

Rosalind Franklin University of Medicine and Science
Accreditation History

First accredited: May 1993
Next review: March 2033
Maximum class size: 67
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March 2025

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 2024

The commission **accepted** the report addressing 5th edition

- **Standard C1.03** (provided 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)

No further information requested.

The program's PANCE pass rate percentage was 85% or less for its 2022 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. 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.

September 2023

The commission **accepted** the report addressing 5th edition

- **Standard B3.03a** (provided evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes for preventive, emergent, acute, and chronic patient encounters)
- **Standard B3.03d** (provided 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 B4.01a** (provided evidence that the program conducts 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 that align with what is expected and taught)

No further information requested.

March 2023

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards*. Next Comprehensive Evaluation: March 2033. Maximum class size: 67.

Report due May 15, 2023 (*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)

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- **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 B4.01a** (lacked evidence that the program conducts 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 that align with what is expected and taught)

Report due October 1, 2023 (*Standards*, 5th edition) modified self-study report:

- **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)

September 2020

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.

December 2019

Accreditation-Administrative Probation. The Annual Report was due December 15, 2019. It was not submitted until December 16, 2019. Administrative-Probation removed post receipt of annual report.

March 2019

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 2018

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 2017

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.

May 2016

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The program was notified of a change in the accreditation process (time extended between regularly scheduled validation reviews from seven to ten years). Program's next validation review changed from March 2020 to March 2023 due to this change.

March 2015

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

- Corrected tabs in the Portal. No further information requested.

September 2014

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

- **Standards B3.03a-d** (provided evidence of program defined requirements for 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). No further information requested on standards; however, report due October 15, 2014 (correct Personnel and SCPEs tabs in Program Management Portal).

September 2013

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

- **Standard A3.14c** (provided evidence of publication of the five-year, first time PANCE pass rate). No further information requested.

March 2013

Accreditation-Continued; Next Comprehensive Evaluation: March 2020. Maximum class size: 67.

Report due May 1, 2013 (*Standards*, 4th edition) -

- **Standard A3.14c** (lacked evidence of publication of the five-year, first time PANCE pass rate).

Due August 1, 2014 (*Standards*, 4th edition) -

- **Standards B3.03a-d** (lacked evidence of program defined requirements for 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).

September 2009

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

- The plan for clinical experiences in long-term care and information on preceptors. No further information requested.

April 2008

Focused visit conducted.

September 2008

The commission **accepted the report** addressing 2nd edition

- **Standard B6.2g** (provided evidence every student has clinical experiences in psychiatry/behavioral medicine) and
- **Standard B6.3** (provided evidence clinical experiences occur in a long-term care setting).

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Additional information (information on results of plan for clinical experiences in long-term care and information on preceptors) due July 10, 2009.

March 2008

The commission **did not accept the report** addressing 2nd edition

- **Standard B6.2g** (lacked evidence every student has clinical experiences in psychiatry/behavioral medicine) and
- **Standard B6.3** (lacked evidence clinical experiences occur in a long-term care setting).

Report (previously requested information) due July 11, 2008. Focused site visit to clarify information provided in report.

September 2007

The commission **did not accept the report** addressing 2nd edition

- **Standard B6.2g** (lacked evidence every student has clinical experiences in psychiatry/behavioral medicine) and
- **Standard B6.3** (lacked evidence clinical experiences are provided in a long-term care setting).

Report (previously requested information) due January 11, 2008.

September 2006 (Rosalind Franklin University of Medicine and Science) –

Accreditation-Continued; Next Comprehensive Evaluation: September 2012. Maximum Student Capacity: 120.

Report due July 12, 2007 (*Standards*, 2nd edition) -

- **Standard B6.2g** (lacked evidence every student has clinical experiences in psychiatry/behavioral medicine) and
- **Standard B6.3** (lacked evidence clinical experiences are provided in a long-term care setting).

September 2003

Informational Item: Permanent dean identified in June 2003.

March 2003

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

- Long-term care experiences and the summative evaluation. No further information requested.

September 2002

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

- The plan for clinical experiences in long-term care and progress report for summative evaluation. Additional information (more detail on long-term care experiences and the summative evaluation) due January 15, 2003.

March 2002

The commission **accepted the report** addressing 2nd edition

- **Standard A5.8** (provided evidence of policies by which students may work within the program or institution, while enrolled in the program),

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- **Standard B1.4** (provided evidence of measurable instructional objectives and expected student competencies in the syllabus for Gross Anatomy 2000),
- **Standard B6.3** (provided evidence of clinical experiences in a long-term care setting) and
- **Standard C5.5** (provided evidence of a summative evaluation of each student prior to program completion to assure that students meet defined program objectives for knowledge, skills and attitudes that demonstrate suitability for practice).

Additional information (plan for clinical experiences in long-term care and progress report for summative evaluation) due July 19, 2002.

December 2001 (Finch University of Health Sciences/The Chicago Medical School)

Accreditation-Continued; Next Comprehensive Evaluation: September 2006. Maximum Student Capacity: 104.

Report due February 1, 2002 (*Standards*, 2nd edition) -

- **Standard A5.8** (lacked evidence of policies by which students may work within the program or institution, while enrolled in the program),
- **Standard B1.4** (lacked evidence of measurable instructional objectives and expected student competencies in the syllabus for Gross Anatomy 2000),
- **Standard B6.3** (lacked evidence of clinical experiences in a long-term care setting) and
- **Standard C5.5** (lacked evidence of a summative evaluation of each student prior to program completion to assure that students meet defined program objectives for knowledge, skills and attitudes that demonstrate suitability for practice).

NOTE: Commission action information available begins in December 2001. Information from initial accreditation in 1993 by CAHEA and subsequent accrediting organizations is not available.