First accredited: April 1997 Next review: September 2034 Maximum class size: 75

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March 2025

The commission acknowledged the report providing evidence of

• Updates to the program's Program Management Portal and website.

No further information requested.

September 2024

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards*. Next Comprehensive Evaluation: September 2034. Maximum class size: 75.

The commission noted five areas of noncompliance with the $\it Standards$.

Report due November 15, 2024:

- Update Student and Program General tabs in Program Management Portal.
- Update NCCPA PANCE Exam Performance Summary Report (All Test Takers) for the last 5 years on website.

Report due January 22, 2025 (Standards, 5th edition):

- Standard B1.03e (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students the in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)
- **Standard B3.03c** (lacked evidence that 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)
- Standard B3.03d (lacked evidence that 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 B4.01a (lacked evidence 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)
- Standard B4.01b (lacked evidence 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 allow the program to identify and address any student
 deficiencies in a timely manner)

June 2022

The commission acknowledged the report providing evidence of

Update regarding changes in response to COVID-19. No further information requested.

March 2021

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

First accredited: April 1997 Next review: September 2034 Maximum class size: 75

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

The commission acknowledged the report providing evidence of

• Changes in response to COVID-19. 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.

September 2017

Program Change: Change in length of program (124 to 120 credits, 34 to 30 months and clinical phase 21 to 17 months), effective August 1, 2019. The commission **acknowledged the proposed changes**. 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

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 September 2021 to September 2024 due to this change.

March 2016

Program Change: Change in graduation requirements (136 to 133 credits), effective May 16, 2016. The commission **acknowledged the proposed change**. No further information requested.

March 2015

The commission accepted the report addressing 4th edition

Standard B3.02 (provided evidence that SCPEs enable students to meet program
expectations and acquire competencies needed for entry into clinical practice). No
further information requested.

The commission acknowledged the report providing evidence of

• Corrected SCPEs in the Portal. No further information requested.

The commission acknowledged the report providing evidence of

• Updated website. No further information requested.

September 2014

First accredited: April 1997 Next review: September 2034 Maximum class size: 75

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Accreditation-Continued; Next Comprehensive Evaluation: September 2021. Maximum class size: 75.

Report due October 1, 2014

Update accreditation statement and PANCE Pass Rate Summary Report on website.

Due November 14, 2014

• Correct supervised clinical practice experiences (SCPEs) in the Program Management Portal.

Due January 15, 2015 (Standards, 4th edition) -

• **Standard B3.02** (lacked evidence that SCPEs enable students to meet program expectations and acquire competencies needed for entry into clinical practice).

March 2013

Program Change: Change in maximum student capacity (210 to 225), effective July 2015. The commission **approved the proposed change**. No further information requested.

September 2011

The commission accepted the report providing evidence of

• Clinical sites No further information requested.

September 2010

The commission accepted the report providing evidence of

• Clinical sites in pediatrics, psychiatry and ob/gyn. Additional information (update on securing clinical sites) due July 1, 2011.

September 2009

Program Change: Change in maximum student capacity (120 to 210), effective July 2010. The commission **acknowledged the proposed change**. Additional information (clinical sites in pediatrics, psychiatry and ob/gyn) due July 1, 2010.

September 2008

The commission accepted the report addressing 3rd edition

• **Standard B7.03d** (provided evidence supervised clinical practice experience is provided in long-term care settings). No further information requested.

September 2007

Accreditation-Continued; Next Comprehensive Evaluation: September 2014. Maximum Student Capacity: 120.

Report due July 11, 2008 (Standards, 3rd edition) -

• **Standard B7.03d** (lacked evidence supervised clinical practice experience is provided in long-term care settings).

September 2003

First accredited: April 1997 Next review: September 2034 Maximum class size: 75

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The commission accepted the report addressing 2nd edition

- **Standards C2.2a-d, g** (provided evidence the self-study report includes critical analysis of
 - a) student attrition, deceleration, and remediation,
 - b) faculty attrition,
 - c) student failure rates in individual courses and rotations,
 - d) student evaluations of individual didactic courses, clinical experiences, and faculty and
 - g) aggregate student performance on the NCCPA exam),
- Standard C4.1b (provided evidence the self-study report documents analysis of outcome data collected in Appendix 1) and
- **Standard C5.5a** (provided evidence the summative evaluation of each student is completed and documented prior to program completion, to assure that students have met defined program objectives for the knowledge, skills and attitudes that demonstrated suitability for practice). No further information requested.

Personnel Change: Interim medical director appointed.

September 2002

Accreditation-Continued; Next Comprehensive Evaluation: September 2007. Maximum Student Capacity: 72.

Report due July 15, 2003 (Standards, 2nd edition) -

- Standards C2.2a-d, g (lacked evidence the self-study report includes critical analysis of
 - a) student attrition, deceleration, and remediation,
 - b) faculty attrition,
 - c) student failure rates in individual courses and rotations,
 - d) student evaluations of individual didactic courses, clinical experiences, and faculty and
 - g) aggregate student performance on the NCCPA exam),
- **Standard C4.1b** (lacked evidence the self-study report documents analysis of outcome data collected in Appendix 1) and
- **Standard C5.5a** (lacked evidence the summative evaluation of each student is completed and documented prior to program completion, to assure that students have met defined program objectives for the knowledge, skills and attitudes that demonstrated suitability for practice).

March 2001

The commission accepted the report providing evidence of

• Admission prerequisites and syllabi. No further information requested.

September 2000

First accredited: April 1997 Next review: September 2034 Maximum class size: 75

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Program Change: Change in degree awarded (baccalaureate to master's) and Increase program length (27 to 34 months), effective August 2000. The commission **acknowledged the proposed changes**. Additional information (admission prerequisites and syllabi for rearranged and new courses) due January 15, 2001.

March 2000

The commission accepted the report addressing 1st edition

- Standard I D 1 f (provided evidence the program publishes and makes readily available
 to all concerned policies and processes by which students may perform service work
 while enrolled) and
- **Standard I E 1** (provided evidence the program routinely secures sufficient qualitative and quantitative information regarding program graduate outcomes). No further information requested.

September 1999

Accreditation-Continued; Next Comprehensive Evaluation: September 2002. Report due February 1, 2000 (*Standards*, 1st edition) -

- Standard I D 1 f (lacked evidence the program publishes and makes readily available to all concerned policies and processes by which students may perform service work while enrolled) and
- **Standard I E 1** (lacked evidence the program routinely secures sufficient qualitative and quantitative information regarding program graduate outcomes).

NOTE: The ARC-PA commission action information available begins in September 1999. Information from initial accreditation in 1997 by CAAHEP is not available.