First accredited: November 1973

Next review: March 2028 Maximum class size: 48

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### March 2023

Program Change: Change in name of degree granted, effective July 28, 2023. The commission approved the change. No further information requested.

## September 2022

The commission accepted the report addressing 5<sup>th</sup> edition

 Standard C1.03 modified self-study report (provided evidence program prepares a selfstudy report that accurately and succinctly documents the process, application and results of ongoing program self-assessment) No further information requested.

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.

### March 2022

Accreditation-Continued; Next Comprehensive Evaluation: March 2028. Maximum class size: 48. Report due May 6, 2022 (*Standards*, 5<sup>th</sup> edition) -

Standard C1.03 modified self-study report (lacked evidence program prepares a self-study report that accurately and succinctly documents the process, application and results of ongoing program self-assessment)

The commission acknowledged the report providing evidence of

 Updates to the program's website with the NCCPA PANCE Exam Performance Summary Report (All Test Takers) Last 5 Years and updates to the program's portal with PANCE data. No further information requested.

### September 2021

The commission accepted the report addressing 5<sup>th</sup> edition

 Standard B1.04b (provided evidence the program ensures educational equivalency of course content and student experience provided by different pedagogical and instructional methods for students in the clinical phase of the curriculum). No further information requested.

Report due November 15, 2021:

• Update NCCPA PANCE Exam Performance Summary Report (All Test Takers) for the last 5 years on website and update PANCE data in portal.

#### June 2021

The commission acknowledged the report providing evidence of

• Website updated with the latest NCCPA PANCE Exam Performance Summary Report. No further information requested.

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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.

### March 2021

The commission **does not accept** the report addressing 4<sup>th</sup> edition

Standards B3.07b, d-f (lacked evidence of supervised clinical practice experiences
[SCPEs] with preceptors practicing in b) internal medicine, d) pediatrics, e) ob/gyn and f)
behavioral and mental health care).

Acceptable response (addressing 5<sup>th</sup> edition standard B1.04b) due by June 16, 2021.

## September 2020

The commission acknowledged the report providing evidence of

• Updated changes in response to COVID-19. No further information requested.

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.

### June 2020

The commission acknowledged the report providing evidence of

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

# March 2020

Adverse Action-Accreditation-Probation (extended); A focused probation site visit will need to occur in advance of the March 2022 commission meeting. The program's maximum class size is 48 students per class.

Report due December 1, 2020 (Standards, 4th edition) -

Standards B3.07b, d-f (lacked evidence of supervised clinical practice experiences
[SCPEs] with preceptors practicing in b) internal medicine, d) pediatrics, e) ob/gyn and f)
behavioral and mental health care).

Report due August 2, 2021 (Standards, 4th edition) -

• **Standard C2.01c** modified Self-Study Report (lacked evidence of a self-study report that documents faculty evaluation of the curricular and administrative aspects of the program).

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.

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### March 2019

The commission accepted the report addressing 4th edition

- **Standard A3.17b** (provided evidence clarifying the program's completion deadlines related to curricular components),
- **Standard B3.02** (provided evidence of a method to determine that students meet learning outcomes and acquire competencies needed for entry into clinical practice),
- **Standards B3.03a-d** (provided evidence of a method to determine that students meet learning outcomes 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) and
- Standard C3.04 (provided evidence clarifying the summative evaluation described in the response to the citation and that found in Student Handbook). No further information requested.

# September 2018

The commission accepted the report addressing 4th edition

- Standard A1.03a (provided evidence the sponsoring institution is responsible for supporting the planning by program faculty in curricular planning and program assessment),
- **Standard A2.08** (provided evidence the program director provided effective leadership and management),
- **Standard A2.16** (provided evidence all instructional faculty serving as supervised clinical practice experience preceptors hold a valid license),
- **Standards A3.17b and f** (provided some evidence the program defines, publishes and makes readily available to students upon admission b) completion deadlines related to curricular components and f) policies and procedures for deceleration),
- Standard B3.02 (provided evidence of clearly defined expectations for students in supervised clinical practice experiences [SCPEs] and a method to determine that students meet program expectations and acquire competencies needed for entry into clinical practice),
- Standards B3.03a-d (provided evidence of defined learning outcomes 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),
- Standards B3.07b-f (provided evidence of SCPEs with preceptors practicing in b) internal
  medicine, c) general surgery, d) pediatrics, e) ob/gyn and f) behavioral and mental
  health care) and
- **Standard C3.04** (provided evidence of the program conducting and documenting a summative evaluation of each student within the final four months of the program to verify that each student is prepared to enter clinical practice).

The commission accepted the report providing evidence of

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• Updated student tab in the Portal.

Additional information due November 16, 2018 (Standards, 4th edition) -

- Standard A3.17b (clarification of the program's completion deadlines related to curricular components),
- Standard B3.02 (lacked evidence of a method to determine that students meet learning outcomes and acquire competencies needed for entry into clinical practice),
- **Standards B3.03a-d** (lacked evidence of a method to determine that students meet learning outcomes 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) and
- **Standard C3.04** (clarification of the summative evaluation described in the response to the citation and that found in Student Handbook).

#### March 2018

Adverse Action-Accreditation-Probation; A focused probation site visit will need to occur in advance of the March 2020 commission meeting. The program's maximum class size is 48 students per class. The program did not appeal the commission's decision.

Report due June 5, 2018 (Standards, 4th edition) -

- Update Students tab of Program Management Portal.
- Standard A1.03a (lacked evidence the sponsoring institution is responsible for supporting the planning by program faculty in curricular planning and program assessment),
- Standard A2.08 (lacked evidence the program director provided effective leadership and management),
- **Standard A2.16** (lacked evidence all instructional faculty serving as supervised clinical practice experience preceptors hold a valid license),
- **Standards A3.17b and f** (lacked evidence the program defines, publishes and makes readily available to students upon admission b) completion deadlines related to curricular components and f) policies and procedures for deceleration),
- **Standard C3.04** (lacked evidence of the program conducting and documenting a summative evaluation of each student within the final four months of the program to verify that each student is prepared to enter clinical practice) and
- Update the student tab in the Program Management Portal.

Due June 29, 2018 (Standards, 4th edition) -

- Standard B3.02 (lacked evidence of clearly defined expectations for students in supervised clinical practice experiences [SCPEs] and a method to determine that students meet program expectations and acquire competencies needed for entry into clinical practice),
- **Standards B3.03a-d** (lacked evidence of defined learning outcomes and methods to determine students, after SCPEs with patients seeking a) medical care across the life

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span, b) women's health, c) surgical management and d) behavioral and mental health conditions have attained the expected learning outcomes) and

• **Standards B3.07b-f** (lacked evidence of SCPEs with preceptors practicing in b) internal medicine, c) general surgery, d) pediatrics, e) ob/gyn and f) behavioral and mental health care).

Due August 15, 2019 (Standards, 4th edition) -

- **Standard C1.02** (lacked evidence the program applies the results of ongoing program self-assessment to the curriculum and other dimensions of the program) and
- **Standards C2.01b-c**, modified Self-Study Report (lacked evidence of a self-study report that documents b) results of critical analysis from the ongoing self-assessment and c) faculty evaluation of the curricular and administrative aspects of the program).

#### March 2017

Program Change: Change in credit hours (increased from 83 to 93 credit hours), effective June 2017. The commission **acknowledged the proposed change**. No further information requested.

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.

#### March 2013

Program Change: Change in requirements for graduation (credits awarded increased from 82 to 83), effective Fall 2012. The commission **acknowledged the proposed change**. No further information requested.

# September 2011

The commission accepted the report addressing 3<sup>rd</sup>/4<sup>th</sup> edition

- Standards A3.07d/A3.15d and e (provided evidence the program defines, publishes and makes readily available to prospective and enrolled students required technical standards) and
- **Standards C3.06/C3.04** (provided evidence the program documents a summative evaluation of each student toward the end of the program to assure that students are prepared to enter clinical practice). No further information requested.

## March 2011

Accreditation-Continued; Next Comprehensive Evaluation: March 2018. The program is approved for up to 144 students.

Report due July 1, 2011 (Standards, 3rd/4th edition) -

 Standards A3.07d/A3.15d and e (lacked evidence the program defines, publishes and makes readily available to prospective and enrolled students required technical standards) and

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• **Standards C3.06/C3.04** (lacked evidence the program documents a summative evaluation of each student toward the end of the program to assure that students are prepared to enter clinical practice).

## March 2005

The commission acknowledged the report addressing 2<sup>nd</sup> edition

- Standard B6.3 (provided evidence clinical experiences are provided in long-term care settings) and
- **Standard C6.2** (provided evidence equivalent evaluation processes are applied to all clinical sites regardless of geographical location). No further information requested.

### March 2004

Accreditation-Continued; Next Comprehensive Evaluation: March 2010. Maximum Student Capacity: 92.

Report due January 17, 2005 (Standards, 2<sup>nd</sup> edition) -

- **Standard B6.3** (lacked evidence clinical experiences are provided in long-term care settings) and
- **Standard C6.2** (lacked evidence equivalent evaluation processes are applied to all clinical sites regardless of geographical location).

#### March 1999

The commission accepted the report addressing 1st edition

- **Standard I B 2** (provided evidence of sufficient financial resources to assure continuation of program operations) and
- Standard II B 1 (provided evidence of learning objectives for physiology). No further
  information requested.

# March 1998

Accreditation-Continued; Next Comprehensive Evaluation: March 2004.

Report due February 1, 1999 (Standards, 1st edition) -

- **Standard I B 2** (lacked evidence of sufficient financial resources to assure continuation of program operations) and
- Standard II B 1 (lacked evidence of learning objectives for physiology).

NOTE: The ARC-PA commission action information available begins in March 1998. Information from initial accreditation in 1973 by the American Medical Association Council on Medical Education and subsequent accrediting organizations is not available.