First accredited: September 2020

Next review: June 2025 Maximum class size: 40/46/50

Page 1 of 4

June 2023

Adverse Action-Accreditation-Probation; A focused probation visit will occur in advance of the June 2025 commission meeting. The program's maximum class size remains 50. The program did not appeal the commission's decision.

Report due October 1, 2023 (Standards, 5th edition):

- **Standard A1.02a** (lacked evidence the sponsoring institution is responsible for supporting the planning by program faculty of curriculum design, course selection, and program assessment)
- **Standard A2.09b** (lacked evidence program director is knowledgeable about and responsible for program administration)
- **Standard A2.16** (lacked evidence all instructional faculty actively serving as supervised clinical practice experience preceptors hold a valid license to practice at the clinical site)
- **Standard A3.12f** (lacked evidence program defines, publishes and makes readily available to enrolled and prospective students general program information to include estimates of all costs [tuitions, fees, etc.] related to the program)
- Standard A3.17b (lacked evidence student academic records kept by the sponsoring institution
 or program are readily accessible to authorized program personnel and includes documentation
 that the student has met institution and program health screening and immunization
 requirements)
- Standard B1.03e (lacked evidence that for each didactic and clinical course (including required
 and elective rotations), the program defines and publishes learning outcomes and instructional
 objectives, in measurable terms that can be assessed, and that guide student acquisition of
 required competencies)

Report due February 1, 2024 (Standards, 5th edition):

- **Standard B3.03a** (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes for preventive, emergent, acute, and chronic patient encounters)
- **Standard B3.03b** (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes across the life span, to include infants, children, adolescents, adults, and the elderly)
- Standard B3.03c (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes for women's health [to include prenatal and gynecologic care])
- **Standard B3.03d** (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes for conditions requiring surgical management, including pre-operative, intra-operative, post operative care)
- **Standard B3.03e** (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes for behavioral and mental health conditions)
- **Standard B3.06a** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)
- Standard B3.06b (lacked evidence supervised clinical practice experiences occur with NCCPA certified PAs)
- Standard B3.06c (lacked evidence supervised clinical practice experiences occur with other

First accredited: September 2020

Next review: June 2025 Maximum class size: 40/46/50

Page 2 of 4

licensed health care providers qualified in their area of instruction)

- **Standard B4.01a** (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 aligns with what is expected and taught)
- 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)

No report required:

- **Standard C1.02b** (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data)
- **Standard C1.02c.i** (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program strengths)
- **Standard C1.02c.ii** (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program areas in need of improvement)
- **Standard C1.02c.iii** (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify action plans
- **Standard C1.03** (lacked evidence program prepares 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)
- Standard E1.03 (the program did not submit documents as required by the ARC-PA)

The commission **did not accept** the report providing evidence of

 description of how the program aligns student assessments with the expected SCPE learning outcomes related to clinical and technical skills, identifying which skills are required by the program, definition of the program's expectations regarding the level of competency demonstrated by the student in performing the skill, SCPE expectations for each required rotation, and evaluation tools used to verify the program has a means to determine whether each student has met the learning outcomes on SCPEs by aligning evaluation with what is expected

No further information requested.

September 2022

The commission reviewed and requested more information of the report providing evidence of

 description of the program's expected benchmark(s) for assessment of student performance in meeting the learning outcomes and instructional objectives for the SCPE components of the curriculum and evaluation tools used to verify the program has a means to determine whether each student has met the learning outcomes on SCPEs by aligning evaluation with what is expected

Additional information (description of how the program aligns student assessments with the expected SCPE learning outcomes related to clinical and technical skills, identifying which skills are required by the program, definition of the program's expectations regarding the level of competency demonstrated by

First accredited: September 2020

Next review: June 2025 Maximum class size: 40/46/50

Page 3 of 4

the student in performing the skill, SCPE expectations for each required rotation, and evaluation tools used to verify the program has a means to determine whether each student has met the learning outcomes on SCPEs by aligning evaluation with what is expected) due September 28, 2022.

March 2022

The commission reviewed and requested more information of the report addressing 5th edition

- Standard B2.02b (provided evidence the curriculum includes instruction in physiology),
- **Standard B2.08a** (provided evidence the curriculum includes instruction in the provision of medical care for adolescents),
- **Standard B4.01a** (lacked evidence the planned evaluation of students related to the supervised clinical education components of the curriculum parallels the program's required learning outcomes) and
- **Standard C1.01a-g** (provided evidence the program has an ongoing self-assessment process that addresses a) administrative aspects and instructional resources, b) effectiveness of the didactic curriculum, c) effectiveness of the clinical curriculum, d) graduate preparation, e) PANCE performance, f) sufficiency and effectiveness of principal and instructional faculty and staff and g) success in meeting the program's goals).

Additional information (description of the program's expected benchmark(s) for assessment of student performance in meeting the learning outcomes and instructional objectives for the SCPE components of the curriculum and evaluation tools used to verify the program has a means to determine whether each student has met the learning outcomes on SCPEs by aligning evaluation with what is expected) due May 20, 2022.

September 2020

Accreditation-Provisional; Next Comprehensive Evaluation: TBD (Provisional Monitoring). The program is approved for up to 40 students in the first class of students, 46 in the second class and 50 in the third class.

Report due December 18, 2021 (Standards, 5th edition) -

- Standard B2.02b (lacked evidence the curriculum includes instruction in physiology),
- Standard B2.08a (lacked evidence the curriculum includes instruction in the provision of medical care for adolescents),
- **Standard B4.01a** (lacked evidence the planned evaluation of students related to the supervised clinical education components of the curriculum parallels the program's required learning outcomes) and
- **Standard C1.01a-g** (lacked evidence the program has an ongoing self-assessment process that addresses a) administrative aspects and instructional resources, b) effectiveness of the didactic curriculum, c) effectiveness of the clinical curriculum, d) graduate preparation, e) PANCE performance, f) sufficiency and effectiveness of principal and instructional faculty and staff and g) success in meeting the program's goals).

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

First accredited: September 2020

Next review: June 2025 Maximum class size: 40/46/50

Page 4 of 4

• **Standard C1.03** (lacked evidence the program prepares 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)