

Hardin-Simmons University Accreditation History

First accredited: March 2017

Next review: March 2032

Maximum class size: 30

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June 2023

The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

September 2022

The commission accepted the report addressing 5th edition:

- **Standard B4.01b** (provided evidence evaluation of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components identifies and addresses any student deficiencies in a timely manner)
- **Standard C1.03** modified self-study report (provided evidence the program's self-study report accurately and succinctly documents the application and results of ongoing program self-assessment)
- **Standard C2.01b** (provided evidence program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences to ensure that students are able to fulfill program learning outcomes with access to patient populations)

March 2022 (following Final Provisional review)

Accreditation-Continued; Next Comprehensive Evaluation: September 2031. The program is approved for a maximum class size of 30.

Report due June 15, 2022 (*Standards*, 5th edition):

- **Standard B4.01b** (lacked evidence evaluation of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components identifies and addresses any student deficiencies in a timely manner)
- **Standard C1.03** modified self-study report (lacked evidence the program's self-study report accurately and succinctly documents the application and results of ongoing program self-assessment)
- **Standard C2.01b** (lacked evidence program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences to ensure that students are able to fulfill program learning outcomes with access to patient populations)

No report due for the following citation(s) (commission expects program to submit all reports and documents as required by the ARC-PA with the initial submission):

- **Standard A3.13a** (lacked evidence program defines, publishes, consistently applies and makes readily available to prospective students, policies and procedures to include admission and enrollment practices that favor specified individuals or groups (if applicable))
- **Standard B2.11c** (lacked evidence the curriculum includes instruction in normal and abnormal development across the life span and the application to clinical practice)

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March 2021

The commission **accepted the report** providing evidence of

- How the program will determine each student has met the learning outcomes in the supervised clinical education practice curriculum and documentation of physicians specialty board certified in their area of instruction. No further information requested.

September 2020

The commission **reviewed the report** addressing 4th edition

- **Standard B1.08** (provided evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams),
- **Standard B3.06a** (lacked evidence of supervised clinical practice experiences with physicians specialty board certified in their area of instruction) and
- **Standard C3.01** (lacked evidence the planned student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes).

Additional information (narrative describing how the program will determine each student has met the learning outcomes in the supervised clinical education practice curriculum and documentation of physicians specialty board certified in their area of instruction) due August 24, 2020.

The commission **acknowledged the report** providing evidence of

- The change in program support. No further information requested.

June 2020

The commission **acknowledged the report** providing evidence of

- The proposed plan in response to COVID-19. No further information requested.

March 2020 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: March 2022 (Final Provisional). The program is approved for up to 30 students in the third class.

Report due June 22, 2020 (*Standards*, 4th edition) -

- **Standard B1.08** (lacked evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams),
- **Standard B3.06a** (lacked evidence of supervised clinical practice experiences with physicians specialty board certified in their area of instruction) and
- **Standard C3.01** (lacked evidence the planned student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes).

No report due for the following citation(s) (commission expects program to submit all reports and documents as required by the ARC-PA with the initial submission):

- **Standard B1.09** (lacked evidence that for each didactic and clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies)
- **Standard C1.02** (lacked evidence program applies the results of ongoing program self-assessment to the curriculum and other dimensions of the program)

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- **Standard C2.01b** (lacked evidence program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment to include the results of critical analysis from the ongoing self-assessment)
- **Standard C2.01c** (lacked evidence program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment to include faculty evaluation of the curricular and administrative aspects of the program)
- **Standard C2.01d** (lacked evidence program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment to include modifications that occurred as a result of self-assessment)
- **Standard C2.01e** (lacked evidence program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment to include self-identified program strengths and areas in need of improvement)

March 2018

The commission **accepted the report** providing evidence of

- SCPE expectations of students with preventive, emergent, acute and chronic patient encounters and medical care across the life span, women's health, surgical management and behavioral and mental health conditions. No further information requested.

September 2017

The commission **accepted the report** addressing 4th edition

- **Standard B3.02** (provided evidence of clearly defined expectations for students in supervised clinical practice experiences [SCPEs] that enable students to meet program expectations and acquire competencies needed for entry into clinical practice),
- **Standards B3.03a-d** (provided evidence of program defined requirements and methods to determine students, after SCPEs with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions have attained the expected learning outcomes) and
- **Standard C3.01** (provided evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes).

Additional information (SCPE expectations of students with preventive, emergent, acute and chronic patient encounters and medical care across the life span, women's health, surgical management and behavioral and mental health conditions) due July 24, 2017

March 2017

Accreditation-Provisional; Next Comprehensive Evaluation: March 2020 (Provisional Monitoring). The program is approved for up to 30 students in the first class of students, 30 in the second class and 30 in the third class.

Report due May 1, 2017 (*Standards*, 4th edition) -

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- **Standard B3.02** (lacked evidence of clearly defined expectations for students in supervised clinical practice experiences [SCPEs] that enable students to meet program expectations and acquire competencies needed for entry into clinical practice),
- **Standards B3.03a-d** (lacked evidence of program defined requirements and methods to determine students, after SCPEs with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions have attained the expected learning outcomes) and
- **Standard C3.01** (lacked evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes).