in **Appendix 3a**: Diagram or description of the organizational relationship of the PA program to the sponsoring institution.

A1.02 The sponsoring institution is responsible for:

- a) supporting the planning by *program faculty* of curriculum design, course selection and program assessment,

Provide narrative describing how the institution demonstrates responsibility for and reviews compliance with A1.02a.

- b) hiring faculty and staff

Provide narrative describing how the institution demonstrates responsibility for and reviews compliance with A1.02b.

- c) ensuring effective program leadership,

Provide narrative describing how the institution demonstrates responsibility for and reviews compliance with A1.02c.

- d) complying with ARC-PA accreditation *Standards* and policies,

Provide narrative describing how the institution demonstrates responsibility for and reviews compliance with A1.02d.

- e) conferring the credential and graduate level academic degree which documents satisfactory completion of the educational program,

- f) ensuring that all PA personnel and student policies are consistent with federal, state, and local statutes, rules and regulations,

- g) documenting appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs,

If evidence of compliance can be found on a web site, **include the hyperlink to the specific page** in the narrative response below. If compliance is demonstrated by a page in a document found on a web site, **also include the name of the document and the page number** within the document. If the evidence of compliance is NOT on a web site, **provide a copy of the document(s)** that demonstrates compliance in **Appendix 3b**.

Provide narrative describing how the institution demonstrates and reviews compliance with A1.02g.

- h) *teaching out* currently matriculated students in accordance with the institution's regional accreditor or federal law in the event of program closure and/or loss of accreditation.

- i) defining, publishing, making *readily available* and consistently applying to faculty, its policies and procedures for processing faculty grievances and allegations of harassment,

If institutional policies and procedures for processing faculty grievances and allegations of harassment are not available on the web for reference, **include** a copy of the policies and procedures in **Appendix 3c**. Otherwise, provide the web site hyperlink where above policies

and procedures may be found. If compliance is demonstrated by a page in a document found on a web site, **also include the name of the document and the page number** within the document.

Provide narrative describing how the institution demonstrates responsibility for and reviews compliance with A1.02i.

- j) defining, publishing, making *readily available* and consistently applying to students, its policies and procedures for processing student allegations of harassment, and

If institutional policies and procedures for processing student grievances and allegations of harassment are not available on the web for reference, **include** a copy of the policies and procedures in **Appendix 3d**. Otherwise, provide the web site hyperlink where above policies and procedures may be found. If compliance is demonstrated by a page in a document found on a web site, **also include the name of the document and the page number** within the document.

Provide narrative describing how the institution demonstrates responsibility for and reviews compliance with A1.02j.

- k) defining, publishing, making *readily available* and consistently applying to students, its policies and procedures for refunds of tuition and fees.

If institutional policies and procedures for refunds of tuition and fees are not available on the web for reference, **include** a copy of the policies and procedures in **Appendix 3e**. Otherwise, provide the web site hyperlink where above policies and procedures may be found. If compliance is demonstrated by a page in a document found on a web site, **also include the name of the document and the page number** within the document.

Provide narrative describing how the institution demonstrates responsibility for and reviews compliance with A1.02k.

A1.03 The sponsoring institution *must provide sufficient* release time and financial resources in support of the *program director* and *principal faculty*, as applicable to the job description, for:

- a) maintenance of certification and licensure and
- b) professional development directly relevant to PA education.

Indicate which of the following are offered by the program/institution for the *program director* and *principal faculty*. The **Program Budget** is provided in **Appendix 1b**.

- non-vacation time for review and study for certification maintenance and licensure
If checked, please provide a brief description:

- funding related to certification maintenance and licensure

If checked, please provide a brief description:

- non-vacation time to attend professional development conferences or meetings

If checked, please provide a brief description:

- funding to attend professional development conferences or meetings

If checked, please provide a brief description:

Describe other support:

Provide narrative describing how the institution demonstrates responsibility for and reviews compliance with A1.03.

- A1.04 The sponsoring institution *must* provide academic support and *student services* to PA students that are *equivalent* to those services provided to other *comparable* students of the institution.

Provide narrative describing how the institution demonstrates responsibility for and reviews compliance with A1.04.

- A1.05 The sponsoring institution *should* provide PA students and faculty at geographically *distant campus* locations access to *comparable* services and resources available to PA students and faculty on the main campus, which help students reach their academic and career goals.

Note: This standard is not applicable for single campus programs.

INSTITUTION RESOURCES

Note: The program will document faculty evaluation of institutional resources in the **self-study report**, addressing standards C1.01, C1.02 and C1.03.

- A1.06 The sponsoring institution *must* provide the program with *sufficient* financial resources to operate the educational program and fulfill the program's obligations to matriculating and enrolled students.

This was addressed in part by completing the **Program Data Sheet** for **Appendix 1a**.

Follow the instructions in Appendix 1 to download and save the **Program Budget** from the program's program management portal and **include** it as directed in **Appendix 1b**.

Provide narrative describing how the institution demonstrates and reviews compliance with A1.06.

- A1.07 The sponsoring institution *must* provide the program with the human resources, including *sufficient* faculty, *administrative* and technical staff, necessary to operate the educational program, comply with the *Standards*, and fulfill obligations to matriculating and enrolled students.

This was addressed in part by completing the **Program Data Sheet** for **Appendix 1a**.

Provide narrative describing how the institution demonstrates and reviews compliance with A1.07.

- A1.08 The sponsoring institution *must* provide the program with the physical facilities to operate the educational program in accordance with the *Standards* and to fulfill its obligations to matriculating and enrolled students.

Complete the **ARC-PA Physical Facilities TEMPLATE** for **Appendix 1c**.

Provide narrative describing how the institution demonstrates and reviews compliance with A1.08.

- A1.09 The sponsoring institution *must* provide the program with access to instructional and reference materials needed to operate the educational program and support evidence-based practice.

Provide narrative describing how the institution demonstrates and reviews compliance with A1.09.

- A1.10 The sponsoring institution *must* support the program in:
- securing clinical sites and *preceptors sufficient* in number to allow all students to meet the program's *learning outcomes for supervised clinical practice experiences* and
 - ensuring all *required rotations* are located within the *United States*.

Provide narrative describing how the institution demonstrates and reviews compliance with A1.10a and b.

- A1.11 The sponsoring institution *must* demonstrate its commitment to student, faculty and staff *diversity, equity, and inclusion* by:

- a) supporting the program in defining its goal(s) for *diversity, equity and inclusion*,

Provide narrative describing how the institution demonstrates and reviews compliance with A1.11a.

- b) supporting the program in implementing recruitment strategies,

Provide narrative describing how the institution demonstrates and reviews compliance with A1.11b.

- c) supporting the program in implementing retention strategies, and

Provide narrative describing how the institution demonstrates and reviews compliance with A1.11c.

- d) making available, resources which promote *diversity, equity and inclusion*.

Provide narrative describing how the institution demonstrates and reviews compliance with A1.11d.

A2 PROGRAM PERSONNEL

Note: The program will address *sufficiency and effectiveness of principal and instructional faculty* and staff in standards C1.01, C1.02 and C1.03, the **self-study report**, documenting the process, application and results of ongoing program self-assessment.

Include the following in **Appendix 4a**: Diagram or description of the organizational structure of the PA program, to include at a minimum, the program director, *medical director, principal faculty* and *administrative support staff*.

Follow the instructions in Appendix 4 to download and save the **Program Personnel Excel Export** from the program's program management portal and **include** it in **Appendix 4b**.

- A2.01 All *program faculty* must possess the educational and experiential qualifications to perform their assigned duties.

Provide narrative describing how the program demonstrates and reviews compliance with A2.01.

Include the following **CURRENT** documents in **Appendix 4c**: Written job descriptions and Curricula Vitae, using **ARC-PA CV Template** for: Program Director, *Medical Director* and *Principal Faculty*.

PROGRAM FACULTY

A2.02 The program *must* have:

- a) *program faculty* that include the program director, *principal faculty*, *medical director*, and *instructional faculty*, and

This was addressed by completing the **Program Datasheet (Appendix 1a)** and providing the **CVs and job descriptions** in **Appendix 4c**.

- b) at least three FTE *principal faculty*, of which two FTE *principal faculty* *must* be PAs who are currently *NCCPA-certified*.

This was addressed by completing the **Program Datasheet (Appendix 1a)** and providing the **CVs** in **Appendix 4c**.

A2.03 *Principal faculty* *must* be *sufficient* in number to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program.

This was addressed in part by completing the **Program Datasheet (Appendix 1a)**.

The commission expects to see how the program determines *sufficiency* of faculty to meet the needs of enrolled students addressed in the **Self-Study Report**.

Provide narrative describing how the program demonstrates compliance with A2.03. The program may refer to the **Self-Study Report** as needed to show how it determines *sufficiency* of principal faculty to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program.

A2.04 *Principal faculty* and the program director *should* have academic appointments and privileges *comparable* to other faculty with similar academic responsibilities in the institution.

Provide narrative describing how the program demonstrates and reviews compliance with A2.04.

A2.05 *Principal faculty* and the program director *must* be responsible for, and actively participate in the processes of:

Complete ARC-PA Personnel Responsibilities TEMPLATE for **Appendix 4d**.

- a) developing, reviewing and revising as necessary the mission statement, *goals* and *competencies* of the program,
 b) selecting applicants for admission to the PA program,
 c) providing student instruction,
 d) evaluating student performance,

- e) academic counseling of students,
- f) assuring the availability of remedial instruction,
- g) designing, implementing, coordinating, and evaluating the curriculum, and
- h) evaluating the program.

PROGRAM DIRECTOR

A2.06 The program director *must* be a PA¹.

- a) The program director *must* possess at least three years of full-time higher education experience at the time of appointment.²
- b) The program director *must* be assigned to the program on a 12-month full time basis and at least 80% of that time *must* be devoted to academic and administrative responsibilities in support of the program.
- c) The program director *must* hold current or emeritus NCCPA certification status.

This was addressed by completing the **Program Datasheet (Appendix 1a)** and providing a **CV in Appendix 4c.**

A2.07 The program director *must* not be the medical director.

This was addressed by completing the **Program Datasheet (Appendix 1a)** and by providing the **Program Personnel Excel Export in Appendix 4b.**

A2.08 The program director *must* provide effective leadership by exhibiting:

- a) responsiveness to issues related to personnel,
- b) strong communication skills, and
- c) proactive problem solving.

Provide narrative describing how the institution assesses the program director's leadership of the program. **Include** how the institution reviews compliance with A2.08a-c in an ongoing manner.

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

- a) program organization,
- b) program administration,
- c) fiscal management of the program
- d) continuous programmatic review and *analysis*,
- e) program planning,
- f) program development,

¹ Program directors appointed before 9/1/2020 should be a physician assistant, those appointed on or after 9/1/2020 must be a physician assistant.

² Program directors appointed before 9/1/2020 should have at least 3 years higher education experience at the time of appointment, those appointed on or after 9/1/2020 must have at least 3 years higher education experience at the time of appointment.

- g) completion of ARC-PA required documents, and
- h) adherence to the *Standards* and ARC-PA policies.

This was addressed in part by providing a **job description** and **CV** in **Appendix 4c**.

Provide narrative describing how the program demonstrates compliance with A2.09a-h. **Include** how the institution and program assesses the program director's knowledge and responsibility for each component a-h of A2.09. **Include** how the institution reviews compliance with A2.09a-h in an ongoing manner.

- A2.10 The program director *must* supervise the *medical director, principal and instructional faculty* and staff in activities that directly relate to the PA program.

This was addressed in part by completing the **diagram or description of the organizational structure of the PA program** (**Appendix 4a**).

Provide narrative describing how the program demonstrates and reviews compliance with A2.10.

MEDICAL DIRECTOR

- A2.11 The medical director *must* be:
- a) a currently licensed allopathic or osteopathic physician³ and
 - b) certified by an ABMS- or AOA-approved specialty board.⁴

This was addressed by completing the **Program Datasheet** (**Appendix 1a**) and providing a CV and job description in **Appendix 4c**.

- A2.12 The *medical director must* be an *active* participant in the program and support the development of the program *competencies* to meet current practice standards as they relate to the PA role.

This was addressed in part by providing a **job description** and **CV** in **Appendix 4c** and the **Table of Personnel Responsibilities** TEMPLATE in **Appendix 4d**.

Provide narrative describing how the program demonstrates and reviews compliance with A2.12.

INSTRUCTIONAL FACULTY

³ *Medical directors* appointed before 3/1/06 should have their current licensure in the state in which the program exists.

⁴ *Medical directors* appointed before 3/1/06 should be board certified those appointed on or after 3/1/06 must be board certified.

A2.13 *Instructional faculty must be:*

- a) qualified through academic preparation and/or experience to teach assigned subjects and
- b) knowledgeable in course content and effective in teaching assigned subjects.

Provide narrative describing how the program demonstrates and reviews compliance with A2.13a and b. **Include** the process and criteria used for selecting faculty in relation to the requirements of these standards.

A2.14 In addition to the *principal faculty*, there *must be sufficient didactic instructional faculty* to provide students with the necessary attention and instruction to acquire the knowledge, skills, and *competencies* required for entry into the profession.

Provide narrative describing how the program demonstrates and reviews compliance with A2.14. The program may refer to the **self-study report** as needed to show how it determines *sufficiency of instructional faculty*.

A2.15 The program *should not* rely primarily on resident physicians for didactic instruction.

A2.16 All *instructional faculty* actively serving as *supervised clinical practice experience preceptors* must hold a valid license to practice at the clinical site.

- b) (rescinded effective 3.2022)
- c) (moved to A2.17b, effective 3.2022)

Provide narrative describing how the program demonstrates and reviews compliance with A2.16.

A2.17 In each location to which a student is assigned for didactic instruction or *supervised clinical practice experiences*, the program *must*:

- a) inform the student which *principal or instructional faculty* member is designated by the program to assess and supervise the student's progress in achieving the *learning outcomes* it requires of students and how to contact this faculty member, and

Provide narrative describing how the program demonstrates and reviews compliance with A2.17a.

- b) orient all *instructional faculty* to the specific *learning outcomes* it requires of students.

Provide narrative describing how the program demonstrates and review compliance with A2.17b.

ADMINISTRATIVE SUPPORT STAFF

A2.18 *Administrative support* for the program *must* be:

- a) at least a 1.0 FTE position dedicated exclusively to the program, and
- b) *sufficient* in number to manage the administrative responsibilities consistent with the organizational complexity and total enrollment of the program.

Provide Narrative describing how the program demonstrates and reviews compliance with A2.18a and b. The program may refer to the **Self-Study Report** as needed to show how it determines the sufficiency of administrative support staff to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program.

A3 OPERATIONS

Note: The program will address assessment of administrative aspects (operations) of the program in standards C1.01, C1.02 and C1.03, the **self-study report**, documenting the process, application and results of ongoing program self-assessment.

POLICIES

Note:

Not all standards require written policy to demonstrate compliance. The standard's language specifies which policies must be published.

In response to the individual standards in sections A3 of the Standards:

If evidence of compliance with these standards is on the program or institution web site, **include**, in the narrative box, **the hyperlink to the specific page** where compliance is demonstrated. If compliance is demonstrated by a page in a document on the web site, the program must also **list the document name and specific page number within the document**.

If evidence of compliance with these standards is NOT on the program or institution web site, **provide a copy of the document(s)** that demonstrates compliance in the appendix indicated with the standard.

The program is NOT to include an entire manual in response to a standard about specific content, but only the appropriate pages of the manual and must be labeled with the standard for which the page provides evidence. Complete copies of the handbooks/manuals containing policies will be placed in **Appendix 16**. Providing copies of program policy manuals in the application of record does not negate the need for programs to **append evidence of compliance in appendices** as required throughout the application.

Site visitors and ARC-PA commissioners **WILL** review the content on the program's web site.

A3.01 Program policies *must* apply to all students, *principal faculty* and the program director regardless of location. A signed clinical affiliation agreement or memorandum of understanding may specify that certain program policies will be superseded by those at the clinical site.

Provide narrative describing how the program demonstrates compliance with A3.01. **If the program has documents supporting compliance, see note above.** If documentation of compliance is not available on the web for reference as noted above and the program can provide copies of documents that demonstrate compliance, **provide** a copy, as noted above, in **Appendix 05.**

- A3.02 The program *must* define, publish, make *readily available* and consistently apply its policies and practices to all students.

Provide narrative describing how the program demonstrates and reviews compliance with A3.02.

- A3.03 The program *must* define, publish, make *readily available* and consistently apply a policy for prospective and enrolled students that they *must* not be required to provide or solicit clinical sites or *preceptors*.

Provide narrative describing how the program demonstrates and reviews compliance with A3.03. **Include** the web site hyperlink where above policy may be found.

- A3.04 The program *must* define, publish, make *readily available* and consistently apply a policy that PA students *must* not be required to work for the program.

Provide narrative describing how the program demonstrates and reviews compliance with A3.04. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05.**

- A3.05 The program *must* define, publish, make *readily available* and consistently apply a policy that PA students *must* not substitute for or function as:

- a) *instructional faculty* and
- b) *clinical or administrative staff*.

Provide narrative describing how the program demonstrates and reviews compliance with A3.05a and b. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05.**

- A3.06 The program *must* define, publish, make *readily available* and consistently apply a policy that PA students *must* be clearly identified in the clinical setting to distinguish them from other health profession students and practitioners.

Provide narrative describing how the program demonstrates and reviews compliance with A3.06. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

- A3.07 The program *must* define, publish, make *readily available* and consistently apply:
- a policy on immunization and health screening of students. Such policy *must* be based on then current Centers for Disease Control and Prevention recommendations for health professionals and state specific mandates.

Provide narrative describing how the program demonstrates and reviews compliance with A3.07a. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

- written travel health policies based on then current CDC recommendations for international travel for programs offering elective international curricular components.

Provide narrative describing how the program demonstrates and reviews compliance with A3.07b. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**. **If not applicable, write N/A**.

- A3.08 The program *must* define, publish, make *readily available* and consistently apply policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities which would place them at risk. Those policies *must*:
- address methods of prevention,
 - address procedures for care and treatment after exposure, and
 - clearly define financial responsibility.

Provide narrative describing how the program demonstrates and reviews compliance with A3.08 a-c. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

- A3.09 The program *must* define, publish, make *readily available* and consistently apply policies that preclude *principal faculty*, the program director and the *medical director* from participating as health care providers for students in the program, except in an emergency situation.

Provide narrative describing how the program demonstrates and reviews compliance with A3.09. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

- A3.10 The program *must* define, publish, make *readily available* and consistently apply written procedures that provide for *timely* access and/or referral of students to services addressing personal issues which may impact their progress in the PA program.

Provide narrative describing how the program demonstrates and reviews compliance with A3.10. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

FAIR PRACTICES AND ADMISSIONS

A3.11 The sponsoring institution and program's announcements and advertising *must accurately* reflect the program offered.

Provide the program web site hyperlink where this information is found.

and

Include a **blinded** sample of the correspondence/documents used to communicate with those inquiring about the program in **Appendix 6a**. (Note: DO NOT include program brochures, university/college catalogue.)

In responding to standard **A3.12**, **provide the hyperlink directly to the specific page** where information may be found.

Note: If compliance is demonstrated by a page in a document on the web site, the program must also **list the specific page number within the document**.

Site visitors and ARC-PA commissioners **will** review the content on the program's web site.

A3.12 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 as provided to the program by the ARC-PA,

Provide the program web site hyperlink where information is published.

b) evidence of its *effectiveness* in meeting its *goals*,

Provide the program web site hyperlink where information is published.

c) the most current annual *NCCPA PANCE* Exam Performance Summary Report Last 5 Years provided by the *NCCPA* through its program portal, no later than April first each year,

Provide the program web site hyperlink where information is published.

d) all required curricular components including *required rotation* disciplines,

Provide the program web site hyperlink where information is published.

e) academic credit offered by the program,

Provide the program web site hyperlink where information is published.

f) estimates of all costs (tuition, fees, etc.) related to the program,

Provide the program web site hyperlink where information is published.

g) program required *competencies* for entry level practice, consistent with the competencies as defined by the PA profession,

Provide the program web site hyperlink where information is published.

h) whether certain services and resources are only available to students and faculty on the main campus when the program is offered at a geographically *distant campus* location, and

Note: This standard is not applicable for single campus programs.

i) the most current annual student attrition information, on the table provided by the ARC-PA, no later than April first each year.

Provide the program web site hyperlink where information is published.

In responding to standard **A3.13**, **provide the hyperlink directly to the specific page** where information may be found.

Note: If compliance is demonstrated by a page in a document on the web site, the program should also **list the specific page number within the document.**

Site visitors and ARC-PA commissioners **will** review the content on the program's web site.

A3.13 The program *must* define, publish, consistently apply and make *readily available* to *prospective students*, policies and procedures to include:

a) admission and enrollment practices that favor specified individuals or groups (if applicable),

Provide the program web site hyperlink where information is published. **If not applicable, write N/A.**

b) admission requirements regarding prior education or work experience,

Provide the program web site hyperlink where information is published.

c) practices for awarding or granting *advanced placement*,

Provide the program web site hyperlink where information is published.

d) any required academic standards for enrollment, and

Provide the program web site hyperlink where information is published.

e) any required *technical standards* for enrollment.

Provide the program web site hyperlink where information is published.

A3.14 The program *must* make student admission decisions in accordance with clearly defined and *published* practices of the institution and program.

Complete ARC-PA Admission Policies and Procedures TEMPLATE for **Appendix 6b**.

Include copies of the forms used to screen applications and select candidates for class positions in **Appendix 6c**.

Provide narrative describing how the program demonstrates compliance with A3.14.

A3.13 a-e and A3.14: **Provide narrative** describing how the program will review compliance with all practices, policies and procedures for A3.13 a-e and A3.14.

In responding to standard A3.15:

The program must **include the hyperlink to the specific page** where compliance is demonstrated. If compliance is demonstrated by a page in a document on the web site, the program must also **list the specific page number within the document**. If a website requires a password, include the access information.

If the program does NOT post its policies or manuals on its web site, in responding to standard A3.15, **provide a copy of the documents** that demonstrate compliance in **Appendix 07**. The program is NOT to include an entire manual in response to a standard about specific content, but only the appropriate page(s) of the manual, which must be labeled with the standard for which the pages provides evidence.

Complete copies of the handbooks/manuals containing policies will be placed in **Appendix 16**. Providing copies of program policy manuals in the application of record does not negate the need for programs to **append evidence of compliance in appendices** as required throughout the application.

Site visitors and ARC-PA commissioners **WILL** review the content on the program's web site.

A3.15 The program *must* define, publish, consistently apply and make *readily available* to students upon admission:

a) any required academic standards,

Provide hyperlink directly to the page of the program's web site where this information is made available to students (A3.15a). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15a.

b) requirements and deadlines for progression in and completion of the program,

Provide hyperlink directly to the page of the program's web site where this information is made available to students (A3.15b). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15b.

c) policies and procedures for *remediation* and *deceleration*,

Provide hyperlink directly to the page of the program's web site where this information is made available to students (A3.15c). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15c.

d) policies and procedures for withdrawal and dismissal,

Provide hyperlink directly to the page of the program's web site where this information is made available to students (A3.15d). **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15d.

e) policy for student employment while enrolled in the program,

Provide hyperlink directly to the page of the program's web site where this information is made available to students (A3.15e). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15e.

f) policies and procedures for allegations of student mistreatment, and

Provide hyperlink directly to the page of the program's web site where this information is made available to students (A3.15f). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15f.

g) policies and procedures for student grievances and appeals.

Provide hyperlink directly to the page of the program's web site where this information is made available to students (A3.15g). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15g.

A3.15 a-g. **Provide narrative** describing how the program will review compliance with all policies and procedures for A3.15a-g.

Complete the following regarding **advanced placement**, check all that apply (A3.16):

- The program does not grant *advanced placement* to any applicant. **(If this box is checked, write N/A in response to answer A3.16 a, b, c below)**
- Advanced placement* is granted based on an evaluation of the applicant's transcripts.
- Advanced placement* is granted based on applicant's performance on institution required standardized exams, like CLEP. Explanatory comment **required** if box checked.

- Advanced placement* is granted based on applicant's performance on program offered content exams. Explanatory comment **required** if box checked.

How many students have been given advanced standing by the program to date?

A3.16 Programs granting *advanced placement* must document within each student's file that those students receiving *advanced placement* have:

a) met program defined criteria for such placement,

Provide narrative describing how the program demonstrates compliance with A3.16a. **If not applicable, write N/A.**

b) met institution defined criteria for such placement, and

Provide narrative describing how the program demonstrates compliance with A3.16b. **If not applicable, write N/A.**

- c) demonstrated appropriate *competencies* for the curricular components in which *advanced placement* is given.

Provide narrative describing how the program demonstrates compliance with A3.16c. **If not applicable, write N/A.**

DURING THE VISIT, the site visit team will review student files for any students considered for *advanced placement*.

STUDENT RECORDS

Complete ARC-PA Institutional and Program Records TEMPLATE for **Appendix 08**.

A3.17 Student academic records kept by the sponsoring institution or program, in a paper or electronic format, *must* be readily accessible to authorized program personnel and *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.

FOR THE VALIDATION VISIT, the site visit team will review student files to determine if the program has provided evidence in support of its compliance with this standard.

A3.18 PA students and other unauthorized persons *must* not have access to the academic records or other confidential information of other students or faculty.

Provide narrative describing how the program demonstrates and reviews compliance with A3.18.

A3.19 Student *health records* are confidential and *must* not be accessible to or reviewed by *program, principal or instructional faculty* or staff except for immunization and screening results, which may be maintained and released with written permission from the student.

Provide narrative describing how the program demonstrates and reviews compliance with A3.19.

Faculty Records

- A3.20 Faculty records, including program director, *medical director* and *principal faculty* must include:
- current job descriptions that include duties and responsibilities specific to each faculty member, and
 - current curriculum vitae.

Materials related to this standard *must* be available **for the site visit**.

- A3.21 Program records *must* include a current curriculum vitae for each *course director*.

Materials related to this standard *must* be available **for the site visit**.

SECTION B: CURRICULUM AND INSTRUCTION

INTRODUCTION

The program curriculum *must* prepare students to provide patient-centered care and collegially work on collaborative medical teams in an *interprofessional* environment. The curriculum *must* establish a strong foundation in health information technology and evidence-based medicine and *must* emphasize the importance of remaining current with the changing nature of clinical practice.

Section B addresses all aspects of the curriculum. The professional curriculum for PA education *must* include applied medical, behavioral and social sciences; patient assessment and clinical medicine; *supervised clinical practice*; and health policy and professional practice issues. Issues relating to individual professional responsibility and working in the health care delivery system are included in the clinical preparatory section of this *Standards* section and apply to *supervised clinical practice* settings in the clinical curriculum.

Programs need not have discrete courses for each of the instructional areas discussed within this section. However, *learning outcomes* related to all instructional areas are important elements of the curriculum and course syllabi.

The standards in section B1 apply to the entire curriculum of the program and have application to all curricular components.

The standards in section B2 apply primarily to the didactic curriculum of the program but may be included in the clinical curriculum as appropriate and determined by the program.

The standards in section B3 apply to the clinical curriculum of the program.

The standards in section B4 apply to the entire curriculum of the program and have application to all curricular components.

B1 CURRICULUM

Note: The program will address the *effectiveness* of the didactic and clinical curriculum, and its preparation of graduates to achieve program defined *competencies* in C1.01, C1.02 and C1.03, the **self-study report**, documenting the process, application and results of ongoing program self-assessment.

Complete ARC-PA Curriculum Schematic **TEMPLATE** for **Appendix 9a**.

Place current syllabi used for **ALL** courses in the curriculum following the directions provided in **Appendix 17**.

B1.01 The curriculum *must*:

- a) be consistent with the mission and *goals* of the program,

The mission and the goals of the program were **provided** in **Appendix 4e & 4f**, if not available on the web. If these are on the program's/institution's web site, **provide the URL** for the page on which these are found here.

If on the website, provide URL(s) here.

Provide narrative describing how the program demonstrates and reviews compliance with B1.01a.

- b) be consistent with program *competencies*,

Include the following in **Appendix 9b**: The program *competencies*.

Provide narrative describing how the program demonstrates and reviews compliance with B1.01b.

- c) include core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care, and

Provide narrative describing how the program demonstrates and reviews compliance with B1.01c.

- d) be of *sufficient* breadth and depth to prepare the student for the clinical practice of medicine.

Provide narrative describing how the program demonstrates and reviews compliance with B1.01d. **Include** the considerations used to determine "*sufficient* breadth and depth" of the program curriculum. Refer to the **self-study report** as needed.

- B1.02 The curriculum design *must* reflect content and course sequencing that builds upon previously achieved student learning.

Provide narrative describing how the program demonstrates and reviews compliance with B1.02. Refer to the **self-study report** as needed.

- B1.03 For each didactic and clinical course (including *required* and *elective rotations*), the program *must* define and publish for students the following detailed information in syllabi or appendix to the syllabi:

- a) course name,
- b) course description,
- c) faculty instructor of record,
- d) course goal/rationale,
- e) *learning outcomes* and *instructional objectives*, in measurable terms that can be assessed, that guide student acquisition of required *competencies*,
- f) outline of topics to be covered that align with *learning outcomes* and *instructional objectives*,
- g) methods of student assessment/evaluation, and
- h) plan for grading.

Instructional objectives as required by the application are provided in **Appendix 10**.

Learning outcomes as required by the application are provided in **Appendix 12**.

Course syllabi with appendices as applicable for all courses/rotations in the curriculum are provided in **Appendix 17**.

Provide narrative describing how the program demonstrates and reviews compliance with B1.03.

- B1.04 The program *must* ensure educational equivalency of course content, student experience and access to didactic and laboratory materials when instruction is:

- a) conducted at geographically separate locations, and/or

Note: This standard is not applicable for single campus programs.

- b) provided by different pedagogical and instructional methods or techniques for some students.

If the program provides instruction by different pedagogical and instructional methods or techniques for some students, **provide narrative** describing how the program demonstrates and reviews compliance with B1.04b. **Write N/A if not applicable.**

B2 DIDACTIC INSTRUCTION

Note: the program is reminded that **Standards B4.01a-b** address how the program conducts *frequent*, objective and documented evaluations of student performance, aligned to show that students meet the program's *instructional objectives* and *learning outcomes* including those listed for the B2 Standards, and allows the program to identify and address any student deficiencies in a *timely* manner.

Materials related to didactic instruction *must* be available and flagged for easy review **in the materials provided for the site visit**.

- B2.01 While programs may require specific course(s) as prerequisites to enrollment, those prerequisites *must* not substitute for more advanced applied content within the professional component of the program.

Provide narrative describing how the program demonstrates and reviews compliance with B2.01.

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Note: the program is reminded that **Standards B4.01a-b** address how the program conducts *frequent*, objective and documented evaluations of student performance, aligned to show that students meet the program's *instructional objectives* and *learning outcomes*, including those listed for the B2 Standards, and allows the program to identify and address any student deficiencies in a *timely* manner.

- B2.02 The curriculum *must* include instruction in the following areas of medical sciences and their application in clinical practice:
- a) anatomy,
 - b) physiology,
 - c) pathophysiology,
 - d) pharmacology and pharmacotherapeutics, and
 - e) the genetic and molecular mechanisms of health and disease.

Include *instructional objectives* related to standard B2.02a-e following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.03 The curriculum *must* include instruction in clinical medicine covering all organ systems.

Include *instructional objectives* related to standard B2.03 following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.04 The curriculum *must* include instruction in interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families and other health professionals.

Include *instructional objectives* related to standard B2.04 following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.05 The curriculum *must* include instruction related to the development of clinical reasoning and problem-solving abilities.

Include *instructional objectives* related to standard B2.05 following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.06 The curriculum *must* include instruction to prepare students to provide medical care to patients with consideration for:

- a) disability status or special health care needs,
- b) ethnicity/race,
- c) gender identity,
- d) religion/spirituality,
- e) sexual orientation, and
- f) social determinants of health.

Include *instructional objectives* related to standard B2.06a-f following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.07 The curriculum *must* include instruction in patient evaluation, diagnosis and management across all age groups and from initial presentation through ongoing follow-up, including:

- a) interviewing and eliciting a medical history,
- b) performing complete and focused physical examinations,
- c) generating differential diagnoses,
- d) ordering and interpreting diagnostic studies,
- e) patient management including acute and chronic care plans, and
- f) patient education and referral.

Include *instructional objectives* related to standard B2.07a-f following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.08 The curriculum *must* include instruction in:

- a) the provision of medical care across the life span including prenatal, infant, children, adolescents, adults and elderly,
- b) preventive, emergent, acute, chronic, and rehabilitative patient encounters,
- c) pre-, intra-, and post-operative care,
- d) psychiatric/behavioral conditions, and
- e) palliative and end-of-life care.

Include *instructional objectives* related to standard B2.08a-e following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

B2.09 The curriculum *must* include instruction in clinical and technical skills including procedures based on then current professional practice.

Include *instructional objectives* related to standard B2.09 following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

B2.10 The curriculum *must* prepare students to work collaboratively in *interprofessional* patient centered teams. Instruction *must*:

- a) include content on the roles and responsibilities of various health care professionals,
- b) emphasize the team approach to patient centered care beyond the traditional physician-PA team approach, and
- c) include application of these principles in *interprofessional* teams.

Include *instructional objectives* related to standard B2.10a-c following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

Provide narrative describing how the program provides students the opportunity to apply principles of *interprofessional practice* in interprofessional teams.

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B2.11 The curriculum *must* include instruction in the following areas of social and behavioral sciences and their application to clinical practice in:

- a) death, dying and loss,
- b) human sexuality,
- c) normal and abnormal development across the life span,
- d) patient response to illness or injury,
- e) patient response to stress,
- f) substance use disorder, and
- g) violence identification and prevention.

Include *instructional objectives* related to standard B2.11a-g following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

B2.12 The curriculum *must* include instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients:

- a) adhere to treatment plans,
- b) modify their behaviors to more healthful patterns, and
- c) develop coping mechanisms.

Include *instructional objectives* related to standard B2.12a-c following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.13 The curriculum *must* include instruction to prepare students to search, interpret and evaluate the medical literature to include:
- framing of research questions,
 - interpretation of basic biostatistical methods,
 - the limits of medical research,
 - types of sampling methods, and
 - the use of common databases to access medical literature.

Include *instructional objectives* related to standard B2.13a-e following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.14 The curriculum *must* include instruction about the business of health care to include:
- coding and billing,
 - documentation of care,
 - health care delivery systems, and
 - health policy.

Include *instructional objectives* related to standard B2.14a-d following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.15 The curriculum *must* include instruction in concepts of public health as they relate to the role of the practicing PA and:
- disease prevention, surveillance, reporting and intervention,
 - the public health system,
 - patient advocacy, and
 - maintenance of population health.

Include *instructional objectives* related to standard B2.15a-d following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.16 The curriculum *must* include instruction in:
- patient safety,
 - prevention of medical errors,
 - quality improvement, and
 - risk management.

Include *instructional objectives* related to standard B2.16a-d following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

- B2.17 The curriculum *must* include instruction about the PA profession to include:
- credentialing,
 - historical development,
 - laws and regulations regarding professional practice and conduct,
 - licensure and certification,

- e) the PA relationship with the physician and other health care providers,
- f) policy issues that affect practice, and
- g) professional organizations.

Include *instructional objectives* related to standard B2.17a-g following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

B2.18 The curriculum *must* include instruction in the principles and practice of medical ethics.

Include *instructional objectives* related to standard B2.18 following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

B2.19 The curriculum *must* include instruction in:

- a) intellectual honesty,
- b) academic integrity, and
- c) professional conduct.

Include *instructional objectives* related to standard B2.19a-c following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

B2.20 The curriculum *must* include instruction about provider *personal wellness* including prevention of:

- a) impairment and
- b) burnout.

Include *instructional objectives* related to standard B2.20a and b following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with the *instructional objectives*, listing in which courses they are addressed.

B3 SUPERVISED CLINICAL PRACTICE EXPERIENCE INSTRUCTION

Place current syllabi used for **ALL** clinical courses/*rotations* in the curriculum in **Appendix 17**.

B3.01 The program *must* secure clinical sites and *preceptors* in *sufficient* numbers to allow all clinical students to meet the program's *learning outcomes* for *supervised clinical practice experiences*.

Follow instructions in Appendix 11 for downloading the **Supervised Clinical Practice Experiences (SCPE) Portal Tab to Create an Excel Document** for inclusion in **Appendix 11a**.

Provide narrative describing any issues related to the program's ability to secure clinical sites in *sufficient* number **to meet the needs of currently enrolled clinical students and the next planned cohorts**. Refer to **the self-study report** as needed.

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If the program's SCPEs span greater than 12 months, **provide narrative** explaining how the program schedules the overlap of the two classes. Be sure to **include** detail on how the program assures it has active sites with agreements sufficient in number to accommodate all students during the overlap.

Write N/A if not applicable.

- B3.02 Clinical sites and *preceptors* located outside of the *United States* must only be used for *elective rotations*.

Complete the **ARC-PA Elective Experiences Outside the United States TEMPLATE** for **Appendix 11b**, whether the program has such experiences or not.

Provide narrative describing how the program demonstrates and reviews compliance with B3.02.

Write N/A If the program has no clinical sites located outside of the *United States*.

Note: the program is reminded that **Standards B4.01a-b** address how the program conducts *frequent*, objective and documented evaluations of student performance, aligned to show that students meet the program's *instructional objectives* and *learning outcomes*, including those listed for the B3 Standards, and allows the program to identify and address any student deficiencies in a *timely* manner.

- B3.03 *Supervised clinical practice experiences* must enable all students to meet the program's *learning outcomes*:

a) for preventive, emergent, acute, and chronic patient encounters,

Include the program's *learning outcomes* for *supervised clinical practice experiences* related to standard B3.03a in **Appendix 12**.

Provide narrative describing how the program demonstrates and reviews compliance with B3.03a.

b) across the life span, to include infants, children, adolescents, adults, and the elderly,

Include the program's *learning outcomes* for *supervised clinical practice experiences* related to standard B3.03b in **Appendix 12**.

Provide narrative describing how the program demonstrates and reviews compliance with B3.03b.

c) for women's health (to include prenatal and gynecologic care),

Include the program's *learning outcomes* for *supervised clinical practice experiences* related to standard B3.03c in **Appendix 12**.

Provide narrative describing how the program demonstrates and reviews compliance with B3.03c.

- d) for conditions requiring surgical management, including pre- operative, intra-operative, post-operative care, and

Include the program's *learning outcomes for supervised clinical practice experiences* related to standard B3.03d in **Appendix 12.**

Provide narrative describing how the program demonstrates and reviews compliance with B3.03d.

- e) for behavioral and mental health conditions.

Include the program's *learning outcomes for supervised clinical practice experiences* related to standard B3.03e in **Appendix 12.**

Provide narrative describing how the program demonstrates and reviews compliance with B3.03e.

B3.04 *Supervised clinical practice experiences must occur in the following settings:*

- a) emergency department,

Provide narrative describing how the program demonstrates and reviews compliance with B3.04a.

- b) inpatient,

Provide narrative describing how the program demonstrates and reviews compliance with B3.04b.

- c) outpatient, and

Provide narrative describing how the program demonstrates and reviews compliance with B3.04c.

- d) operating room.

Provide narrative describing how the program demonstrates and reviews compliance with B3.04d.

B3.05 *Instructional faculty* for the supervised clinical practice portion of the educational program *must* consist primarily of practicing physicians and PAs.

Provide narrative describing how the program demonstrates compliance with B3.05.

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

a) physicians who are specialty board certified in their area of instruction,

Provide narrative describing how the program demonstrates and reviews compliance with B3.06a.

b) NCCPA certified PAs, or

Provide narrative describing how the program demonstrates and reviews compliance with B3.06b.

c) other licensed health care providers qualified in their area of instruction.

Provide narrative describing how the program demonstrates and reviews compliance with B3.06c.

B3.07 *Supervised clinical practice experiences must occur with preceptors* who enable students to meet program defined *learning outcomes* for:

a) family medicine,

Provide narrative describing how the program demonstrates and reviews compliance with B3.07a.

b) emergency medicine,

Provide narrative describing how the program demonstrates and reviews compliance with B3.07b.

c) internal medicine,

Provide narrative describing how the program demonstrates and reviews compliance with B3.07c.

d) surgery,

Provide narrative describing how the program demonstrates and reviews compliance with B3.07d.

e) pediatrics,

Provide narrative describing how the program demonstrates and reviews compliance with B3.07e.

f) women's health including prenatal and gynecologic care, and

Provide narrative describing how the program demonstrates and reviews compliance with B3.07f.

g) behavioral and mental health care.

Provide narrative describing how the program demonstrates and reviews compliance with B3.07g.

B4 ASSESSMENT OF STUDENT LEARNING

NOTE: In advance of the site visit, the SV team chair may request the program have available, select student evaluation instruments in support of the B4 standards. **The SV team will determine which student evaluation instruments should be reviewed for the site visit.**

Complete ARC-PA Student Evaluation TEMPLATE for Appendix 13a.

B4.01 The program *must* conduct *frequent*, objective and documented evaluations of student performance in meeting the program's *learning outcomes* and *instructional objectives* for both didactic and *supervised clinical practice experience* components. The evaluations must:

a) align with what is expected and taught and

Provide narrative describing how the program demonstrates and reviews compliance with B4.01a for the **didactic instructional objectives** and **learning outcomes**. **Include in the narrative**, how the program aligns its *learning outcomes* and *instructional objectives*, including, but not limited to, those required for the B2 standards, with the relevant evaluations listed in the **ARC-PA Student Evaluation TEMPLATE** in **Appendix 13a**.

Include blank copies of all forms **used by preceptors** to evaluate students during *supervised clinical practice experiences* in **Appendix 13b**. This may include but is not limited to preceptor evaluation of student forms and skills checklists used by the preceptor to evaluate the student.

Provide narrative describing how the program demonstrates and reviews compliance with B4.01a for the *supervised clinical practice experience instructional objectives and learning outcomes*. **Include in the narrative**, how the program aligns its *learning outcomes*, including but not limited to those required for standards B3.03a-e, with the relevant evaluations listed in the **ARC-PA Student Evaluation TEMPLATE** in **Appendix 13a**.

b) allow the program to identify and address any student deficiencies in a *timely* manner

Provide narrative describing how the program demonstrates compliance with B4.01b. (Programs may reference as appropriate, the **ARC-PA Student Evaluation TEMPLATE** for didactic curriculum and *supervised clinical practice experiences* and blank copy(ies) of the form(s) used by *preceptors* to evaluate students in **Appendix 13b**).

B4.02 (rescinded effective 9.2020)

B4.03 The program *must* conduct and document a *summative evaluation* of each student within the final four months of the program to verify that each student meets the program *competencies* required to enter clinical practice, including:

- a) clinical and technical skills,
- b) clinical reasoning and problem-solving abilities,
- c) interpersonal skills,
- d) medical knowledge, and
- e) professional behaviors.

Provide narrative describing the program's *summative evaluation* process including how methods of evaluation measure required components a-e of the program's *competencies* and how *summative evaluation* of each student is documented. Indicate timing during the program and what occurs if a student does not meet defined performance expectations.

Programs may reference as appropriate, the *competencies* provided in **Appendix 9b**.

B4.04 The program *must* document equivalency of student evaluation methods and outcomes when instruction is:

- a) conducted at geographically separate locations and/or
- Note: Standard B4.04a is not applicable for single campus programs.**

- b) provided by different pedagogical and instructional methods or techniques for some students.

If the program provides instruction by different pedagogical and instructional methods or techniques for some students, **provide narrative** describing how the program demonstrates and reviews compliance with B4.04b. Refer to **the self-study report** as needed.

If not applicable, **write N/A.**

SECTION C: EVALUATION

INTRODUCTION

The program *must* have a robust and systematic process of ongoing self-assessment to review the quality and *effectiveness* of their educational practices, policies and outcomes. This process *should* be conducted within the context of the mission and *goals* of both the sponsoring institution and the program, using the 5th edition Accreditation Standards for Physician Assistant Education (*Standards*) as the point of reference. A well-developed process occurs throughout the academic year and across all phases of the program. It includes analysis of quantitative and qualitative data collected from students, graduates, faculty (principal and instructional) and staff, as applicable. It critically assesses all aspects of the program relating to sponsorship, resources, students, operational policies, curriculum and clinical sites. Ongoing assessment of educational experiences is used to identify strengths and areas in need of improvement and leads to the development of plans for corrective intervention. The program's data collection and evaluation *must* be submitted using forms and processes developed by the ARC-PA. The data sources specified are considered minimums. Programs are encouraged to use additional data sources.

C1 ONGOING PROGRAM SELF-ASSESSMENT

In responding to standards **C1.01a-g**, **C1.02a-d** and **C1.03**, **Complete** the separate **Self-Study Report** for **Appendix 14**.

C2 CLINICAL SITE EVALUATION

C2.01 The program *must* define and maintain effective processes and document the initial and ongoing evaluation, of all sites and *preceptors* used for *supervised clinical practice experiences* to ensure that students are able to fulfill program *learning outcomes* with access to:

- a) physical facilities,
- b) patient populations, and
- c) supervision.

Include a blank copy(ies) of the form(s) used in this process in **Appendix 15**.

Provide narrative describing how the program demonstrates and reviews compliance with C2.01 a-c.

Describe the program's process for the initial review of all sites and preceptors used for *supervised clinical practice experiences* to ensure that they provide access to physical facilities,

patient populations and appropriate supervision allowing students to fulfill program *learning outcomes*. Refer to **the self-study report** as needed.

Describe the program's process for the ongoing review of all sites and preceptors used for *supervised clinical practice experiences* to ensure that they provide access to physical facilities, patient populations and appropriate supervision allowing students to fulfill program *learning outcomes*. Refer to **the self-study report** as needed.

SECTION D: PROVISIONAL ACCREDITATION

Not Applicable for Continuing Accreditation

SECTION E: ACCREDITATION MAINTENANCE

Programs are expected to provide reports and documents as required by the ARC-PA.

Based on the data contained in reports and documents, the program may be required to submit additional information, may be scheduled for an onsite evaluation, may have the length of time between comprehensive evaluation visits changed, or may have its accreditation status altered.

Programs are reminded that the signatures of the chief administrative officer and program director in submission of this application indicate understanding and agreement to abide with this section of the *Standards*.

E1 PROGRAM AND SPONSORING INSTITUTION RESPONSIBILITIES

- E1.01 The program *must* inform the ARC-PA within 30 days of the date of notification of any:
- change in the accrediting agency for the sponsoring institution, or
 - adverse accreditation action (probation, withdrawal of accreditation) received from the sponsoring institution's regional accrediting agency.

As the program director, I am aware of this responsibility. **Enter Initials.**

If this standard is currently applicable to the program, **INCLUDE**, in an additional **Appendix**, a document from the Chief Administrative Officer of the Sponsoring Institution that details the change or adverse action and timeline for resolution.

- E1.02 The program *must* agree to and cooperate with periodic comprehensive and/or focused reviews of the program by the ARC-PA. Such reviews may include a site visit, which are scheduled as determined by the ARC-PA.

As the program director, I am aware of this responsibility. **Enter Initials.**

- E1.03 The program *must* submit reports or documents as required by the ARC-PA.

As the program director, I am aware of this responsibility, **Enter Initials** and I understand it is my responsibility to contact the ARC-PA if I have questions about the dates reports are due or the content to be included in required reports. **Enter Initials.**

- E1.04 The program *must* inform the ARC-PA in writing, with a plan and timeline to fill those positions, using forms and processes developed by the ARC-PA, of personnel changes in its positions of:
- program director (or interim) within two business days of the vacancy,
 - medical director* (or interim) within 30 days of the vacancy, and
 - principal faculty* within 30 days of the vacancy.

As the program director, I am aware of this responsibility, **Enter Initials** and I understand it is my responsibility to contact the ARC-PA if I have questions about such notifications and understand it is my responsibility to update the ARC-PA Program Management Portal to reflect changes to personnel. **Enter Initials.**

If this standard is currently applicable to the program, **provide narrative** describing the situation:

- E1.05 The program *must* demonstrate *active* recruitment to permanently fill vacated or interim positions. The program *must* provide quarterly updates to the ARC-PA, on progress filling vacated or interim positions.

As the program director, I am aware of this responsibility. **Enter Initials.**

If this standard is currently applicable to the program, **provide narrative** describing the situation and how and when it will be resolved:

- E1.06 An interim program director (IPD) *must* meet the qualifications of the program director.

As the program director, I am aware of this responsibility. **Enter Initials.**

If this standard is currently applicable to the program, **provide narrative** describing the situation and how and when it will be resolved:

- E1.07 The appointment of the IPD position *must*:
- occur within five business days of the vacancy caused by the resignation/termination of the program director, and
 - not exceed 12 months.

As the program director, I am aware of this standard. **Enter Initials.**

If this standard is currently applicable to the program, **provide narrative** describing the situation and how and when it will be resolved:

- E1.08 The program *must* inform the ARC-PA, using forms and processes developed by the ARC-PA, of a temporary vacancy or extended absence of:
- the program director/interim program director greater than 21 calendar days, or
 - the *medical director/interim medical director* or *principal faculty* greater than 90 calendar days.

As the program director, I am aware of this responsibility. **Enter Initials.** and I understand it is my responsibility to contact the ARC-PA if I have questions about such notifications. **Enter Initials.**

If this standard is currently applicable to the program, **provide narrative** describing the situation and when it will be resolved:

- E1.09 The program *must* receive approval 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:
- program expansion to a *distant campus*,

Our program has no plans to expand to a *distant campus* at present. **Enter Initials.**

- requirements for program completion/graduation that include changes in total credits required,

As the program director, I am aware of this responsibility. **Enter Initials.**

- the curriculum that result in an increase in the student tuition,

As the program director, I am aware of this responsibility. **Enter Initials.**

- an increase in the approved *maximum entering class size*, or

As the program director, I am aware of this responsibility. **Enter Initials.**

- program length, greater than one month.

As the program director, I am aware of this responsibility. **Enter Initials.**

If this standard is currently applicable to the program, **provide narrative** describing the situation:

- E1.10 The program *must* inform 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 to the degree granted at program completion.

As the program director, I am aware of this responsibility. **Enter Initials.**

If this standard is currently applicable to the program, **provide narrative** describing the situation:

- E1.11 The program *must* immediately inform the ARC-PA in writing, using forms and processes developed by the ARC-PA when:
- a) enrollment exceeds its *maximum approved class size*, or
 - b) it encounters a substantive decrease in fiscal support of:
 - i. 20% or more decrease in overall budget or for program expenditures, or
 - ii. 5% or more decrease in its operating budget.

As the program director, I am aware of this responsibility. **Enter Initials.**

If this standard is currently applicable to the program, **provide narrative** describing the situation:

- E1.12 The sponsoring institution *must* inform the ARC-PA in writing of the intent to transfer program sponsorship as soon as it begins considering transfer.

As the program director, I am aware of this responsibility. **Enter Initials.**

If this standard is currently applicable to the program, **provide narrative** describing the situation:

- E1.13 The program and the sponsoring institution *must* pay ARC-PA accreditation and associated fees as determined by the ARC-PA.

As the program director, I am aware of this responsibility. **Enter Initials.**

FINAL COMMENTS

Provide any final comments here as they relate to the program's application, in relation to the *Standards*, that you believe the ARC-PA should know in reviewing your program.

All accreditation applications must include the completed Statements and Signatures page found at the bottom of this document.

Required Appendices for Continuing Accreditation Application, Single Campus Programs

Include the following appendices with the application:

NOTE: The word **TEMPLATE** indicates the program is to complete an ARC-PA designed **TEMPLATE** as found in the application materials. For other required data and materials, the program is to include a program created document. Provide log-in information for any links that require passwords.

| APPENDIX | CONTENT |
|------------------------------------|--|
| Appendix 01 (Administration) | a) Downloaded Program Data Sheet from the program's ARC-PA program management portal per included directions b) Budget as downloaded and saved as an Excel file per included directions c) Physical Facilities TEMPLATE |
| Appendix 02 | Do Not Use – Copies of signed agreements <i>must</i> be available for the site visit. Do not append agreements to this application. |
| Appendix 03 (Administration) | a) Diagram or description of the organizational relationship of the PA program to the sponsoring institution. (Include information regarding who has immediate administrative authority over the program director and that person's position in the administrative structure of the sponsoring institution.) Only if not available on the web , provide copies of document(s) which support compliance with standards: b) A1.02g: how the institution demonstrates responsibility for addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs c) A1.02i: Institutional policies and procedures for processing faculty grievances and allegations of harassment. d) A1.02j: Institutional policies and procedures for processing student allegations of harassment. e) A1.02k: Institutional policies and procedures for refunds of tuition and fees |
| Appendix 04 (Program Personnel) | a) Diagram or description of the organizational structure of the PA program, to include at a minimum, the program director, <i>medical director</i> , <i>principal faculty</i> and <i>administrative support staff</i> b) Downloaded Program Personnel Excel Export from the program's ARC-PA program management portal per included directions c) Current written job descriptions AND Curricula Vitae, using ARC-PA CV TEMPLATES , for: <ul style="list-style-type: none"> • Program director • <i>Medical director</i> • <i>Principal faculty</i> (Job descriptions include duties and responsibilities specific to each <i>principal faculty</i> member) d) Personnel Responsibilities TEMPLATE e) Mission of the institution <u>and</u> mission of the program, <u>if not available on the web</u> f) Program goals <u>if not available on the web</u> |

| APPENDIX | CONTENT |
|--|--|
| Appendix 05 (Policies) | Policies demonstrating compliance with A3.01, A3.04, A3.05, A3.06, A3.07, A3.08, A3.09 and A3.10 as noted in the application and if <u>not available on the web</u> . Reference appended documents in the application narrative and label policies by Standard and by source. |
| Appendix 06 (Admissions) | <ul style="list-style-type: none"> a) Blinded sample of correspondence provided to those inquiring about the program, whether provided to them electronically or on paper b) Admission Policies and Procedure TEMPLATE c) Forms to be used to screen student applications and select students for class positions (A3.14) |
| Appendix 07 (Published for Enrolled Students) | <p>Information demonstrating compliance with A3.15 as noted in the application and if <u>not available on the web</u>.</p> <p>The program is NOT to include an entire manual in response to a standard about specific content, but only the appropriate pages of the manual labeled with the standard for which the page provides evidence.</p> |
| Appendix 08 (Program Records) | Institutional and Program Records TEMPLATE |
| Appendix 09 (Curriculum) | <ul style="list-style-type: none"> a) Curriculum Schematic TEMPLATE b) The program <i>competencies</i> (The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities required for PA practice.) |
| Appendix 10 (Curriculum) | <p><i>Instructional Objectives</i> as required in the body of the application supporting evidence of compliance.</p> <p>Create separately named Word documents or folders for each of the B2 standards (clearly labeled by standard and sub-standard) including <u>only</u> the relevant (as related to the standard) <i>instructional objectives</i>, supporting compliance with the standard. These documents must be a composite of all relevant <i>instructional objectives</i> (whatever the source: course syllabi, individual lectures or other) organized by and labeled with the standard they address and identified by course number(s) and course name(s).) Do not include instructional objectives which do not directly address that specific standard or sub-standard.</p> <p>Providing copies of program course syllabi in the application of record does not negate the need for programs to append evidence of compliance in appendices as required throughout the application.</p> |
| Appendix 11 (SCPEs) | <ul style="list-style-type: none"> a) Supervised Clinical Practice Experiences Excel document from program management portal per SCPE Directions b) Elective Experiences Outside the United States TEMPLATE |
| Appendix 12 (Curriculum) | <p>Program <i>learning outcomes</i> expected for <i>supervised clinical practice experiences</i> addressing standards B3.03 a-e.</p> <ul style="list-style-type: none"> a) program <i>learning outcomes</i> for supervised clinical practice experiences for preventive, emergent, acute, and chronic patient encounters b) program <i>learning outcomes</i> for patients seeking medical care across the |

| APPENDIX | CONTENT |
|--------------------------------------|--|
| | <p>life span to include infants, children, adolescents, adults, and the elderly</p> <p>c) program <i>learning outcomes</i> for patients seeking women’s health (to include prenatal and gynecologic care)</p> <p>d) program <i>learning outcomes</i> for patients seeking care for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care</p> <p>e) program <i>learning outcomes</i> for patients seeking care for behavioral and mental health conditions</p> <p>Create a composite document listing the program <i>learning outcomes</i> supporting standard B3.03 a-e. Learning outcomes must be organized by and labeled with the standard they address.</p> |
| Appendix 13 (Student Evals) | <p>a) Student Evaluation TEMPLATE</p> <p>b) Blank copy(ies) of all form(s) used by <i>preceptors</i> to evaluate students during <i>supervised clinical practice experiences</i>. This may include but is not limited to preceptor evaluation of student forms and skills checklists used by the preceptor to evaluate the student.</p> |
| Appendix 14 (Self-Study Report) | <p>Self-Study Document using ARC-PA provided application and appendices</p> <p>A. Timeline for Data Gathering and Analysis TEMPLATE</p> <p>B. Administrative Aspects of the Program and Institutional Resources</p> <p>C. Effectiveness of the Didactic Curriculum</p> <p>D. Effectiveness of the Clinical Curriculum</p> <p>E. Preparation of Graduates to Achieve Program Defined Competencies</p> <p>F. PANCE Performance</p> <p>G. Sufficiency and Effectiveness of Program & Instructional Faculty and Staff</p> <p>H. Success in Meeting the Program’s Goals</p> <p>I. Copy of SSR Feedback Letter from ARC-PA</p> |
| Appendix 15 (Clinical Site Evals) | Forms used by the program for the initial and ongoing evaluation of clinical sites and <i>preceptors</i> to address standard C2.01 |
| Appendix 16 | <p>Copies of program and/or institutional handbooks/manuals containing policies</p> <p>Providing copies of handbooks/manuals in the application of record does not negate the need for programs to append evidence of compliance in appendices as required throughout the application. The site visitors will NOT search this appendix for evidence of compliance.</p> <p>The syllabi and manuals appended to the program's application will be used by the commission, as needed, as evidence of compliance with the <i>Standards</i>. Although these documents may be updated by the program between the time of application submission and the site visit, they are part of the application of record and are the handbooks/manuals the commission will use to verify compliance with the related standards.</p> |
| Appendix 17 | Zip file containing syllabi for standard B1.03 used for ALL courses/ <i>rotations</i> in the curriculum that must include at a minimum: |

| APPENDIX | CONTENT |
|--|--|
| | <ul style="list-style-type: none"> • course name, (academic credit) • course description, • faculty instructor of record, • course goal/rationale, • <i>learning outcomes</i> and <i>instructional objectives</i> in measurable terms that can be assessed, that guide student acquisition of required <i>competencies</i>, • outline of topics to be covered that align with <i>learning outcomes</i> and <i>instructional objectives</i>, • methods of student assessment/evaluation, and • plan for grading. <p>Providing copies of course syllabi in the application of record does not negate the need for programs to append evidence of compliance in appendices as required throughout the application. The site visitors will NOT search this appendix for evidence of compliance.</p> <p>The word ‘syllabus’ is purposefully not defined in the ARC-PA glossary. The Commission expects this information to be defined and published for students in a written or electronic document.</p> <p>If the program is under institutional restrictions to include any of the requirements for Standard B1.03 within its course syllabi, then the program must include that information as an appendix to the course syllabi.</p> <p>The syllabi and manuals appended to the program's application will be used by the commission, as needed, as evidence of compliance with the <i>Standards</i>. Although these documents may be updated by the program between the time of application submission and the site visit, they are part of the application of record and are the syllabi the commission will use to verify compliance with the related standards.</p> |
| Appendix 18 | Document(s) concerning institutional regional accreditation status of probation, if applicable |
| Use space below to attach other documents in subsequently numbered appendices as needed to support responses | |
| Click here to enter text | Click here to enter text |
| Click here to enter text | Click here to enter text |
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| Statements and Signatures for Continuing Accreditation Application |
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Enter institution name and **Enter program name** (collectively, “the Program”); I hereby apply to the **Accreditation Review Commission on Education for the Physician Assistant (“ARC-PA”)** for accreditation of the Program as an Educational Program for the Physician Assistant in accordance with and subject to the procedures and regulations of the **ARC-PA**. On behalf of the Program, I have read and agree to the conditions set forth in the **ARC-PA’s** most current edition of the *Standards* and other materials describing accreditation and the accreditation process. I authorize the **ARC-PA** to make whatever inquiries and investigations it deems necessary to verify the contents of this application.

The Program understands that this application and any information or material received or generated by the **ARC-PA** in connection with the accreditation process will be kept confidential and will not be released unless the Program has authorized such release or such release is required by law. However, the fact that the Program is or is not, or has or has not been accredited is a matter of public record and may be disclosed. Finally, the **ARC-PA** may use information from this application for the purpose of statistical analysis and education, provided that the Program’s identification with that information has been deleted.

The Program hereby agrees to hold the **ARC-PA**, its officers, commissioners, employees, and agents harmless from any and all actions, suits, obligations, complaints, claims, or damages including, but not limited to, reasonable attorneys’ fees, arising out of any action or omission by any of them in connection with this application; the application process; the denial or withdrawal of the Program’s accreditation or eligibility for accreditation; or any other action by the **ARC-PA**.

Notwithstanding the above, should the Program file suit against the **ARC-PA**, the Program agrees that any such suit shall be brought in a federal or state court in Cook County, Illinois and shall be governed by, and construed under, the laws of the United States and the State of Illinois without regard to conflicts of law. The Program consents to the jurisdiction of such courts in Cook County and agrees that venue in such courts is proper. The Program further agrees that the **ARC-PA** shall be entitled to all costs, including reasonable attorneys’ fees, incurred in connection with the litigation.

THE PROGRAM UNDERSTANDS THAT THE DECISION AS TO WHETHER IT QUALIFIES FOR ACCREDITATION AND ALL OTHER DECISIONS OF THE ARC-PA IN CONNECTION WITH THE ACCREDITATION PROCESS REST SOLELY AND EXCLUSIVELY WITH THE ARC-PA AND THAT THE DECISION OF THE ARC-PA IS FINAL.

I HAVE THE AUTHORITY TO ENTER INTO THIS AGREEMENT ON BEHALF OF THE PROGRAM.

The signatures of the chief administrative officer and Program Director attest to the completeness and accuracy of the information provided in this application and supporting materials.

The signatures also acknowledge that the program may not exceed the maximum numbers of students as identified in this application.

ON BEHALF OF THE PROGRAM, I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS AND I INTEND FOR THE PROGRAM TO BE LEGALLY BOUND BY THEM.

I understand and agree that the Program will be subject to an adverse accreditation action which could include denial of accreditation or withdrawal of accreditation, and that future eligibility for accreditation may be denied in the event that any of the statements or answers made in this submitted response are false or in the event that the Program violates any of the policies governing accredited programs.

Chief Administrative Officer of Program's Sponsoring Institution:

As listed in the Program Management Portal

Enter name

Enter date

The name that appears here is deemed an electronic signature.

Program Director:

Enter name

Enter date

The name that appears here is deemed an electronic signature.

Material List for Continuing Accreditation Validation Visits

The supplemental materials required for the site visit team must be available to the site visitors at least seven calendar days prior to the visit. While not all materials listed will necessarily be reviewed by site visitors, the following materials **must** be available for review during the site visit. Site visitors may not need to review all these materials and may request additional materials/documents prior to or **during the visit**.

See “Organizing Materials Using a Document Sharing Application” document on the ARC-PA website (<http://www.arc-pa.org/continuing-accreditation/continuing-accreditation-site-visit-schedule/>).

1. ***An electronic copy of the complete application submitted by the program 12 weeks prior to the site visit must be readily available for site visitors at the time of the site visit. The onsite copy must be IDENTICAL to the electronically submitted application of record, with no changes or edits.***
2. *Copies of each document that support the program’s compliance with the Standards must be readily available for site visitors as directed in the Organizing Materials Using a Secure Document Sharing Application instructions and as requested by the commission.*
3. *Complete web addresses for web pages designed in support of compliance with the Standards must be readily available for site visitors and as requested by the commission.*
4. *Copies of ALL signed agreements with other entities providing didactic or supervised clinical practice experiences must be readily available for site visitors and as requested by the commission.*
5. *Source documents for data summaries and analysis within the application and appendices must be readily available for site visitors and as requested by the commission.*
6. *Data and activities presented in ARC-PA TEMPLATES and program-designed graphic presentations must be verifiable. Documents and materials in support of entries must be available for review and as requested by the commission.*

- 1) Program promotional materials and catalogs, access to the program’s web site
- 2) Minutes from program committee meetings which may include faculty, curriculum, self-study/planning, etc.
- 3) Current signed agreements with all institutions involved in the didactic and clinical components of the program. Agreements must be *sufficient* in number to accommodate students on *supervised clinical practice experiences* for the current clinical class(es)
- 4) List of required texts/resources for students
- 5) Three-year line-item operational program budget (past year, current year, and projected next year if available)
- 6) Faculty handbooks/manuals containing relevant policies
- 7) Materials used to screen applicants for admission to the program
- 8) Sample of student health forms, if used
- 9) Actual student records maintained by program office

- 10) Faculty records to include CVs and written job descriptions that include duties and responsibilities specific to each faculty member for *principal faculty*, the *medical director*, program director and *course director(s)*.
- 11) Spreadsheet (or similar documentation) of all active licensed physicians, physician assistants and other licensed health care professionals who currently precept the *supervised clinical practice experiences/rotations*, their area of instruction, and name of their associated clinical site as identified on the ARC-PA portal. For each preceptor, provide current licensure information, including expiration dates. In addition, and as appropriate, provide current areas of certification and expiration dates.
- 12) Clinical year rotation/SCPE assignment schedule for current class(es)
- 13) Preceptor files to include evidence of current licensure, current board certification, number of clinical slots for current clinical year, program's documentation of initial and ongoing evaluation to include verification that students are able to achieve program learning outcomes in practice area (B3.04a-d; B3.07a-f) and clinical sites (C2.01a-c)
- 14) Additional materials that support data collected for the self-study report, but which were not included with application.

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|-----------------|
| Glossary |
|-----------------|

NOTE: Where terms are not defined, their definitions are at the discretion of the ARC-PA.

| TERM | DEFINITION |
|---------------------------------------|---|
| ABMS | American Board of Medical Specialties. |
| Accurately | Free from error. |
| Active | Having practical operation or results, characterized by action rather than by contemplation or speculation. |
| Administrative Support (Staff) | Those individuals providing administrative, secretarial or clerical help to the program. Administrative support staff do not include other staff working in or with the program who are assigned a traditional faculty role or those who function to provide technical assistance for instructional technology or data analysis. |
| Advanced Placement | A waiver of required coursework included in the PA curriculum for applicants to the program and/or a waiver of required coursework included in the PA curriculum for currently enrolled students in the program which results in the student advancing in the curriculum without completing required curriculum components at the sponsoring institution. |
| Analysis | Study of compiled or tabulated data interpreting correlations and trends, with the subsequent understanding and conclusions used to validate current practices or make changes as needed for program improvement. |
| AOA | American Osteopathic Association |
| Attrition | A reduction in number. Student attrition: the permanent loss of a matriculated student from the course of study in a physician assistant program. Faculty attrition: the loss of a faculty member from a position assigned to physician assistant program. |
| Clinical Affiliates | Clinical practice sites used by the program to provide supervised clinical practice experiences for students. |
| Comparable | Similar but not necessarily identical. |
| Competencies | The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities required for PA practice. |
| Consultant | An individual from within or outside the sponsoring institution who provides advice to the program, but who is not hired by the program to serve as program, principal or instructional faculty or staff. |
| Course Director | Faculty member primarily responsible for the organization, delivery and evaluation of a course. |
| Deceleration | The loss of a student from the entering cohort, who remains matriculated in the physician assistant program. |
| Distant Campus | A campus geographically separate from the main program at which didactic, preclinical or clinical instruction occurs for all or some of the students matriculated to that campus. |
| Distant Education | A formal educational process in which 50% or more of the required content/time/credit hours, excluding supervised clinical practice experiences, may |

| TERM | DEFINITION |
|-----------------------------------|---|
| | be accrued when the student and instructor/faculty are not in the same physical location at the same time. The interaction may be synchronous or asynchronous. |
| Diversity | Differences within and between groups of people that contribute to variations in habits, practices, beliefs and/or values. The inclusion of different people (including but not limited to gender and race/ethnicity, age, physical abilities, sexual orientation, socioeconomic status) in a group or organization. Diversity includes all the ways in which people differ, and it encompasses all the different characteristics that make one individual or group different from another. |
| Effectiveness | The degree to which objectives are achieved and the extent to which problems are solved. |
| Elective Rotation | Supervised clinical practice experiences that may differ by student and which allow students to gain exposure to or deeper understanding of medical specialties related to their clinical or academic areas of interest. |
| Equity | The implementation of resources that improve or eliminate the remediable differences among diverse groups for all to achieve academic success. |
| Equivalent | Resulting in the same outcomes or end results. |
| Formative Evaluation | Intermediate or continuous evaluation that may include feedback to help students in achieving goals. |
| Frequent | Occurring regularly at brief intervals. |
| Goals | The end toward which effort is directed. |
| Health record(s) | The primary legal record documenting the health care services provided to a person in any aspect of the health care system. This term includes routine clinical or office records, records of care in any health related setting, preventive care, lifestyle evaluation, research protocols and various clinical databases. |
| Inclusion | The active, intentional and ongoing engagement with diversity in ways that increase awareness, content knowledge, cognitive sophistication and empathic understanding of the complex ways individuals interact within systems and institutions. The act of creating involvement, environments and empowerment in which any individual or group can be and feel welcomed, respected, supported, and valued to fully participate. |
| Instructional Faculty | Individuals providing instruction or supervision during the didactic and/or clinical phases of the program, regardless of length of time of instruction, faculty status or rank. |
| Instructional Objectives | Statements that describe observable actions or behaviors the student will be able to demonstrate after completing a unit of instruction. |
| Interprofessional practice | Practice involving individuals from different health care professions working together to provide patient centered care in a collaborative manner. |
| Learning Outcomes | The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities that have been attained at the completion of a curricular component, course or program. |
| Maximum Class Size | Maximum potential number of students enrolled for each admission cycle as approved by the ARC-PA. |
| Medical director | Physician assigned to the PA program and who reports to the program director. The FTE assigned to the medical director is specific to this position/role. Supports the program in ensuring that didactic and clinical instruction meet current practice standards as they relate to the role of the PA in providing patient care. |
| Must | The term used to designate requirements that are compelled or mandatory. "Must" indicates an absolute requirement. |
| NCCPA | National Commission on Certification of Physician Assistants |
| PANCE | Physician Assistant National Certification Exam administered by the National |

| TERM | DEFINITION |
|---|--|
| | Commission on Certification of Physician Assistants. |
| Personal wellness | The quality or state of being in good health especially as an actively sought goal. It includes choices and activities aimed at achieving physical vitality, sense of accomplishment, and personal fulfillment. |
| Preceptor | Any instructional faculty member who provides student supervision during supervised clinical practice experiences. |
| Principal Faculty | Those faculty working at least 50% FTE with primary academic responsibility assigned to the PA program who report to the program director. |
| Program Faculty | The program director, medical director, principal faculty and instructional faculty |
| Prospective Students | Any individuals who have requested information about the program or submitted information to the program. |
| Published | Presented in written or electronic format. |
| 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. |
| Recognized Regional Accrediting Agencies | Middle States Commission on Higher Education (MSCHE) New England Commission of Higher Education (NECHE) Higher Learning Commission (HLC) Northwest Commission on Colleges and Universities (NWCCU), Southern Association of Colleges and Schools- Commission on Colleges (SACS COC) Western Association of Schools and Colleges- Accrediting Commission for Community & Junior Colleges (WASC-ACCJC) WASC Senior College & University Commission (WSCUC) |
| Remediation | The program defined and applied process for addressing deficiencies in a student's knowledge and skills, such that the correction of these deficiencies is measurable and can be documented. |
| Required Rotation(s) | Rotations which the program requires all students to complete. While an elective rotation may be one of the required rotations, it is not included in this definition. |
| Rotation | A supervised clinical practice experience for which there are published expected <i>learning outcomes</i> and student evaluation mechanisms. |
| Should | The term used to designate requirements that must be met unless there is a compelling reason, acceptable to the ARC-PA, for not complying. A program or institution may be cited for failing to comply with a requirement that includes the term 'should'. |
| Student Services | Services aimed at helping students reach their academic and career goals. Such services typically include academic advising, tutoring, career services, financial aid, student health, computing and library resources and access. |
| Subspecialists | A narrow field of practice within its medical specialty as defined by ABMS and AOA. |
| Succinctly | Marked by compact, precise expression without wasted words. |
| Sufficient | Enough to meet the needs of a situation or proposed end. |
| Summative Evaluation | An assessment of the learner conducted by the program to ensure that the learner has the medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities required for entry into the profession. This evaluation must consist of more than a listing and review of student outcomes otherwise obtained in the course of the program. |
| Supervised Clinical Practice Experiences | Supervised student encounters with patients that include comprehensive patient assessment and involvement in patient care decision making and which result in a detailed plan for patient management |
| Teaching Out | Allowing students already in the program to complete their education or assisting |

| TERM | DEFINITION |
|----------------------------|--|
| | them in enrolling in an ARC-PA accredited program in which they can continue their education. |
| Technical Standards | Nonacademic requirements for participation in an educational program or activity. They include physical, cognitive and behavioral abilities required for satisfactory completion of all aspects of the curriculum and for entry into the profession. |
| Timely | Without undue delay; as soon as feasible after giving considered deliberation. |
| United States | <p>The fifty States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, Guam, the Virgin Islands, American Samoa, Wake Island, the Midway Islands, Kingman Reef and Johnston Island.</p> <p>A program may satisfy the requirement of <i>supervised clinical practice experiences</i> through medical facilities located in the <i>United States</i> and through a limited number of medical facilities that are accredited by the United States Joint Commission and operated by the American government under a signed Status of Forces Agreement with the host nation.</p> |

Saving and Submission of Continuing Accreditation Application and Appendices

After you have completed the application and each appendix, use the “Save” or “Save As” command under the File menu. The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program’s name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

The program must submit an electronic copy of the application to include:

- Complete application and all appendices.
- Completed institutional signature page. (Electronically signed is acceptable.)

The application must include all appendices as required and be completed according to the instructions provided. Failure to complete all components of the application exactly as instructed (narratives, templates, program-created documents, etc.) and/or failure to submit a complete application as required in the instructions may result in one or more of the following actions by the ARC-PA:

- Removal of the program from the current ARC-PA agenda
- Requirement for application resubmission
- Placement of the program on administrative probation
- Reconsideration of the program’s current accreditation status

Determination of the appropriate action(s) is solely at the discretion of the ARC-PA and is not subject to appeal.

The program will submit the application electronically. The ARC-PA will contact the program approximately one month prior to the due date of the application with instructions on how to upload.

Contact the ARC-PA offices at accreditationservices@arc-pa.org if unclear about the directions.

Place the following documents for **Appendix 01** in this folder:

- a) Downloaded **Program Data Sheet** from the program's ARC-PA program management portal per directions at <http://www.arc-pa.org/portal/>. Be sure the Portal data is up to date before downloading the document.
- b) **Budget** as downloaded and saved in an Excel file per directions at <http://www.arc-pa.org/portal/>
- c) **Physical Facilities TEMPLATE**

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

Appendix 1c for Single Campus Continuing Accreditation Application

Physical Facilities **TEMPLATE**

Program: Enter name of program

Complete the following table:

| RESOURCE | Dedicated/Shared | Seating Capacity |
|-------------------------------|----------------------------|-------------------------|
| Classrooms | Choose dedicated or shared | Enter capacity |
| Lab (wet) space, i.e. anatomy | Choose dedicated or shared | Enter capacity |
| Physical diagnosis lab space | Choose dedicated or shared | Enter capacity |
| Computer lab | Choose dedicated or shared | Enter capacity |
| Faculty offices | Choose dedicated or shared | N/A |
| Medical director office | Choose dedicated or shared | N/A |
| Enter space | Choose dedicated or shared | Enter capacity |
| Enter space | Choose dedicated or shared | Enter capacity |
| Enter space | Choose dedicated or shared | Enter capacity |

If resource space is shared, provide narrative describing how space is secured by program when needed.

Provide narrative here

Question

Explain all "NO" answers below

- Each faculty has ready access to a pc or laptop Choose yes or no
- There is a medical library on campus Choose yes or no
- The program has its own meeting/conference room Choose yes or no
- The program has space for confidential academic counseling of students by faculty Choose yes or no
- The program has secure storage for student files Choose yes or no

Explain all "no" answers

Appendix 2 *must* be addressed at the site visit.

Copies of signed agreements *must* be available for the site visit. **Do not append agreements to this application.**

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Place the following program-created documents for **Appendix 03** in this folder:

- a) Diagram or description of the organizational relationship of the PA program to the sponsoring institution. (Include information regarding who has immediate administrative authority over the program director and that person's position in the administrative structure of the sponsoring institution.)

Only if not available on the web, provide copies of document(s) which support compliance with standards:

- b) A1.02g: how the institution demonstrates responsibility for addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs
- c) A1.02i: Institutional policies and procedures for processing faculty grievances and allegations of harassment.
- d) A1.02j: Institutional policies and procedures for processing student allegations of harassment.
- e) A1.02k: Institutional policies and procedures for refunds of tuition and fees

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

Place the following documents for **Appendix 04** in this folder:

- a) Diagram or description of the organizational structure of the PA program, to include at a minimum, the program director, *medical director*, *principal faculty* and *administrative support staff*
- b) Downloaded **Program Personnel Excel Export** from the program's ARC-PA program management portal per directions at <http://www.arc-pa.org/portal/>
- c) Current Written job descriptions **AND** Curricula Vitae, using **ARC-PA CV TEMPLATE**, for:
 - Program director
 - *Medical director*
 - *Principal faculty* (Job descriptions include duties and responsibilities specific to each *principal faculty* member)
- d) **Personnel Responsibilities TEMPLATE**
- e) Mission of the institution and mission of the program, if not available on the web
- f) Program goals, if available not on the web

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.



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

Updated 12.2021

Faculty Curriculum Vitae **TEMPLATE**

Program: Enter name of program

Complete ARC-PA Faculty Curriculum Vitae TEMPLATE for the program director, *medical director* and *principal faculty*.

CV's to be available on site for *instructional faculty* should use the institution's academic format.

Date Form Completed: Click here to enter a date

| | | |
|--|---------------|-------------------------------|
| Last Name: Last name | MI: MI | First Name: First name |
| Academic Credentials: Credentials | | |
| *Position in Program: Position | | % FTE: % FTE |

Contact Information

| |
|--|
| Complete Program Office Mailing Address |
| Program name |
| Institution |
| Address 1 |
| Address 2 |
| City, State, Zip |
| Daytime phone: XXX-XXX-XXXX |
| Email at program: Email address |

Education Include baccalaureate, professional education (to include PA), and graduate academic education. Please list from most recent to earliest.

| Institution | Course of Study | Credential/Degree Earned | Year Awarded |
|-------------|-----------------|--------------------------|--------------|
| Institution | Course of study | Credential earned | Year |
| Institution | Course of study | Credential earned | Year |
| Institution | Course of study | Credential earned | Year |
| Institution | Course of study | Credential earned | Year |
| Institution | Course of study | Credential earned | Year |
| Institution | Course of study | Credential earned | Year |
| Institution | Course of study | Credential earned | Year |
| Institution | Course of study | Credential earned | Year |
| Institution | Course of study | Credential earned | Year |
| Institution | Course of study | Credential earned | Year |

Graduate Medical Education / Postgraduate Clinical PA Program Education (include all physician or

physician assistant residencies and fellowships) Please list from most recent to earliest.

| Institution | Specialty | Credential/Degree Earned | Year Awarded |
|-------------|-----------|--------------------------|--------------|
| Institution | Specialty | Credential earned | Year |
| Institution | Specialty | Credential earned | Year |
| Institution | Specialty | Credential earned | Year |
| Institution | Specialty | Credential earned | Year |
| Institution | Specialty | Credential earned | Year |
| Institution | Specialty | Credential earned | Year |
| Institution | Specialty | Credential earned | Year |
| Institution | Specialty | Credential earned | Year |

| Academic Appointments - List the past five positions, beginning with your current position. | | |
|---|------------|---|
| Start Date | End Date | Institution Name and Description of Position(s) |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |

| Non-Academic Positions - List the past five positions beginning with your current position | | |
|--|------------|---|
| Start Date | End Date | Institution Name and Description of Position(s) |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |
| xx/xx/xxxx | xx/xx/xxxx | Institution Name and Description |

| Certifying Body (abbreviation acceptable) | Initial Certification Year | Next Re-Certification Year |
|---|----------------------------|----------------------------|
| Certifying body | Year | Year |
| Certifying body | Year | Year |
| Certifying body | Year | Year |
| Certifying body | Year | Year |
| Certifying body | Year | Year |

| Licensure Information | | |
|-----------------------|-------|--------------------|
| Title | State | Date of Expiration |
| Title | State | xx/xx/xxxx |
| Title | State | xx/xx/xxxx |

| Licensure Information | | |
|-----------------------|-------|--------------------|
| Title | State | Date of Expiration |
| Title | State | xx/xx/xxxx |
| Title | State | xx/xx/xxxx |
| Title | State | xx/xx/xxxx |

Other: [Click here to enter text](#)

SAMPLE MAR. 2023

| Responsibilities | Individual Name and Title (use abbreviations) | | | | | | | | | | | | | | |
|--------------------------------------|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title | Enter name and title |
| Mission statement review/revision | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Program evaluation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Program competencies review/revision | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Program goals review/revision | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Remedial instruction | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Student recruitment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Student performance evaluation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Teaching and instruction | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Enter other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Enter other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Enter other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Enter other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments: [Click here to enter text](#)

Place the following program-created document(s) for **Appendix 05** in this folder:

Policies demonstrating compliance with A3.01, A3.04, A3.05, A3.06, A3.07, A3.08, A3.09 and A3.10, as noted in the application and if not available on the web. Reference appended documents in the application narrative and label policies by Standard and by source.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

Place the following document(s) for **Appendix 06** in this folder:

- a) Blinded sample of correspondence provided to those inquiring about the program, whether provided to them electronically or on paper
- b) **Admission Policies and Procedure TEMPLATE**
- c) Forms to be used to screen student applications and select students for class positions (A3.14)

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

Appendix 6b for Single Campus Continuing Accreditation Application

Admission Policies and Procedures TEMPLATE

Program: Enter name of program

- 1) **Provide** the URL(s) where defined and *published* practices of the institution and program relating to admissions are found.
- 2) **Include** forms used to screen applications and select candidates for the class in **Appendix 6c**.

Save the document(s) in this folder. **Important Note – Abbreviate file names so not to exceed 30 characters, including spaces.** For example: App 6c Screen Form ABC is to be saved in the Appendix 06 folder.

Complete the following:

Admission screening measures include which of the following?

- | | | |
|--|---|---|
| <input type="checkbox"/> application | <input type="checkbox"/> standardized exams (i.e., GRE) | <input type="checkbox"/> community service |
| <input type="checkbox"/> personal statement | <input type="checkbox"/> reference letters/forms | <input type="checkbox"/> CASPA |
| <input type="checkbox"/> essays submitted with application | <input type="checkbox"/> GPA | <input type="checkbox"/> personal interviews |
| <input type="checkbox"/> review of transcripts | <input type="checkbox"/> healthcare experience | <input type="checkbox"/> narrative writing at time of interview |
| <input type="checkbox"/> Enter other | <input type="checkbox"/> Enter other | <input type="checkbox"/> Enter other |
| <input type="checkbox"/> Enter other | <input type="checkbox"/> Enter other | <input type="checkbox"/> Enter other |

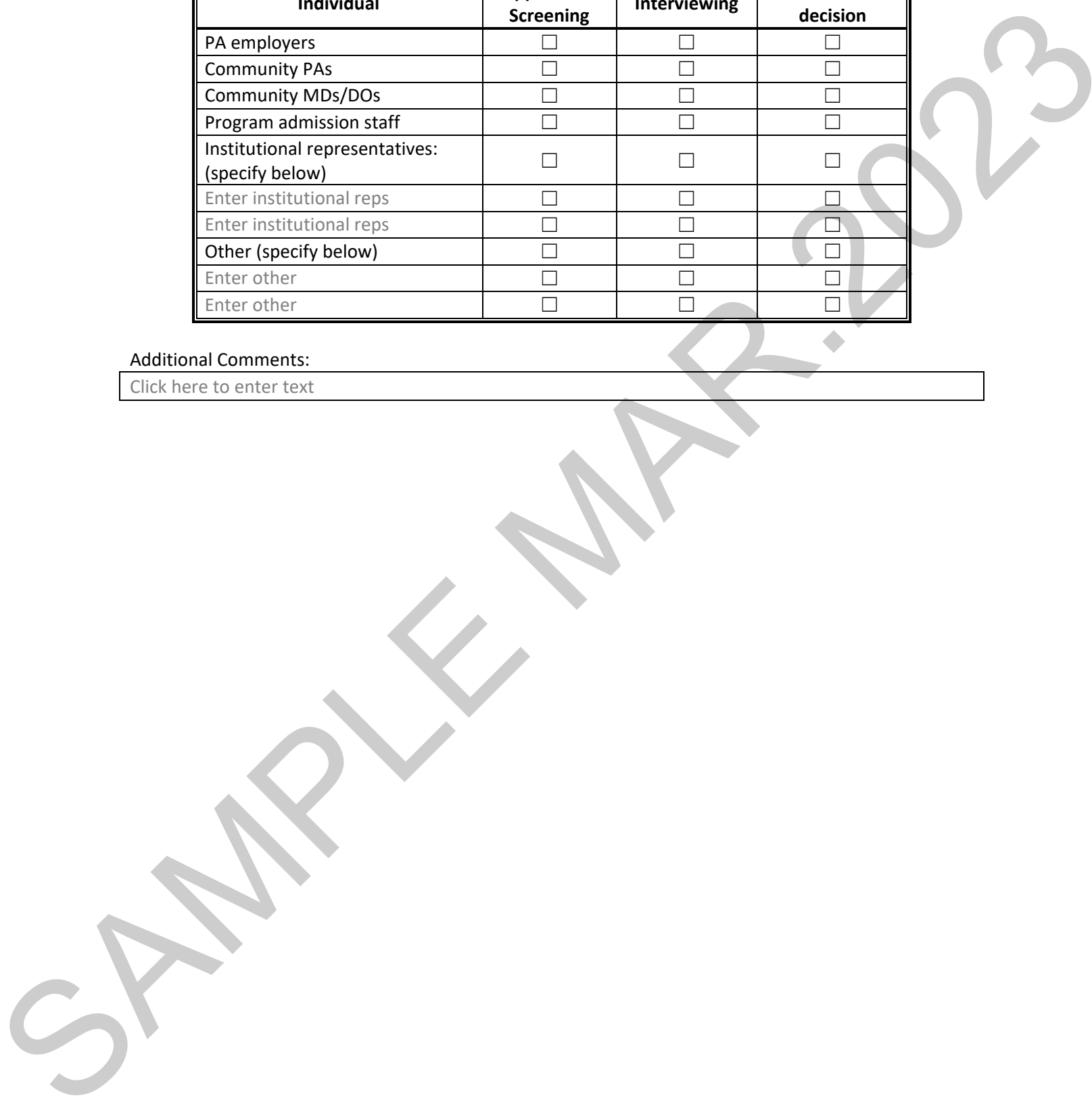
Complete the following regarding how individuals participate in the selection process.

| Individual | Application Screening | Interviewing | Final selection decision |
|---|--------------------------|--------------------------|--------------------------|
| Program Director | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Medical Director | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Principal faculty | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Didactic instructors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Clinical preceptors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Students | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Alumni | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Community organizations representatives | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Individual | Application Screening | Interviewing | Final selection decision |
|---|--------------------------|--------------------------|--------------------------|
| PA employers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Community PAs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Community MDs/DOs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Program admission staff | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Institutional representatives: (specify below) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Enter institutional reps | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Enter institutional reps | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other (specify below) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Enter other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Enter other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Additional Comments:

Click here to enter text



Place the following document(s) for **Appendix 07** in this folder:

Information demonstrating compliance with A3.15 as noted in the application and if not available on the web.

The program is NOT to include an entire manual in response to a standard about specific content, but only the appropriate pages of the manual labeled with the standard for which the page provides evidence.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

Place the following document(s) for **Appendix 08** in this folder:

Institutional and Program Records TEMPLATE

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

SAMPLE MAR 2023

Appendix 8 for Single Campus Continuing Accreditation Application

Institutional and Program Records **TEMPLATE**

Program: Enter name of program

Complete the following:

| Document | Maintained: yes/no | | Where Maintained: program files or elsewhere in institution | |
|--|-----------------------|-------------------------|--|---|
| | | If yes, for how long | | If elsewhere in institution, specify where |
| Student admission record | Select | Enter text | Select | Enter where maintained |
| Results of selection interviews | Select | Enter text | Select | Enter where maintained |
| Advanced placement met | Select | Enter text | Select | Enter where maintained |
| Student performance in program | Select | Enter text | Select | Enter where maintained |
| Evidence student has met completion requirements | Select | Enter text | Select | Enter where maintained |
| SCPE assignments | Select | Enter text | Select | Enter where maintained |
| Academic advising records | Select | Enter text | Select | Enter where maintained |
| Disciplinary action records | Select | Enter text | Select | Enter where maintained |
| Remediation records | Select | Enter text | Select | Enter where maintained |
| Dismissal records | Select | Enter text | Select | Enter where maintained |
| Assurance of health screening | Select | Enter text | Select | Enter where maintained |
| Assurance of immunization requirements | Select | Enter text | Select | Enter where maintained |
| Faculty teaching assignments | Select | Enter text | Select | Enter where maintained |
| Faculty job descriptions | Select | Enter text | Select | Enter where maintained |
| Principal faculty CVs | Select | Enter text | Select | Enter where maintained |
| Course director CVs | Select | Enter text | Select | Enter where maintained |
| Program committee minutes (specify below) | | | | |
| Enter text | Select | Enter text | Select | Enter where maintained |
| Enter text | Select | Enter text | Select | Enter where maintained |
| Enter text | Select | Enter text | Select | Enter where maintained |
| Other: Enter text | Select | Enter text | Select | Enter where maintained |
| Other: Enter text | Select | Enter text | Select | Enter where maintained |

Comments: [Click here](#) to enter text

Place the following document(s) for **Appendix 09** in this folder:

- a) **Curriculum Schematic TEMPLATE**
- b) The program *competencies* (The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities required for PA practice.)

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

Appendix 9a for Single Campus Continuing Accreditation Application

Curriculum Schematic **TEMPLATE**

Program: Enter name of program

Complete the **two tables** below.

Table One. Use the codes provided to present a monthly calendar schematic representation of the entire program. Only include coursework for the PA program. Do not include any pre-requisite courses or post-graduation coursework that some students may take.

- D** Preclinical/ Didactic
- SCPE** Clinical/*Supervised Clinical Practice Experiences*
- V** Vacation, breaks

In the sample 29-month program below, the program begins in July. In the first year of the program students have preclinical/didactic content. There is vacation in December. Vacation in July of the second year is followed by 15 months of SCPEs. There is a one-month period of specialty lectures (didactic instruction) in July of year 3.

| SAMPLE PROGRAM | | | | | | | | | | | | |
|----------------|------|------|------|------|------|------|------|------|------|------|------|------|
| Year | July | Aug | Sept | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | June |
| 1 | D | D | D | D | D | V | D | D | D | D | D | D |
| 2 | V | SCPE | SCPE | SCPE | SCPE | SCPE | SCPE | SCPE | SCPE | SCPE | SCPE | SCPE |
| 3 | D | SCPE | SCPE | SCPE | SCPE | | | | | | | |
| 4 | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | |

Comment: The students have a two week break in December year 1 and a one week break in July year 2.

Note: Begin the table in the top row with the month your program begins. Be sure to add the month abbreviation.

| Applicant Program | | | | | | | | | | | | |
|-------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Year | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month |
| 1 | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select |
| 2 | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select |
| 3 | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select |
| 4 | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select |
| 5 | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select | Select |

Comments: [Click here to enter text](#)

Table Two. Enter all required didactic and clinical courses in the curriculum, (by course name and number) sequentially as they occur in the program. Use the codes provided to describe the type of course content.

D Preclinical/ Didactic

SCPE Clinical/Supervised Clinical Practice Experiences

Only include coursework for the PA program curriculum. Do not include any pre-requisite courses or post-graduation coursework that some students may take.

In the sample below, only selected courses are shown for each year of the program to demonstrate how information should be entered. The program must enter all courses offered in the PA curriculum.

For SCPEs which may not occur in the same order for all students, list all courses in a potential sequence.

The sample program below begins in July. In the first year of the program students have preclinical/didactic content. Supervised clinical practice experiences occur from August year 2.

| SAMPLE PROGRAM | | | | |
|---|---------------------------------------|----------------|--|--------------------------------------|
| Program Year | Course # and Name | D/ SCPE | Start Date (Month/Program Year) | End Date (Month/Program Year) |
| 1 | PA 234 Introduction to the Profession | D | July /1 | October/1 |
| 1 | AN 300 Human Anatomy | D | August/1 | October/1 |
| 1 | PY 444 Human Physiology | D | September/1 | November/1 |
| 1 | PA 300 Physical Diagnosis | D | September/1 | December/1 |
| 1 | PA 444 Clinical Medicine 1 | D | January /1 | March/1 |
| 1 | PA555 Pharmacology | D | January/1 | June/1 |
| 1 | PA 445 Clinical Medicine 2 | D | March/1 | May/1 |
| Other courses entered for actual program | | | | |
| 2 | PA 661 Internal Medicine | SCPE | August/2 | September/2 |
| 3 | PA 567 Lecture Series | D | July/3 | July/3 |
| 3 | PA662 Pediatrics | SCPE | August/3 | September/3 |
| 3 | PA 663 General Surgery | SCPE | October/3 | November/3 |
| Other courses entered for actual program | | | | |

Comments: All rotations start in August of the second year for all students. Sequence varies for each student.

Place the following program-created documents for **Appendix 10** in this folder:

Instructional Objectives as required in the body of the application supporting evidence of compliance.

Create separately named Word documents or folders for each of the B2 standards (clearly labeled by standard and sub-standard) including only the relevant (as related to the standard) *instructional objectives*, supporting compliance with the standard. These documents must be a composite of all relevant *instructional objectives* (whatever the source: course syllabi, individual lectures or other) **organized by and labeled with the standard** they address **and identified by course number(s) and course name(s)**. **Do not include instructional objectives which do not directly address the specific standard or sub-standard.**

Providing copies of program course syllabi in the application of record **does not** negate the need for programs to append evidence of compliance in appendices as required throughout the application.

EXAMPLE:

Standard B2.19

B2.19 The curriculum *must* include instruction in:

a) intellectual honesty,

PA 501 Research Methods

- Identify the fundamental principles of ethics in research.
- Apply the concept of intellectual honesty by problem solving with an unbiased, honest attitude.
- Uphold the academic honesty policies set forth by the University

B2.19 The curriculum *must* include instruction in:

b) academic integrity, and

PA 501 Research Methods

- Discuss the guidelines for ethical conduct in the academic and clinical setting
- Uphold the academic honesty policies set forth by the University

B2.19 The curriculum *must* include instruction in:

c) professional conduct.

PA 459 Introduction to PA Practice

- Formulate the appropriate approach to resolving professional issues given a clinical case scenario.
- Demonstrate respect, high ethical standards, and professionalism when providing patient care for a diverse patient population.

PA 500 Ethics and Law

- Explain how the values of medical ethics guide healthcare professionalism.
- Define autonomy, patient confidentiality, and informed consent.
- List the requirements for informed consent.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

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The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

SAMPLE MAR. 2023

Place the following document(s) for **Appendix 11** in this folder:

- a) **Supervised Clinical Practice Experiences Excel document** from program management portal per SCPE Directions at <http://www.arc-pa.org/portal/>
- b) **Elective Experiences Outside the United States TEMPLATE**

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

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Appendix 11b for Single Campus Continuing Accreditation Application

Elective Experiences Outside the United States **TEMPLATE**

Program: Enter name of program

1. Are experiences outside the *United States* offered for *elective* didactic or clinical experiences?

Select Yes or No

If **NO**, do not go any further, include the TEMPLATE as directed, with the application.

If **YES**, **complete** all questions below:

2. Do you have program-established as well as PA student-established experiences outside the *United States*?

Select Yes or No

Provide narrative explanation below:

Click here to enter text

3. Are experiences outside the *United States* offered to **all** PA students enrolled in the program?

Select Yes or No

Provide narrative explanation below:

Click here to enter text

4. Do you have affiliation agreements for experiences offered outside the *United States*?

Select Yes or No

Provide narrative explanation below:

Click here to enter text

5. Does your program advertise the experiences offered outside the *United States*?

Select Yes or No

If **YES**, does the information address travel, housing and other expenses?

Select Yes or No

Provide narrative explanation below:

Click here to enter text

6. Is the PA student responsible for any of the above costs?

Select Yes or No

Provide narrative explanation below:

Click here to enter text

7. Describe how *instructional objectives* are developed for the experiences outside the *United States*.

Click here to enter text

8. Describe how PA student *learning outcomes* are developed for the experiences outside the *United States*.

Click here to enter text

9. Describe how PA students are oriented to the role of the PA/mid-level practitioner in the international experience country.

Click here to enter text

10. Describe how the program evaluates international clinical sites and assures that the sites provide the PA student access to physical facilities, patient populations and supervision necessary to fulfill program *learning outcomes* for the experience.

Click here to enter text

11. Describe how the PA student's performance is assessed during experiences outside the *United States*.

Click here to enter text

12. Describe how PA students are covered for liability/malpractice on experiences outside the *United States*.

Click here to enter text

13. Describe measures taken related to PA student safety during experiences outside the *United States*.

Click here to enter text

14. Additional comments about experiences outside the *United States*:

Click here to enter text

Place the following program-created documents for **Appendix 12** in this folder:

Program *learning outcomes* expected for *supervised clinical practice experiences* addressing standards B3.03 a-e.

- a) program *learning outcomes* for supervised clinical practice experiences for preventive, emergent, acute, and chronic patient encounters
- b) program *learning outcomes* for patients seeking medical care across the life span to include infants, children, adolescents, adults, and the elderly
- c) program *learning outcomes* for patients seeking women's health (to include prenatal and gynecologic care)
- d) program *learning outcomes* for patients seeking care for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care
- e) program *learning outcomes* for patients seeking care for behavioral and mental health conditions

Create a composite document listing the program *learning outcomes* supporting standard B3.03 a-e. **Learning outcomes must be organized by and labeled with the standard they address.**

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

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The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

Place the following document(s) for **Appendix 13** in this folder:

a) Student Evaluation TEMPLATE

- b) Blank copy(ies) of all form(s) used by *preceptors* to evaluate students during *supervised clinical practice experiences*. This may include but is not limited to preceptor evaluation of student forms and skills checklists used by the preceptor to evaluate the student.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

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The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

| Course or rotation listed in sequence typically taken | H&Ps (or other clinical docs) submitted to faculty | Written exams | Practical exams | Oral presentations | Oral exams | Group Projects | OSCE | Research project | Capstone project | Preceptor evaluation | Student self-evaluation | Other: Click here to enter text | Other: Click here to enter text |
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| Course or rotation listed in sequence typically taken | H&Ps (or other clinical docs) submitted to faculty | Written exams | Practical exams | Oral presentations | Oral exams | Group Projects | OSCE | Research project | Capstone project | Preceptor evaluation | Student self-evaluation | Other: Click here to enter text | Other: Click here to enter text |
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Comments: [Click here to enter text](#)

Place the following document(s) for **Appendix 14** in this folder:

Self-Study Document using ARC-PA provided application and appendices

- A. Timeline for Data Gathering and Analysis **TEMPLATE**
- B. Administrative Aspects of the Program and Institutional Resources
- C. Effectiveness of the Didactic Curriculum
- D. Effectiveness of the Clinical Curriculum
- E. Preparation of Graduates to Achieve Program Defined Competencies
- F. PANCE Performance
- G. Sufficiency and Effectiveness of Program Faculty and Staff
- H. Success in Meeting the Program's Goals
- I. Copy of SSR Feedback Letter, if applicable

The SSR and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App14F PANCE Perform ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The SSR and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the Appendix 14 folder.



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

SELF-STUDY REPORT[®]

For Continuing Accreditation Visit

To be submitted with application in Appendix 14

November 2022

The Self-Study Report (SSR) must be submitted according to the directions at the end of the application.

THE SELF-ASSESSMENT PROCESS AND REPORT

This application requires the completion of templates and narrative questions related to the ongoing self-assessment process which constitute the content of the Self-Study Report (**SSR, Appendix 14**). In addition, the narrative and content in *this* SSR is to consider and address the expectations of the commission as shared with the program in the **feedback letter it received from the review of the SSR completed previously** (if applicable).

The program may need to refer to issues related to selected standards addressed within the body of the application as it completes its SSR. The program need not repeat exact content from elsewhere in the application and may refer the reader to the specific standard and page of the application for content reference.

DATA

In addition to the data required in the SSR, the program may provide additional data but only enough to support pertinent conclusions in the analysis. All source data should be available to the site visitors.

When incorporating relevant data from other areas (focus groups, PANCE system/task scores, faculty evaluation of their courses, etc.) append an aggregate summary of the data being referenced. Follow the instructions for naming and saving the document in the appropriate folder.

When incorporating relevant data from other appendices, e.g., PANCE pass rates or student feedback, provide specific reference to the other appendices.

When qualitative data is cited (e.g. comments from a survey), append a summary of the data and explain the method for analyzing it, e.g. number or percent of comments and/or trends over time. Report response rates.

Where data collection tools employ scales, state the scale used and provide definitions for each of the available scores. Report response rates.

Where called for, explicitly state benchmarks and explain the rationale for choosing that particular level of benchmark.

In general, use terminology from the *Standards*, upon which the SSR requirements are based, referring to the Glossary as needed.

ANALYSIS

It is important that the program pay close attention to the ARC-PA's definition of analysis as noted in the Glossary of the *Standards*: Study of compiled or tabulated data interpreting correlations and trends, with the subsequent understanding and conclusions used to validate current practices or make changes as needed for program improvement.

THE FOUR KEY ELEMENTS OF ANALYSIS

1. The first element is the regular and ongoing collection of data. For ease of use and interpretation, the collected quantitative and qualitative data must be clearly displayed in tables and charts.
2. The second element is the analysis of data. This includes discussing and interpreting the correlations and trends relating the data to the expectations or issues of the program. This is to be demonstrated by succinctly written narratives which highlight the correlations or relationships and trends.
3. The third element is application of results and the development of conclusions based on study of the data. These must be succinctly stated, showing the link between analysis and conclusions. This includes identification of strengths as well as areas in need of improvement.
4. The fourth element is the development of an action plan to operationalize the conclusions. Actions plans, too, must be succinctly stated and should logically result from the conclusions drawn from critical analysis of data.

ARC-PA EXPECTATIONS

Programs are asked to “**Provide Narrative** about the **analysis** based on data collected and displayed.” The ARC-PA expects that the program will use the data it has collected and placed in the tables and templates (as provided by the ARC-PA or as provided by the program), to discuss and interpret the correlations and trends relating the data to the expectations or identified issues or concerns of the program. It expects the program to **apply** the results and draw conclusions based on and related to the data and relationships of the data to the program expectations, issues or concerns. This includes identification of strengths (outcomes of analysis described in the SSR that indicate the program is meeting or exceeding its benchmarks or goals) as well as areas in need of improvement.

The ARC-PA expects that the program will present the modifications it has chosen to make based on the conclusions it has drawn, and then identify areas in need of improvement. It expects these to be supported by the program's analysis of data.

In general, programs are expected to explicitly state the links between the data, analysis, conclusions and actions in the analysis and actions narratives.

TECHNICAL DIRECTIONS FOR COMPLETING THE SELF-STUDY REPORT (SSR)

This SSR and its appendices were developed for use with Word 2010 or later for PC. As some features of the documents are NOT compatible with Word for Mac, the use of a Mac for completion is NOT recommended.

The SSR and appendices require programs to complete tables, provide narratives and mark text boxes. To complete the tables, left click inside the cells and type the required information. To provide narratives, left click inside the narrative boxes and begin typing. Although the fields may appear small, they will expand to allow as much text as needed. If the text extends beyond the page, the document will automatically repaginate. **DO NOT** insert tables or graphs into the boxes or fields. To mark a check box, left click inside the box.

Note that words appearing in *italics* are defined in the glossary of the Accreditation Standards. The glossary can be found at the end of the application.

The **Provide Narrative** sections are to be answered with brief and succinct answers.

The SSR and appendices are “protected.” You will be unable to insert or delete pages or modify anything that is not inside a text or form field. **DO NOT** attempt to unprotect the document. If you unprotect the document, there is a strong possibility that all entered data will be lost.

After you have completed the SSR and each appendix, use the “Save” or “Save As” command under the File menu. The SSR and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program’s name at the end of the document name. For example: App14F PANCE Perform ABC. **Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 30 characters, including spaces.** The SSR and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format. The document must be saved in the **Appendix 14** folder.

If you have any difficulties or questions, contact the ARC-PA offices at accreditationservices@arc-pa.org.

NOTE ABOUT APPENDICES TO THE APPLICATION

Throughout this document, references are made to required content and data for required appendices to the SSR. In some cases, the content is to be provided by completion of ARC-PA developed **TEMPLATES**. In other cases, the program is given the latitude of displaying the data in a graphic display it designs. The program must respond to all required narratives in the appendices.

THE PORTAL

The ARC-PA will review the program’s Program Management Portal data in conjunction with its review of the application. The program is expected to have all data, in all tabs and sub tabs, accurate and up to date.

APPLICATION OF RECORD: 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 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 are to be sent with the program’s response to observations.



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

SELF-STUDY REPORT[®]

For Continuing Accreditation Visit

Insert program name and location (city, state):

Click here to enter text.

STANDARDS SECTION C: EVALUATION

C1 Ongoing Program Self-Assessment

C1.01 The program *must* define its ongoing self-assessment process that is designed to document program *effectiveness* and foster program improvement. At a minimum, the process must address:

- administrative aspects of the program and institutional resources,
- effectiveness* of the didactic curriculum,
- effectiveness* of the clinical curriculum,
- preparation of graduates to achieve program defined *competencies*,
- PANCE performance,
- sufficiency and effectiveness of principal and instructional faculty* and staff, and
- success in meeting the program's *goals*.

Provide a narrative overview describing the program's established, formal, continuous self-assessment process utilized throughout the academic year and in all phases of the program (C1.01a-g).

The process described should be consistent with the

- data sources and timing of data collection and analysis listed in the **Timeline for Data Gathering and Analysis TEMPLATE Appendix 14A**.
- narrative addressing the program's process of data collection and analysis provided in each of the **Appendices 14B through 14H**.

The program may reference information provided in Appendices 14B through 14H addressing the program's process of data collection and analysis but should not repeat the narrative here.

Click here to enter text.

Complete ARC-PA Timeline for Data Gathering and Analysis TEMPLATE for placement in **Appendix 14A**. (To support the process described in response to C1.01 above)

- C1.02:** The program *must* implement its ongoing self-assessment process by:
- a) conducting data collection,
 - b) performing critical analysis of data, and
 - c) applying the results leading to conclusions that identify:
 - i. program strengths,
 - ii. program areas in need of improvement, and
 - iii. action plans.

Described in response to C1.01 a-g and verified by review of the submitted self-study report and discussion with site visitors at the time of the site visit.

Self-Study Report

C1.03: The program *must* prepare a self-study report as part of the application for 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.

Complete ARC-PA Student Attrition TEMPLATE.

Complete the table for the three most recent graduating classes and the classes currently enrolled. This data will be used in analysis documented in several appendices of the self-study report. Use the **Comment** section to explain program nuances.

Note: Students who *remediated* represent students who did not leave the program. They are not to be included in this attrition table as a separate category. *Remediation* may or may not involve *deceleration* within the program. If students who *remediated* also *decelerated*, they may be listed as a *decelerated* student. *Remediation* of students is addressed elsewhere in the application.

- Class of: insert year class cohort will complete the program.
- Entering class size is the number of students newly enrolled for each admission cycle.
- If student took leave of absence, indicate in the comments when/if the student returned.
- *Deceleration* is defined as the loss of a student from the entering cohort, who remains matriculated in the physician assistant program. If a student decelerated, indicate in the comments when the student returned.
- Total attrition in this table reflects the number of students from the entering class who did not complete the program with the rest of the cohort, either due to leave of absence, *deceleration*, dismissal or withdrawal. Do not list any one student in more than one category. For example, if a student took a leave of absence and *decelerated*, select the option that best describes that student's situation. Use comments for description if necessary.
- Number joining class cohort who began with different cohort reflects those who began with a previous cohort and either *decelerated* or took a leave of absence and returned to join a different class.
- Graduates or anticipated graduates is the total of the entering class size minus attrition plus the number joining from another cohort.

ARC-PA Student Attrition TEMPLATE

| | Graduated Classes | | | Current Classes | | |
|---|-------------------|---------------|---------------|-----------------|---------------|---------------|
| | Class of Year | Class of Year | Class of Year | Class of Year | Class of Year | Class of Year |
| Maximum entering class size (as approved by ARC-PA) | # | # | # | # | # | # |
| Entering class size | # | # | # | # | # | # |
| Number who took leave of absence | # | # | # | # | # | # |
| Number who decelerated | # | # | # | # | # | # |
| Number of withdrawals | # | # | # | # | # | # |
| Number of dismissals | # | # | # | # | # | # |
| Total attrition | # | # | # | # | # | # |
| Number joining class cohort who began with different cohort | # | # | # | # | # | # |
| Graduates | # | # | # | # | # | # |
| Anticipated graduates | # | # | # | # | # | # |

Comments:

Appendix 14B: Administrative Aspects of the Program and Institutional Resources

This appendix requires the program to submit data and *analysis* to assess the *sufficiency* and *effectiveness* of administrative aspects of the program and institutional resources

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14B**.

Appendix 14C: Effectiveness of the Didactic Curriculum

This appendix requires the program to submit data and *analysis* related to student evaluation of didactic courses and instructors, the number of final grades of C or below for didactic courses, and student attrition and *remediation* in didactic courses.

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14C**.

Appendix 14D: Effectiveness of the Clinical Curriculum

This appendix requires the program to submit data and analysis related to student evaluation of *rotations* and *preceptors*, the number of final grades of C or below for *rotations*, and student attrition and *remediation* in *rotations*.

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14D**.

Appendix 14E: Preparation of Graduates to Achieve Program Defined Competencies

This appendix requires the program to submit data and *analysis* related to student attrition, *summative evaluation* performance, student exit/graduate feedback and faculty evaluation of the curriculum to assess its ability to prepare students to achieve program defined *competencies*.

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14E**.

Appendix 14F: PANCE Performance

This appendix requires the program to submit data and *analysis* related to program evaluation of PANCE outcomes (overall PANCE pass rate and PANCE content/task areas) and:

- Admissions criteria
- Effectiveness of the didactic curriculum
- Effectiveness of the clinical curriculum
- Breadth and depth of the curriculum
- Student summative evaluation
- Remediation efforts and outcomes
- Student progress criteria and attrition
- Feedback from students who were unsuccessful on PANCE

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14F**.

Appendix 14G: Sufficiency and Effectiveness of Program Faculty and Staff

This appendix requires the program to submit data and analysis related to *sufficiency* and *effectiveness* of *program faculty*, *sufficiency* and *effectiveness* of *administrative support staff* and faculty and staff changes.

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14G**.

Appendix 14H: Success in Meeting the Program's Goals

This appendix requires the program to submit data and *analysis* related to the *effectiveness* in meeting its goals.

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14H**.

SAMPLE MAR. 2023

**Required Appendices for Self-Study Report for
Continuing Visit Application**

The appendix is to be saved with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App14 SSR ABC Univ. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

Templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

Include the following appendices with the Self-Study Report:

| APPENDIX | CONTENT |
|--------------|--|
| Appendix 14A | Timeline for Data Gathering and Analysis TEMPLATE |
| Appendix 14B | Administrative Aspects of the Program and Institutional Resources |
| Appendix 14C | Effectiveness of the Didactic Curriculum |
| Appendix 14D | Effectiveness of the Clinical Curriculum |
| Appendix 14E | Preparation of Graduates to Achieve Program Defined Competencies |
| Appendix 14F | PANCE Performance |
| Appendix 14G | Sufficiency and Effectiveness of Program Faculty and Staff |
| Appendix 14H | Success in Meeting the Program's Goals |
| Appendix 14I | Copy of SSR feedback letter from ARC-PA (Only applicable for programs who submitted a 3 Year Out Self Study Report) |

Saving and Submission of Self-Study Report with Appendices

The program must save the SSR and each lettered appendix with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name.

For example: App 14A Timeline UABC **DO NOT save the documents as a PDF.**

Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 30 characters, including spaces.

The SSR must be submitted according to the directions at the end of this document and in the application.

SSR Appendix 14A

Timeline for Data Gathering and Analysis **TEMPLATE**

(To support the process described in response to C1.01 and the process described within each of the SSR appendices)

Complete the table below representing the program’s self-assessment process. The table must include the timing of data collection and analysis (for example: “end of each semester”, “annually in August”, etc.). The timing of data collection and analysis may be listed separately if appropriate for example “Data collected March – April. Analysis annually in May.” Indicate who (job title, committee name etc.) is responsible for study of the data.

Save this document in a folder labeled **App14**. Include an abbreviation of the program’s name at the end of the document name. For example, App 14A SSR Timeline UABC. **Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 30 characters, including spaces.**

Include other data sources as appropriate.

If any of the data sources listed are not used by the program, leave that row blank.

EXAMPLE:

| Relevant Appendix | Data Source(s) Collected | Timing of Data Collection | Responsible Party(ies) | Timing of Data Analysis | Responsible Party(ies) |
|---|---|-------------------------------------|---|--|------------------------|
| Appendix 14B Administrative Aspects of the Program and Institutional Resources | <i>Sufficiency of institutional resources (human, technology, physical)</i> Student Exit Survey Faculty Annual Program Evaluation | Annual – August Annual- November | Program Coordinator Program Director | Annual Program Retreat February Annual Program Retreat February | Program Faculty |

| Relevant Appendix | Data Source | Timing of Data Collection | Responsible Party(ies) | Timing of Data Analysis | Responsible Party(ies) |
|---|--|---------------------------|--------------------------|--------------------------|--------------------------|
| Appendix 14B Administrative Aspects of the Program and Institutional Resources | <i>Sufficiency of institutional resources (human, technology, physical)</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | <i>Sufficiency of institutional resources: student services (academic advising, tutoring, career services, financial aid, student health, computing, library) and safety and security.</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | <i>Sufficiency of institutional support resources (financial, faculty development, clinical site development, curriculum design and course selection, program assessment, and program diversity and inclusion)</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |

| Relevant Appendix | Data Source | Timing of Data Collection | Responsible Party(ies) | Timing of Data Analysis | Responsible Party(ies) |
|--|--|---------------------------|--------------------------|--------------------------|--------------------------|
| | <i>Effectiveness of administrative aspects of the program: Admissions process and outcomes</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | <i>Effectiveness of administrative aspects of the programs: Program policies/procedures</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Other data sources: Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| Appendix 14C Effectiveness of the Didactic Curriculum | Student evaluation of didactic courses | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Student evaluation of didactic faculty | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Number of final didactic course grades of C or below | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Student <i>remediation</i> in didactic courses | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Other data sources: Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| Appendix 14D | Student evaluation of <i>rotations</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |

| Relevant Appendix | Data Source | Timing of Data Collection | Responsible Party(ies) | Timing of Data Analysis | Responsible Party(ies) |
|--|---|---------------------------|--------------------------|--------------------------|--------------------------|
| Effectiveness of the Clinical Curriculum | Student evaluation of <i>preceptors</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Number of <i>rotation</i> grades of C or below | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Student <i>remediation</i> in <i>rotations</i> | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Other data sources: Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| Appendix 14E Preparation of Graduates to Achieve Program Defined Competencies | <i>Summative evaluation</i> performance | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Exiting Student/Graduate Feedback | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Faculty evaluation of the curriculum. (List sources of data used by faculty to eval curriculum) Click here to enter text Click here to enter text Click here to enter text Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Other data sources: Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| Appendix 14F PANCE | PANCE Performance | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |

| Relevant Appendix | Data Source | Timing of Data Collection | Responsible Party(ies) | Timing of Data Analysis | Responsible Party(ies) |
|--|--|--|--------------------------|--------------------------|--------------------------|
| Appendix 14G Sufficiency and Effectiveness of Program Faculty and Staff | <i>Sufficiency of program faculty</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | <i>Sufficiency of administrative support staff</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | <i>Effectiveness of program faculty</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | <i>Effectiveness of administrative support staff</i> Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Faculty and staff changes Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Other data sources: Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| | Appendix 14H Success in meeting program goals | Success in meeting program goals Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| Other data sources: Click here to enter text | | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| Appendix 14 Student Attrition | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |

| Relevant Appendix | Data Source | Timing of Data Collection | Responsible Party(ies) | Timing of Data Analysis | Responsible Party(ies) |
|--------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
| Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
| Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |

Comments: Click here to enter text.

SAMPLE MARK 2023

SSR Appendix 14B

Evaluation of Administrative Aspects of the Program and Institutional Resources

This appendix requires the program to submit data and analysis to assess the *sufficiency* and *effectiveness* of administrative aspects of the program and institutional resources.

Narrative addressing the program's approach to data collection and analysis should parallel or be consistent with the program's narrative provided for C1.01.

DATA

Describe how the program collects data regarding the *sufficiency* of institutional resources.

Click here to enter text.

Describe how the program collects data regarding the *effectiveness* of administrative aspects of the program.

Click here to enter text.

Provide tabular or graphic displays of data collected by the program (both quantitative and qualitative) assessing institutional resources over the past **three years**. This data should indicate the *sufficiency* of institutional resources provided to the program.

Provide tabular or graphic displays of data collected by the program (both quantitative and qualitative) assessing administrative aspects of the program over the past **three years**. This data should indicate the *effectiveness* of administrative aspects of the program.

When creating your data display(s) data must (at a minimum) support pertinent conclusions documented in the *analysis* narrative below and as related to the A section of the *Standards*:

- Institutional resources in support of the program
 - Financial resources
 - Human resources
 - Physical resources
 - Technology resources and support
 - Safety and security, and *student services* (defined in the glossary as: academic advising, tutoring, career services, financial aid, student health, computing and library resources and access)
 - Support for faculty development, clinical site development, curriculum design and course selection, program assessment, and program *diversity and inclusion*
- Program administrative aspects
 - Policies/procedures
 - Admissions processes and outcomes

When creating your data display(s) please keep in mind:

- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis* (do not append raw data).
- Qualitative data themes used in the analysis must be reported and summarized in the narrative or displayed in a table that directly supports the relevant *analysis* (do not append raw data).

- Data is to be presented in a way that allows for appreciation of trends over time.
- Programs may reference data and or analysis in other parts of the SSR. Reference to data must be specific including the file name.

Save the documents in a folder labeled **App14B**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.

For example, App 14B AdminAspects UABC or App 14B InstitutResource UABC.

Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 30 characters, including spaces.

ANALYSIS AND CONCLUSIONS

In relation to the data identified in this appendix, address the following:

Provide Narrative describing the program's approach to analysis of the **quantitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used.

If the program did not collect quantitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the program's approach to analysis of the **qualitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used.

If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the **analysis** of all data collected and displayed. Include resulting conclusion(s) and application of the **analysis** to the program.

Click here to enter text.

Strengths: Use the table below to list the strengths of the program identified as a result of the data analysis and conclusions documented in this appendix. If none, then leave this section blank.

| Strengths |
|--------------------------|
| Click here to enter text |
| Click here to enter text |
| Click here to enter text |
| Click here to enter text |
| Click here to enter text |

Comments: Click here to enter text

| Area Needing Improvement | Plans for Improvement | Expected Outcome | Person(s) Responsible | Completion timeline (mm/yyyy) |
|---------------------------|---------------------------|---------------------------|---------------------------|-------------------------------|
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
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Comments: Click here to enter text.

SSR Appendix 14C

Effectiveness of the Didactic Curriculum

This appendix requires the program to submit data and analysis related to *effectiveness* of the didactic curriculum to include student evaluation of didactic courses and instructors, the number of final didactic course grades at C or below, and student attrition* and *remediation* in didactic courses.

*For this appendix the program will reference **Student Attrition** data provided in **Appendix 14, SSR**.

Narrative addressing the program's approach to data collection and analysis should parallel or be consistent with the program's narrative provided for C1.01.

DATA

Student Evaluation Data: Provide a tabular or graphic display of student didactic course evaluation data collected by the program (both qualitative and quantitative) for the three most recent graduating classes as well as the classes currently enrolled. (If the most recent cohort has completed less than three months of the program, do not include that cohort.)

Provide a tabular or graphic display of student evaluation data collected by the program (both qualitative and quantitative) for the program director, *medical director*, *principal faculty* and each *instructional faculty* instructing a didactic course in the curriculum for the three most recent graduating classes as well as the classes currently enrolled. (If the most recent cohort has completed less than three months of the program, do not include that cohort.)

This data must indicate the students' perceptions about the *effectiveness* of the didactic courses, and faculty as the instructor(s) for each course. Data must be provided for every didactic course **and** every didactic course instructor as distinct, separate data.

When creating your data display(s) please keep in mind:

- Didactic courses must be listed by course name and number
- Summary data must be included for **all** didactic courses
- Faculty must not be identified by name but must be identified by terms found in the glossary (PD, MD, PF, IF) along with an anonymous identifier (e.g.: PF-1, PF-2, IF-1, IF-2).
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis*. (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant *analysis* (do not append raw data).
- Data must be presented in a way that allows comparison across courses for faculty who may have taught multiple courses and allows appreciation of trends over time.

Save the documents in a folder labeled **App14C**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name. For example, App 14C StudCourseEval UABC or App 14C StudInstructEval UABC.

Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 30 characters, including spaces.

Number of Final Didactic Course Grades of C or Below: Provide Narrative describing how the program tracks failure rates in individual courses and how it uses that data as part of its ongoing *analysis* and self-assessment process.

Click here to enter text.

Complete ARC-PA **Number of Final Didactic Course Grades of C or Below TEMPLATE** with included narrative following the example as shown below.

- Include all didactic courses, sequentially as they occur in the program.
- Enter class cohorts by year of graduation. List the number of grades C or below for the three most recent graduating classes as well as the classes currently enrolled.
- Within each course box by class year, list the number of students receiving grades of C, the number receiving Ds, the number receiving Fs. Do not separate grades by + or -, e.g., C+ or C- is still considered a C grade.

| SAMPLE Course Number and Title | SAMPLE Class Cohort by year | | | | | |
|-----------------------------------|--|------|------|--------------------|-------|--|
| | Graduated | | | Currently Enrolled | | |
| | YYY1 | YYY2 | YYY3 | YYY4 | YYY5 | |
| | Total Number of Students | | | | | |
| | 40 | 42 | 45 | 46 | 40 | |
| | Number of Final Didactic Course Grades of C or Below | | | | | |
| PA 500 Anatomy | 0 | 0 | 0 | 3C | 0 | |
| PA 501 Physical Diagnosis | 0 | 1C | 0 | 0 | 1C 1D | |
| PA 550 Pharmacology II | 3F 1C | 0 | 1F | 1F | n/a | |

SAMPLE Comments: n/a = class of YYY5 has not completed 550 Pharmacology II yet.

Number of Final Didactic Course Grades of C or Below TEMPLATE

| Course Number and Title | Class Cohort by year | | | | | |
|---------------------------|--|------|------|--------------------|------|------|
| | Graduated | | | Currently Enrolled | | |
| | Year | Year | Year | Year | Year | Year |
| | Total Number of Students | | | | | |
| | # | # | # | # | # | # |
| | Number of Final Didactic Course Grades of C or Below | | | | | |
| Click here to enter text. | # | # | # | # | # | # |
| Click here to enter text. | # | # | # | # | # | # |
| Click here to enter text. | # | # | # | # | # | # |
| Click here to enter text. | # | # | # | # | # | # |
| Click here to enter text. | # | # | # | # | # | # |

STUDENT REMEDIATION DATA

Remediation is defined by the ARC-PA as *the program defined and applied process for addressing deficiencies in a student's knowledge and skills, such that the correction of these deficiencies is measurable and can be documented.*

How many students have repeated didactic courses in the **three most recent graduating classes as well as the classes currently enrolled**?

For how many **students in the three most recent graduating classes as well as the classes currently enrolled** has the program identified deficiencies in knowledge and skills during the didactic curriculum, such that the correction of these deficiencies (*remediation*) was necessary for the student to continue in the program (**not including** those who repeated a didactic course)?

IF any students repeated or *remediated* didactic courses as indicated in the above two questions, **include** remediation data (e.g. aspects of program *remediated* or repeated) and outcomes (e.g., progress in the program, graduation rates, *PANCE* pass rates) analysis in the analysis narrative below.

ANALYSIS AND CONCLUSIONS

In relation to the data identified in this appendix (student evaluation of didactic courses and instructors, the number of final grades of C or below for didactic courses, and student attrition and *remediation* in didactic courses):

Provide Narrative describing the program's approach to analysis of the **quantitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used.

Provide Narrative describing the program's approach to analysis of the **qualitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used.

If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Provide Narrative describing the **analysis** of all data collected and displayed. Include resulting conclusion(s) and application of the **analysis** to the program.

Strengths: Use the table below to list the strengths of the program identified as a result of the data analysis and conclusions documented in this appendix. If none, then leave this section blank.

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ACTIONS

Modifications: Use the table below to list modifications that occurred as a result of the program’s ongoing self-assessment process described in this appendix.

Omit modifications that are routine updates and not part of the self-assessment process or the SSR. Areas currently in need of improvement will be listed below.

List modifications chronologically, from oldest to most current.

| Modifications | When modification Occurred (mm/yyyy) |
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Areas in need of improvement: As a result of the data *analysis* and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program’s process of ongoing self-assessment. If none, then leave this section blank.

| Area Needing Improvement | Plans for Improvement | Expected Outcome | Person(s) Responsible | Completion timeline (mm/yyyy) |
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SSR Appendix 14D

Effectiveness of the Clinical Curriculum

This appendix requires the program to submit data and analysis related to *effectiveness* of the clinical curriculum to include student evaluation of clinical *rotations* and *preceptors*, the number of final clinical *rotation* grades of C or below, and student attrition* and *remediation* in clinical *rotations*.

*For this appendix the program will reference Student Attrition data provided in Appendix 14, SSR.

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA

Student Evaluation Data: Provide a tabular or graphic display of student clinical *rotation* evaluation data collected by the program (both quantitative and qualitative), aggregating and displaying data by medical discipline of the *rotation* for the three most recent graduating classes as well as the classes currently enrolled.

Provide a tabular or graphic display of student *preceptor* evaluation data collected by the program (both quantitative and qualitative), aggregating and displaying data by medical discipline of the *preceptor*, for the three most recent graduating classes as well as the classes currently enrolled.

This data must indicate the students' perceptions about the *effectiveness* of the *rotations* **and** *preceptors*. Data must be provided for every clinical *rotation* by type (medical discipline). Provide data for clinical *rotations* **and** *preceptors* as aggregate per type of *rotation* (by medical discipline). Identify data for any individual *rotation* or *preceptor* who fell below the program benchmark as distinct data. Data must be clearly labeled to identify the *rotation* data **separate from** *preceptor* data.

When creating your data display(s) please keep in mind:

- *Rotations* must be listed by type (medical discipline)
- Data must be included for all clinical *rotations*
- *Preceptor* data must be aggregated by medical specialty/discipline
- If reported, individual *preceptors* must not be identified by name but must be identified with an anonymous identifier
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis*. (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant *analysis* (do not append raw data).
- Data must be presented in a way that allows comparison among *rotation* evaluations and allows appreciation of trends over time.

Save the documents in a folder labeled **App14D**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name. For example, App 14D StudRotEval UABC or App 14D StudPreceptEval UABC.

Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 30 characters, including spaces.

Number of Final Clinical *Rotation* Grades of C or Below: Provide Narrative describing how the program tracks failure rates in individual *rotations* and how it uses that data as part of its ongoing *analysis* and self-assessment process.

Click here to enter text.

Complete ARC-PA **Number of Final Clinical *Rotation* Grades of C or Below TEMPLATE** with included narrative following the example as shown below.

- Include all rotations.
- Enter class cohorts by year of graduation. List grades of C or below for the three most recent graduating classes as well as the classes currently enrolled.
- For each *rotation*, by class year, list the number of students receiving grades of C, the number receiving Ds, the number receiving Fs. Do not separate grades by + or -, e.g., C+ or C- is still considered a C grade.

| SAMPLE Rotation Type | SAMPLE Class Cohort by year | | | | | |
|-------------------------|---|------|------|--------------------|------|--|
| | Graduated | | | Currently Enrolled | | |
| | YYY1 | YYY2 | YYY3 | YYY4 | YYY5 | |
| | Total Number of Students | | | | | |
| | 40 | 42 | 45 | 46 | 40 | |
| | Number of Students receiving grades of "C" or below | | | | | |
| Internal Medicine | 0 | 0 | 0 | 2C 1F | 0 | |
| General Surgery | 0 | 0 | 1D | 0 | 1F | |
| Primary Care Clerkship | 0 | 0 | 0 | 1C | n/a | |

SAMPLE Comments: n/a = class of YYY5 has not completed Primary Care Clerkship yet.

Number of Final Clinical *Rotation* Grades of C or Below TEMPLATE

| Rotation Type | Class Cohort by year | | | | | |
|---------------------------|---|------|------|--------------------|------|------|
| | Graduated | | | Currently Enrolled | | |
| | Year | Year | Year | Year | Year | Year |
| | Total Number of Students | | | | | |
| | # | # | # | # | # | # |
| | Number of Students receiving grades of "C" or below | | | | | |
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| Rotation Type | Class Cohort by year | | | | | |
|---|--------------------------|------|------|--------------------|------|------|
| | Graduated | | | Currently Enrolled | | |
| | Year | Year | Year | Year | Year | Year |
| | Total Number of Students | | | | | |
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| Number of Students receiving grades of "C" or below | | | | | | |
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STUDENT REMEDIATION DATA

Remediation is defined by the ARC-PA as *the program defined and applied process for addressing deficiencies in a student's knowledge and skills, such that the correction of these deficiencies is measurable and can be documented.*

How many students have repeated *rotations* in the **three most recent graduating classes as well as the classes currently enrolled**?

For how many **students in the three most recent graduating classes as well as the classes currently enrolled** has the program identified deficiencies in knowledge and skills during *rotations*, such that the correction of these deficiencies (*remediation*) was necessary for the student to continue in the program (**not including** those who repeated a rotation)?

IF any students repeated or *remediated* didactic courses as indicated in the above two questions, **include** remediation data (e.g. aspects of program *remediated* or repeated) and outcomes (e.g., progress in the program, graduation rates, *PANCE* pass rates) analysis in the analysis narrative below.

ANALYSIS AND CONCLUSIONS

In relation to the data identified in this appendix, student evaluation of *rotations* and *preceptors*, the number of final grades of C or below for *rotations*, and student attrition and *remediation* of *rotations*:

Provide Narrative describing the program's approach to analysis of the **quantitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used.

Provide Narrative describing the program's approach to analysis of the **qualitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used.

If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Provide Narrative describing the **analysis** of all data collected and displayed. Include resulting conclusion(s) and application of the **analysis** to the program.

Strengths: As a result of the data **analysis** and conclusions identified in this appendix, list the **strengths** of the program as identified by the program's process of ongoing self-assessment. If none, then leave this section blank.

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ACTIONS

Modifications: Use the table below to list modifications that occurred as a result of the program’s ongoing self-assessment process described in this appendix.

Omit modifications that are routine updates and not part of the self-assessment process or the SSR. Areas currently in need of improvement will be listed below.

List modifications chronologically, from oldest to most current.

| Modifications | When modification Occurred (mm/yyyy) |
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Areas in need of improvement: As a result of the data *analysis* and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program's process of ongoing self-assessment. If none, then leave this section blank.

| Area Needing Improvement | Plans for Improvement | Expected Outcome | Person(s) Responsible | Completion timeline (mm/yyyy) |
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SSR Appendix 14E

Preparation of Graduates to Achieve Program Defined Competencies

This appendix requires the program to submit data and *analysis* related to student attrition*, *summative evaluation* performance, exiting student/graduate feedback and faculty evaluation of the curriculum to assess its ability to prepare students to achieve the program's defined *competencies***.

*For this appendix the program will reference Student Attrition data provided in Appendix 14, SSR.

**While the commission recognizes programs may assess student *competencies* with additional data and analysis, the self-study report will focus on the areas listed above.

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA

Summative Evaluation Performance:

Provide a tabular or graphic display of data collected by the program on the *summative evaluation* outcomes for the **three most recent graduating classes**. The data is to be used to support the narrative on *analysis* of the program's ability to prepare graduates to achieve its defined *competencies*. Do not include student names in the data, if individual student outcomes are listed, use anonymous identifiers.

Provide Narrative describing the program's expected **outcomes** of students' performance on the summative evaluation.

Click here to enter text.

Exiting Students/Graduate Feedback:

Use the **ARC-PA Exiting Student/Graduate Feedback TEMPLATE** below to provide composite data from exiting students **OR** recent graduates (choose one if both are collected) about their perception of how well the program prepared them for entry into the profession and suggestions they may have for program improvement.

Indicate in this narrative how the data (both quantitative and/or qualitative) is collected and presented. For example, if the program uses a Likert scale survey, provide the scale and state how scores in the **TEMPLATE** were calculated.

Click here to enter text.

Provide data for the **three most recent graduating classes**. List cohort classes by the year the class completed the program.

List areas evaluated by the program in the left column. If qualitative data is collected, it must be reported and summarized in the narrative or displayed in an appended document.

ARC-PA Exiting Student/Graduate Feedback TEMPLATE

| Area Evaluated | Class of Year | Class of Year | Class of Year |
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Comments: Click here to enter text.

Faculty Evaluation of the Curriculum:

Provide Narrative describing how the program obtains and uses faculty evaluation of the curriculum to evaluate student achievement of program defined *competencies*.

Click here to enter text.

Provide a summary of the curricular evaluation data used to support the narrative on *analysis* of student achievement of program defined *competencies* in a separate document. If the data is already provided in another appendix, reference that data in the *analysis* narrative **and check this box** .

When creating your data display(s) please keep in mind:

- If reported, individual students or faculty must not be identified by name but must be identified with an anonymous identifier
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis*. (Do not provide raw data).
Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant *analysis* (do not append raw data).

Save the documents in a folder labeled **App14E**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.

Comments: Click here to enter text.

ACTIONS

Modifications: Use the table below to list modifications that occurred as a result of the program’s ongoing self-assessment process described in this appendix.

Omit modifications that are routine updates and not part of the self-assessment process or the SSR. Areas currently in need of improvement will be listed below.

List modifications chronologically, from oldest to most current.

| Modification | When modification Occurred (mm/yyyy) |
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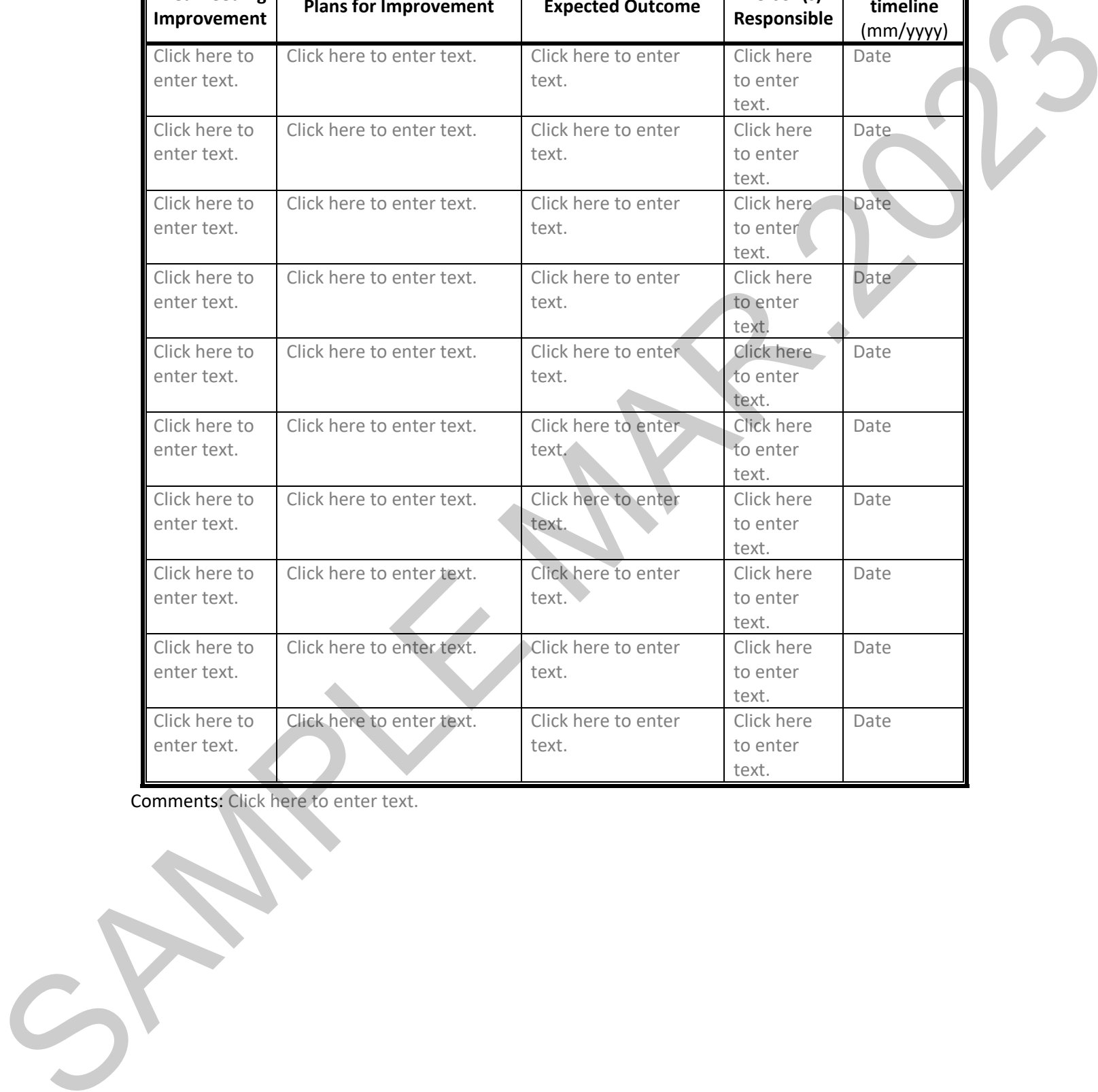
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Areas in need of improvement: As a result of the data *analysis* and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program’s process of ongoing self-assessment. If none, then leave this section blank.

| Area Needing Improvement | Plans for Improvement | Expected Outcome | Person(s) Responsible | Completion timeline (mm/yyyy) |
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SSR Appendix 14F

PANCE Performance

This appendix requires the program to submit data and *analysis* related to graduate *PANCE* performance.

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA

PANCE Performance: Include in this appendix a copy of the:

- most current annual **NCCPA PANCE Exam Performance Summary Report Last 5 Years**, and
- the **PANCE Content and Task Area performance** for the most current cohort

Provide Narrative describing the program's expected outcomes of students' performance on the *PANCE*.

[Click here to enter text.](#)

Provide tabular or graphic displays of the data collected by the program and used to support the narrative on *analysis* of its *PANCE* outcomes. If the data is already provided in another appendix, reference that data in the analysis narrative.

When creating your data display(s) please keep in mind:

- If reported, individual students must not be identified by name but must be identified with an anonymous identifier
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis*. (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant *analysis* (do not append raw data).

Save the documents in a folder labeled **App14F**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.

For example, App 14F PANCE UABC.

Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 30 characters, including spaces.

ANALYSIS AND CONCLUSIONS

In relation to the *PANCE* data:

Data *analysis* in relation to *PANCE* outcomes may include but is not limited to the following areas as applicable to the program. If an area was already analyzed in relation to *PANCE* performance in another appendix, please refer to that appendix and do not repeat the same analysis in this appendix.

- Admissions criteria
- Effectiveness of the didactic curriculum

- Effectiveness of the clinical curriculum
- Breadth and depth of the curriculum
- Student summative evaluation
- Remediation efforts and outcomes
- Student progress criteria and attrition
- Feedback from students who were unsuccessful on PANCE

Provide Narrative describing the program’s approach to *analysis* of the **quantitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used.

Click here to enter text.

Provide Narrative describing the program’s approach to *analysis* of the **qualitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used.

If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the *analysis* of the data collected and displayed within this appendix reflecting the program’s *analysis* of its PANCE outcomes as directed above.

Include resulting conclusion(s) and application of the *analysis* to the program.

Click here to enter text.

Strengths: As a result of the data *analysis* and conclusions identified in this appendix, list the **strengths** of the program as identified by the program’s process of ongoing self-assessment. If none, then leave this section blank.

| Strengths |
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ACTIONS

Modifications: Use the table below to list modifications that occurred as a result of the program’s ongoing self-assessment process described in this appendix.

Omit modifications that are routine updates and not part of the self-assessment process or the SSR.
 Areas currently in need of improvement will be listed below.

List modifications chronologically, from oldest to most current.

| Modification | When modification Occurred (mm/yyyy) |
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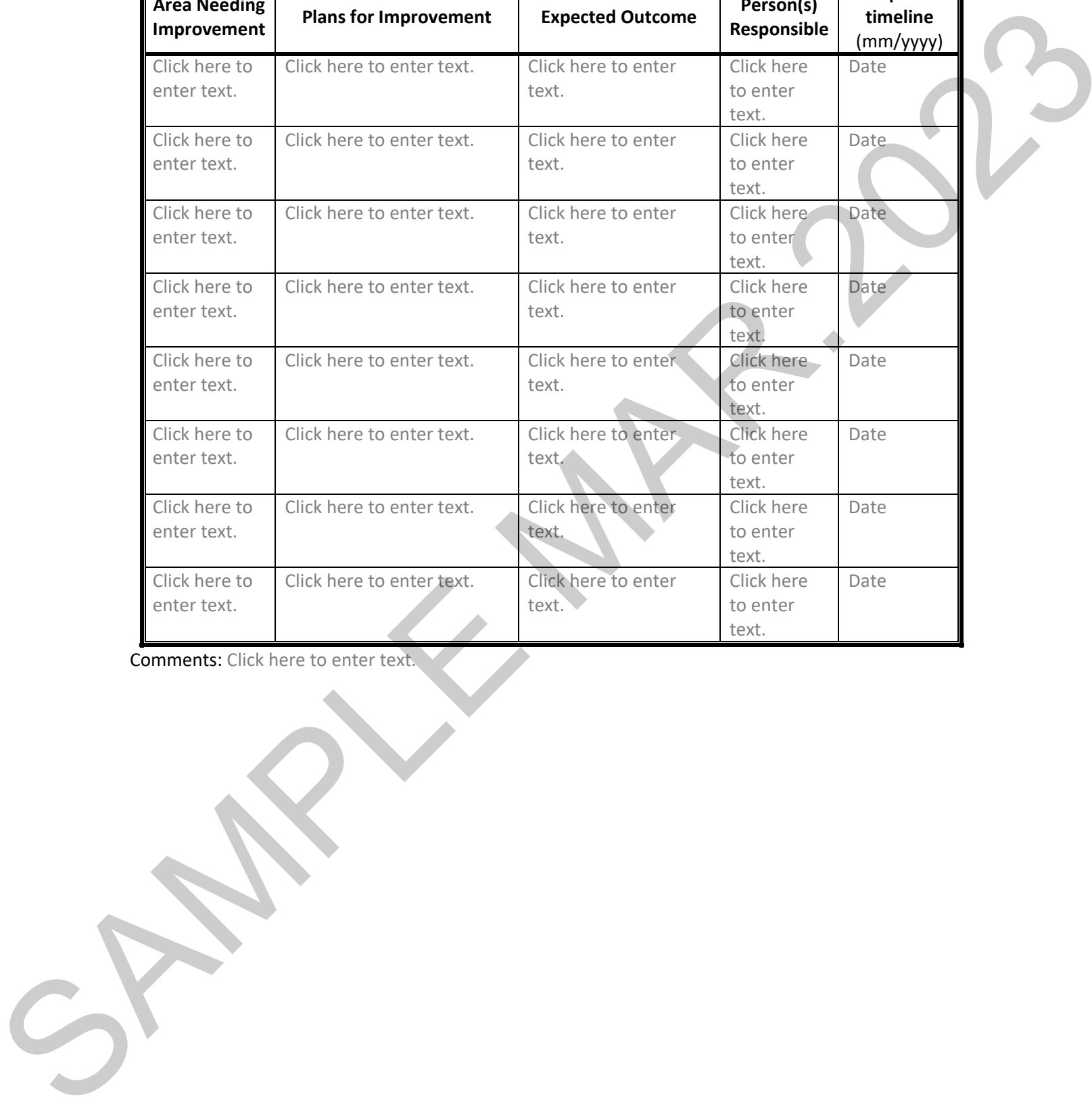
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Areas in need of improvement: As a result of the data *analysis* and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program’s process of ongoing self-assessment. If none, then leave this section blank.

| Area Needing Improvement | Plans for Improvement | Expected Outcome | Person(s) Responsible | Completion timeline (mm/yyyy) |
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Appendix 14G

Sufficiency and Effectiveness of Program Faculty and Staff

This appendix requires the program to submit data and analysis related to *sufficiency* and *effectiveness* of *program faculty*, *sufficiency* and *effectiveness* of *administrative support staff* and faculty and staff changes.

*The ARC-PA defines *program faculty* as the program director, *medical director*, *principal faculty* and *instructional faculty*.

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA

Provide Narrative describing the factors used to determine **the number** of *principal* and *instructional faculty* needed to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program. **Describe** how the program collects data related to those factors to determine **sufficiency of program faculty** in meeting the program's needs.

Click here to enter text.

Provide Narrative describing the factors used to determine **effectiveness** of program and *instructional faculty* in meeting the academic needs of enrolled students and managing the administrative responsibilities of the program. **Describe** how the program collects data related to those factors to determine **effectiveness of program faculty** in meeting the program's needs.

Click here to enter text.

Provide Narrative describing the factors used to determine the **number** of *administrative support staff* needed to manage the administrative responsibilities of the program, to be consistent with organizational complexity and manage total enrollment. **Describe** how the program collects data related to those factors to determine **sufficiency of administrative support staff** in meeting the program's needs.

Click here to enter text.

Provide Narrative describing the factors used to determine **effectiveness** of *administrative support staff* in managing administrative responsibilities consistent with the organizational complexity and total enrollment of the program. **Describe** how the program collects data regarding the **effectiveness of administrative support staff** in meeting the program's needs.

Click here to enter text.

Program Faculty Data: Provide a tabular or graphic display of data collected by the program (both quantitative and qualitative) to determine *sufficiency and effectiveness of program and instructional faculty for the previous three academic years as well as currently.*

Administrative Support Staff Data: Provide a tabular or graphic display of data collected by the program (both quantitative and qualitative) to determine *sufficiency and effectiveness of administrative support staff for the previous three academic years as well as currently.*

When creating your data display(s) please keep in mind:

- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis*. (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant *analysis* (do not append raw data).
- Data should be presented in a way that allows comparison across cohorts and appreciation of trends over time.

Save the documents in a folder labeled **App14G**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.

For example, App 14G FacEffect UABC or App 14G StaffSuff UABC.

Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 30 characters, including spaces.

Complete ARC-PA Faculty and Staff Changes TEMPLATE with included narrative below.

List all **current** faculty and staff and those who were employed by the program **over the past four academic years**. (For example, if you are completing this application in AY2022 (fall 2021-spring/summer 2022), begin the list as of AY 2018 (fall 2017 – spring/summer 2018).

Indicate faculty and staff changes (*principal faculty**, program director, *medical director* and program administrative support staff who left or were hired or took on a new role) over the past four academic years.

If all positions have been filled by the same individuals for the past four academic years, enter THERE HAVE BEEN NO CHANGES in the Comment section at the end of the table and fill in the table with all the current program faculty and staff.

(*Note that *principal faculty* are those faculty working at least 50% FTE with primary academic responsibility assigned to the PA program who report to the program director. Two FTE principal faculty positions must be filled by currently NCCPA certified PA faculty.)

If there has been more than one change to any position, for example, if the person holding the program director position has changed more than once in the past three-year period, add another such position in the lower part of the table where you may enter additional faculty.

ARC-PA Faculty and Staff Changes TEMPLATE

| Position | % FTE | Person in position | Date hired (mm/yyyy) | Date left position/program (mm/yyyy) | Reason for the Change (Reason left the program or were hired or N/A) |
|--------------------------|-------|--------------------------|----------------------|--------------------------------------|--|
| Faculty | | | | | |
| Current program director | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |

| Position | % FTE | Person in position | Date hired (mm/yyyy) | Date left position/program (mm/yyyy) | Reason for the Change (Reason left the program or were hired or N/A) |
|-------------------------------------|-------|--------------------------|----------------------|--------------------------------------|--|
| Program Director | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Current medical director | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Medical director | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Principal faculty PA-C | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Principal faculty PA-C | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Principal faculty PA-C | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Principal faculty PA-C | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Principal faculty PA-C | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Principal faculty PA-C | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Principal faculty PA-C | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Non-PA-C principal faculty | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Non-PA-C principal faculty | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Non-PA-C principal faculty | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Non-PA-C principal faculty | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Non-PA-C principal faculty | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Program Administrative Staff | | | | | |
| Click here to enter text | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Click here to enter text | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Click here to enter text | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Click here to enter text | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |

| Position | % FTE | Person in position | Date hired (mm/yyyy) | Date left position/program (mm/yyyy) | Reason for the Change (Reason left the program or were hired or N/A) |
|--|-------|--------------------------|----------------------|--------------------------------------|--|
| Click here to enter text | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Other Principal Faculty and Staff | | | | | |
| Click here to enter text | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
| Click here to enter text | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |
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| Click here to enter text | xx.xx | Click here to enter text | mm/yyyy | mm/yyyy | Click here to enter text |

Comment: Click here to enter text.

ANALYSIS AND CONCLUSIONS

In relation to the data identified in this appendix, sufficiency and effectiveness of program and instructional faculty, sufficiency and effectiveness of administrative support staff and program faculty and staff changes:

Provide Narrative describing the program’s approach to *analysis* of the **quantitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used. Include the attrition rate for any position that has changed over the last four years (current year and past three) and describe how the program determined each rate.

If the program did not collect quantitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the program’s approach to *analysis* of the **qualitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used.

If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

| Area Needing Improvement | Plans for Improvement | Expected Outcome | Person(s) Responsible | Completion timeline (mm/yyyy) |
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SSR Appendix 14H

Success in Meeting the Program's Goals

This appendix requires the program to submit data and *analysis* related to the *effectiveness* in meeting its *goals*.

The *goals* of the program were **provided** in **Appendix 04** if not available on the web.

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA

The program must provide information in the template below for all of its published **goals**. Space has been provided for six program *goals*, but if the program has more than six *goals* use an additional template. **Reference other appendices of the SSR as needed.**

Provide a tabular or graphic display of data collected by the program for **EACH OF ITS GOALS** for the **past three academic years**. If already provided in another appendix, reference that data in the analysis narrative.

When creating your data display(s) please keep in mind:

- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis*. (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant analysis (do not append raw data).
- Data should be presented in a way that allows comparison across years and appreciation of trends over time.
- Reference other appendices of the SSR as needed.

Save the documents in a folder labeled **App14H**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.

For example, App 14H GradEmploy UABC.

Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 30 characters, including spaces.

ANALYSIS AND CONCLUSIONS

In relation to the data on program *effectiveness* in meeting its *goals*, **for each goal:**

Provide Narrative describing the program's approach to *analysis* of the **quantitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used. (If applicable).

Provide Narrative describing the program's approach to *analysis* of the **qualitative data** collected and displayed, including the benchmarks/thresholds (with rationale) used. (If applicable).

| Area Needing Improvement | Plans for Improvement | Expected Outcome | Person(s) Responsible | Completion timeline (mm/yyyy) |
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Place the following program-created documents for **Appendix 15** in this folder:

Forms used by the program for the initial and ongoing evaluation of clinical sites and *preceptors* to address standard C2.01.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

SAMPLE MAR 2023

Place the following program-created document for **Appendix 16** in this folder:

Copies of program and/or institutional handbooks/manuals containing policies

Providing copies of handbooks/manuals in the application of record does not negate the need for programs to **append evidence of compliance in appendices** as required throughout the application. The site visitors will NOT search this appendix for evidence of compliance.

The syllabi and manuals appended to the program's application will be used by the commission, as needed, as evidence of compliance with the *Standards*. **Although these documents may be updated by the program between the time of application submission and the site visit, they are part of the application of record and are the handbooks/manuals the commission will use to verify compliance with the related standards.**

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

Place the following program-created document for **Appendix 17** in this folder:

Zip file containing syllabi for standard B1.03 and appendices to the syllabi as applicable that are used for **ALL** courses/rotations in the curriculum that must include at a minimum:

- course name,
- course description,
- faculty instructor of record,
- course goal/rationale,
- *learning outcomes* and *instructional objectives*, in measurable terms that can be assessed, that guide student acquisition of required *competencies*,
- outline of topics to be covered that align with *learning outcomes* and *instructional objectives*,
- methods of student assessment/evaluation, and
- plan for grading.

Providing copies of course syllabi in the application of record does not negate the need for programs to **append evidence of compliance in appendices** as required throughout the application. The site visitors will NOT search this appendix for evidence of compliance.

The word 'syllabus' is purposefully not defined in the ARC-PA glossary. The Commission expects this information to be defined and published for students in a written or electronic document. If the program is under institutional restrictions to include any of the requirements for Standard B1.03 within its course syllabi, then the program must include that information as an appendix to the course syllabi.

The syllabi and manuals appended to the program's application will be used by the commission, as needed, as evidence of compliance with the *Standards*. **Although these documents may be updated by the program between the time of application submission and the site visit, they are part of the application of record and are the syllabi the commission will use to verify compliance with the related standards.**

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

Place the following program-created document for **Appendix 18** in this folder:

Document(s) concerning institutional regional accreditation status of probation, if applicable

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget ABC or App 4d Personnel Resp ABC. **Important Note – Abbreviate as necessary; the title may not exceed 30 characters, including spaces.**

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget ABC is to be saved in the Appendix 01 folder.

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