

# Accreditation Review Commission on Education for the Physician Assistant, Inc.

### Application for Provisional Accreditation<sup>©</sup> Revised 12.2023

For Accreditation Standards, fifth edition as of 9.2023<sup>©</sup>

Name of Program: Click here to enter program name **Sponsoring Institution:** Click here to enter institution

**City and State:** Click here to enter city and state Dates of Site Visit: Click here to enter dates

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#### PREFACE

Accreditation - Provisional is an accreditation status first awarded when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA *Standards*.

Only those institutions that meet the eligibility criteria and are actively engaged in establishing a program for the education of physician assistants are eligible for provisional accreditation. The ARC-PA will not consider institutions that are not in good standing with their regional accrediting bodies.

The provisional accreditation process begins with a determination of institutional eligibility to sponsor a program. The process involves a thorough review of the planning, organization, evaluation and proposed/actual content of a program that is in the advanced planning stages. The program is eligible to continue its accreditation status of accreditation-provisional with subsequent evaluations and commission reviews as defined in ARC-PA polices and processes. After successfully completing the multi-year provisional accreditation process, the program is eligible for the status of accreditation-continued.

The program will be subject to denial of accreditation and to denial of future eligibility for accreditation in the event that any of the statements or answers made in documents or the application are false or in the event that the program violates any of the rules or regulations governing applicant programs.

#### Please pay particular attention to Section D of the Standards.

#### ELIGIBILITY

The ARC-PA accredits only qualified PA programs offered by, or located within, institutions chartered by and physically located within, the *United States* and where students are geographically located within the *United States* for their education.

A single institution *must* be clearly identified as the sponsor of the program and *must* be authorized under applicable law to provide a program of post-secondary education. It *must* be accredited by, and in good standing with, a *recognized regional accrediting agency* and *must* be authorized by that agency to confer upon graduates of the PA program a graduate degree.

Institutions planning to develop a program and apply for provisional accreditation that do not meet these eligibility requirements will not be considered by the ARC-PA.

#### **PROGRAM REVIEW**

Accreditation of PA programs is a process initiated by the sponsoring institution. It includes a comprehensive review of the program relative to the *Standards* and it is the responsibility of the PA program to demonstrate its compliance with the *Standards*. Accreditation decisions are based on the ARC-PA's evaluation of information contained in the accreditation application, the report of the site visit evaluation team, any additional requested reports or documents submitted to the ARC-PA by the program or institution and the program accreditation history.

#### PLEASE NOTE

- The term "student(s)" as used in this document refers to those individuals enrolled in the PA program.
- *Italics* are used to reflect words and terms defined in the glossary of the *Standards*.

#### NOTE ABOUT APPENDICES

Throughout this document, references are made to required content and data for required appendices. In some cases, the content is to be provided by completion of ARC-PA developed TEMPLATES. In other cases, the program is given the latitude of displaying the data in a graphic display it designs. The program must also respond to all required narratives for the appendices.

Additionally, programs are required to include specific information, as listed in the table of required appendices, which may not otherwise be addressed in the body of this document.

#### **TECHNICAL DIRECTIONS FOR COMPLETING THE APPLICATION**

#### This application and its appendices were developed for use with Word 2010 or later for PC.

As some features of the documents are NOT compatible with Word for Mac, the use of a Mac for completion is NOT recommended. Furthermore, some functionalities in the documents may not be supported by applications such as Google Documents or similar products.

The application and appendices require programs to complete tables, provide narratives and mark text boxes. To complete the tables, left click inside the cells and type the required information. To provide narratives, left click inside the narrative boxes and begin typing. Although the fields may appear small, they will expand to allow as much text as needed. If the text extends beyond the page, the document will automatically repaginate. Tables, or graphs **MAY NOT** be added to text boxes. You may add as an appendix if needed in your response.

When inserting hyperlinks that require passwords for access, **provide** log-in information in the narrative box.

**Note** that words appearing in *italics* are defined in the glossary of the Accreditation *Standards*. The glossary can be found at the end of the application.

The **Provide Narrative** sections are to be answered with brief and succinct answers.

The application and appendices are "protected." **DO NOT** attempt to unprotect the document. You will be unable to insert or delete pages or modify anything that is not inside a text or form field. If you unprotect the document, there is a strong possibility that all entered data will be lost.

#### SAVING YOUR DOCUMENTS

After you have completed the application and each appendix, use the "Save" or "Save As" command under the File menu. The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion <u>of an abbreviation of the program's name at the end of the</u> <u>document name</u>.

For example: App 1c Physical Facilities becomes App 1c Physical Facilities NAME

Program-generated documents should follow the format: App XXX Title Name. For example, when adding syllabi to appendix 17 use: App 17a DidacSyl Name

#### The title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format. The document must be saved in the appropriate folder. For example: App 1b Program Budget Name is to be saved in the Appendix 01 folder.

If you have any difficulties or questions, contact the ARC-PA at 770-476-1224 or <u>accreditationservices@arc-pa.org</u>.

Please return the completed application and appendices to the ARC-PA office as directed in the Saving and Submissions Instructions at the end of the application.

#### THE SHOULD STANDARDS

*Should* is term used to designate requirements that must be met unless there is a compelling reason, acceptable to the ARC-PA, for not complying. Programs not meeting any component(s) of a *should* standard are expected to describe in detail efforts to meet the standard and why they are unable to do so. At the time of the review by the commission, a program or institution may be cited for failing to comply with a requirement that includes the term 'should.'

#### INFORMATION ABOUT THE SELF-ASSESSMENT PROCESS AND SELF-STUDY REPORT

Since a program applying for provisional accreditation has no students and little data, the majority of this report is descriptive. It is essential that programs give careful thought to providing responses that address the program's plan for collection and critical *analysis* of data. Programs should review helpful resources including the *Data Analysis Resource* and *Notes to Programs SSR Editions*, and the Ongoing Program Self-Assessment portion of the Accreditation Manual: https://www.arc-pa.org/accreditation-manual/

## Directions in the box below apply to all materials related to the Application and supporting documents. Directions must be followed.

- 1. Copies of each document that support the program's compliance with the Standards must be readily available for site visitors as directed in the Organizing Materials Using a Secure Document Sharing Application instructions and as requested by the commission.
- 2. Copies of ALL signed agreements with other entities providing didactic or supervised clinical practice experiences must be readily available for site visitors and as requested by the commission.
- 3. If number of clinical placements are not included in the signed affiliation agreements, the program must provide another form of documentation to verify sufficient clinical placements.

- 4. Source documents for data summaries and analysis within application and appendices must be readily available for site visitors and as requested by the commission.
- 5. Data and activities presented in ARC-PA TEMPLATES and program-designed graphic presentations must be verifiable. Documents and materials in support of entries must be available for review and as requested by the commission.
- 6. Documents identified in the Material List for Provisional Accreditation Visits are available at the end of the application.

**APPLICATION OF RECORD:** The application submitted by the program to the ARC-PA office is considered the program's application of record. It is one component of the official program record used by the commission throughout the accreditation review process. Site visitors have been instructed **NOT** to accept any new or revised application materials from the program at the time of the visit. If, during the process of the visit, the site visitors suggest additional information or materials be submitted to the ARC-PA office, these materials should be sent with the program's response to observations.

#### **INTRODUCTION**

The administrative operation of a PA program involves collaboration between the faculty and administrative staff of the program and the sponsoring institution. The program *must* provide an environment that fosters intellectual challenge and a spirit of inquiry. The sponsoring institution *must* be committed to the success of the program and *must* provide effective oversight of operations and personnel. Well-defined policies *must* reflect regional accreditation requirements as well as the missions and *goals* of the program and sponsoring institution. Program documents *must accurately* reflect lines of institutional and programmatic responsibility as well as individual responsibilities. Adequate resources *must* be devoted to supporting the program in accomplishing its mission.

Include the completed Program Data Sheet in Appendix 1a.

#### A1 SPONSORSHIP

A1.01 When more than one institution is involved in the provision of academic and/or clinical education, responsibilities of the respective institutions for instruction and supervision of students *must* be clearly described and documented in a manner signifying agreement by the involved institutions. Signed affiliation agreement(s) *must* define the responsibilities of each party related to the educational program for students, *must* specify whose policies govern, and *must* document student access to educational resources and clinical experiences. While one agreement between the sponsoring institution and each clinical entity to cover multiple professional disciplines is acceptable, these agreements are expected to include specific notations acknowledging the terms of participation between the PA program and each clinical entity. Agreements are expected to be signed by an authorized individual(s) of each participating entity.

**If applicable, include** a copy of **one** signed agreement with other institution(s) involved in providing academic instruction in **Appendix 2a**.

**Include** a copy of **two** signed agreements with clinical affiliates providing *supervised clinical practice experiences* in **Appendix 2b**.

#### INSTITUTION RESPONSIBILITIES

**Include** the following in **Appendix 3a**: Diagram or description of the organizational relationship of the PA program to the sponsoring institution.

- A1.02 The sponsoring institution is responsible for:
  - a) supporting the planning by *program faculty* of curriculum design, course selection, and program assessment,

**Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.02a.

b) hiring faculty and staff,

**Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.02b.

c) ensuring effective program leadership,

**Provide narrative** describing how the institution plans to demonstrate responsibility for <u>and</u> will review compliance with A1.02c.

d) complying with ARC-PA accreditation Standards and policies,

**Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.02d.

e) conferring the credential and graduate level academic degree which documents satisfactory completion of the educational program,

**Provide a narrative** describing how the institution plans to demonstrate responsibility for <u>and will review compliance with A1.02e</u>.

f) ensuring that all PA personnel and student policies are consistent with federal, state, and local statutes, rules and regulations,

**Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.02f.

g) documenting appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs,

If evidence of compliance can be found on a website, include the hyperlink to the specific page in the narrative response below. If compliance is demonstrated by a page in a document found on a website, also include the name of the document and the page number within the document.

If the program does NOT post evidence of compliance on its website, but has documents that support compliance, provide a copy(ies) of the document(s) that demonstrates compliance in Appendix 3b.

**Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.02g.

h) *teaching out* currently matriculated students in accordance with the institution's regional accreditor or federal law in the event of program closure and/or loss of accreditation,

**Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.02h.

i) defining, publishing, making *readily available* and consistently applying to faculty, its policies and procedures for processing faculty grievances and allegations of harassment,

If institutional policies and procedures for processing faculty grievances and allegations of harassment are not available on the web for reference, **include** a copy of the policies and procedures in **Appendix 3c.** Otherwise, provide the program website hyperlink where above policies and procedures may be found. If compliance is demonstrated by a page in a document found on a website, **also include the name of the document and the page number** within the document.

**Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.02i.

j) defining, publishing, making *readily available* and consistently applying to students, its policies and procedures for processing student allegations of harassment, and

If institutional policies and procedures for processing student allegations of harassment are not available on the web for reference, **include** a copy of the policies and procedures in **Appendix 3d.** Otherwise, provide the program website hyperlink where above policies and procedures may be found. If compliance is demonstrated by a page in a document found on a website, **also include the name of the document and the page number** within the document.

**Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.02j.

k) defining, publishing, making *readily available* and consistently applying to students, its policies and procedures for refunds of tuition and fees.

If institutional policies and procedures for refunds of tuition and fees are not available on the web for reference, **include** a copy of the policies and procedures in **Appendix 3e**. Otherwise, provide the program website hyperlink where above policies and procedures may be found. If compliance is demonstrated by a page in a document found on a website, **also include the name of the document and the page number** within the document. **Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.02k.

- A1.03 The sponsoring institution *must* provide *sufficient* release time and financial resources in support of the *program director* and *principal faculty*, as applicable to the job description, for:
  - a) maintenance of certification and licensure and
  - b) professional development directly relevant to PA education.

Indicate which of the following are offered by the program/institution for the program director and *principal faculty*. The **Program Budget** is provided in **Appendix 1b**.

- □ funding related to certification maintenance and licensure If checked, please provide a brief description:
- non-vacation time for review and study for certification maintenance
   If checked, please provide a brief description:
- □ funding to attend professional development opportunities If **checked**, please provide a brief description:
- non-vacation time to attend professional development opportunities
   If checked, please provide a brief description:

#### Describe other support:

A1.04 The sponsoring institution *must* provide academic support and *student services* to PA students that are *equivalent* to those services provided to other *comparable* students of the institution.

**Provide narrative** describing how the institution demonstrates responsibility for <u>and</u> will review compliance with A1.04.

A1.05 The sponsoring institution *should* provide PA students and faculty at geographically *distant campus* locations access to *comparable* services and resources available to PA students and faculty on the main campus, which help students reach their academic and career goals.

**Note:** This standard is not applicable for programs entering the *Provisional* process.

#### INSTITUTION RESOURCES

**Note: In future applications,** the program will address assessment of institutional resources in standards C1.01, C1.02 and C1.03, the **self-study report**, documenting the process, application and results of ongoing program self-assessment.

A1.06 The sponsoring institution *must* provide the program with *sufficient* financial resources to operate the educational program and fulfill the program's obligations to matriculating and enrolled students.

This was addressed in part by completing the Program Data Sheet for Appendix 1a.

Identify major sources of financial support for the program: by completing the ARC-PA Program Budget TEMPLATE (Excel) for Appendix 1b.

**Describe** the institution's approach to the allocation of financial resources for the program, including the flexibility to deviate from standard practices when needed.

**Provide narrative** describing how the institution demonstrates <u>and</u> will review compliance with A1.06.

A1.07 The sponsoring institution *must* provide the program with the human resources, including *sufficient* faculty, *administrative* and technical staff, necessary to operate the educational program, comply with the *Standards*, and fulfill obligations to matriculating and enrolled students.

This was addressed in part by completing the Program Data Sheet for Appendix 1a.

**Provide narrative** describing how the institution demonstrates <u>and</u> will review compliance with A1.07.

A1.08 The sponsoring institution *must* provide the program with the physical facilities to operate the educational program in accordance with the *Standards* and to fulfill its obligations to matriculating and enrolled students.

**Complete** the **ARC-PA Physical Facilities TEMPLATE** for **Appendix 1c**.

**Provide narrative** describing how the institution demonstrates <u>and</u> will review compliance with A1.08.

A1.09 The sponsoring institution *must* provide the program with access to instructional and reference materials needed to operate the educational program and support evidence-based practice.

**Include a list** of teaching equipment, models, simulators that are available or will be purchased in **Appendix 18.** 

**Provide narrative** describing how the institution plans to demonstrate <u>and</u> will review compliance with A1.09.

- A1.10 The sponsoring institution *must* support the program in:
  - a) securing clinical sites and *preceptors sufficient* in number to allow all students to meet the program's *learning outcomes* for *supervised clinical practice experiences* and
  - b) ensuring all *required rotations* are located within the United States.

**Provide narrative** describing how the institution has participated to date and plans to continue to participate in securing clinical sites for *supervised clinical practice experiences*. Address how it ensures all *required rotations* are located within the *United States*. **Include** how the institution plans to review compliance with A1.10a and b in an ongoing manner.

- A1.11 The sponsoring institution *must,* in a manner consistent with its own mission and applicable laws demonstrate a commitment to student, faculty and staff *diversity, equity,* and *inclusion* by:
  - a) supporting the program in having a documented action plan for diversity, equity and inclusion,
  - b) supporting the program in implementing recruitment strategies,
  - c) supporting the program in implementing retention strategies, and
  - d) making available, resources which promote diversity, equity and inclusion.

**Note:** Effective March 2025, the ARC-PA has suspended the enforcement of standard A1.11 until further notice.

#### A2 PROGRAM PERSONNEL

**Note: In future applications,** the program will address *sufficiency* and *effectiveness of principal and instructional faculty* and staff in standards C1.01, C1.02 and C1.03, the **self-study report**, documenting the process, application and results of ongoing program self-assessment.

**Include** the following in **Appendix 4a**: Diagram or description of the organizational structure of the PA program, to include at a minimum, the program director, *medical director, principal faculty* and *administrative support staff*.

A2.01 All *program faculty must* possess the educational and experiential qualifications to perform their assigned duties.

This was addressed in part by completing the Program Data Sheet for Appendix 1a.

**Include** the following documents in **Appendix 4b**: Written job descriptions <u>and</u> Curricula Vitae, using App4b **ARC-PA CV TEMPLATE** provided in this application for: Program Director, *Medical Director*, and *Principal Faculty*.

**Provide narrative** describing the criteria used for the selection of faculty. Indicate who is/are the individual(s) ultimately responsible for the decision to hire. **Include** how the program demonstrates <u>and</u> will review compliance with A2.01.

#### PROGRAM FACULTY

A2.02 The program *must* have:

a) program faculty that include the program director, principal faculty, medical director, and instructional faculty, and

This was addressed in part by completing Appendix 1a and providing the CVs and job descriptions in Appendix 4b.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with A2.02a.

b) at least three FTE *principal faculty*, of which two FTE *principal faculty must* be PAs who are currently *NCCPA-certified*.

This was addressed in part by completing the **Program Data Sheet** for **Appendix 1a** and providing the **CVs** in **Appendix 4b**.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.02b.

A2.03 *Principal faculty must* be *sufficient* in number to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program.

This was addressed in part by completing the Program Data Sheet for Appendix 1a.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.03.

A2.04 *Principal faculty* and the program director *should* have academic appointments and privileges *comparable* to other faculty with similar academic responsibilities in the institution.

**Provide narrative** describing how the institution and program demonstrates <u>and</u> will review compliance with A2.04.

A2.05 *Principal faculty* and the program director *must* be responsible for, and actively participate in the processes of:

**Complete ARC-PA Personnel Responsibilities TEMPLATE for Appendix 4c.** 

a) developing, reviewing and revising as necessary the mission statement, *goals* and *competencies* of the program,

**Include** the following in **Appendix 4d & 4e**: Mission of the institution, mission of the program and program *goals*. If these are on the program's/institution's website, **provide the URL** for the page on which these are found here.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with A2.05a.

b) selecting applicants for admission to the PA program,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.05b.

c) providing student instruction,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.05c.

d) evaluating student performance,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.05d.

e) academic counseling of students,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.05e.

f) assuring the availability of remedial instruction,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.05f.

g) designing, implementing, coordinating, and evaluating the curriculum, and

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with A2.05g.

h) evaluating the program.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.05h.

#### **PROGRAM DIRECTOR**

A2.06 The program director *must* be a PA<sup>1</sup>.

- a) The program director *must* possess at least three years of full-time higher education experience at the time of appointment.<sup>2</sup>
- b) The program director *must* be assigned to the program on a 12-month full time basis and at least 80% of that time *must* be devoted to academic and administrative responsibilities in support of the program.
- c) The program director *must* hold current or emeritus *NCCPA* certification status.

<sup>&</sup>lt;sup>1</sup> Program directors appointed before 9/1/2020 should be a physician assistant, those appointed on or after 9/1/2020 *must* be a physician assistant.

<sup>&</sup>lt;sup>2</sup> Program directors appointed before 9/1/2020 should have at least 3 years higher education experience at the time of appointment, those appointed on or after 9/1/2020 *must* have at least 3 years higher education experience at the time of appointment.

**This was addressed** by completing the **Program Data Sheet** (Appendix 1a) and providing a **CV** using the ARC-PA CV template in Appendix 4b.

A2.07 The program director *must* not be the *medical director*.

This was addressed by completing the Program Data Sheet (Appendix 1a) and providing a CV using the ARC-PA CV template in Appendix 4b.

- A2.08 The program director *must* provide effective leadership by exhibiting:
  - a) responsiveness to issues related to personnel,
  - b) strong communication skills, and
  - c) proactive problem solving.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.08a-c. **Include** how the institution and program plan to assess the program director's leadership related to each component, a-c of A2.08, in an ongoing manner.

- A2.09 The program director *must* be knowledgeable about and responsible for:
  - a) program organization,
  - b) program administration,
  - c) fiscal management of the program
  - d) continuous programmatic review and analysis,
  - e) program planning,
  - f) program development,
  - g) completion of ARC-PA required documents, and
  - h) adherence to the Standards and ARC-PA policies.

**This was addressed in part** by providing the **job description** and **CV** using the ARC-PA CV template in **Appendix 4b**.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with A2.09a-h. **Include** how the institution and program plan to assess the program director's knowledge and responsibility for each component, a-h of A2.09, in an ongoing manner.

A2.10 The program director *must* supervise the *medical director, principal* and *instructional faculty* and staff in activities that directly relate to the PA program.

This was addressed in part by providing a diagram or description of the organizational structure of the PA program (Appendix 4a).

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.10.

#### **MEDICAL DIRECTOR**

- A2.11 The *medical director must* be:
  - a) a currently licensed allopathic or osteopathic physician<sup>3</sup> and
  - b) certified by an ABMS- or AOA-approved specialty board.<sup>4</sup>

**This was addressed** by completing the **Program Data Sheet** for **Appendix 1a**, providing a CV using the ARC-PA CV template and job description in **Appendix 4b**.

A2.12 The *medical director must* be an *active* participant in the program and support the development of the program *competencies* to meet current practice standards as they relate to the PA role.

This was addressed in part by providing a job description and CV using the ARC-PA CV template in Appendix 4c and the Table of Personnel Responsibilities TEMPLATE in Appendix 4d.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with A2.12.

#### INSTRUCTIONAL FACULTY

- A2.13 *Instructional faculty must* be:
  - a) qualified through academic preparation and/or experience to teach assigned subjects and
  - b) knowledgeable in course content and effective in teaching assigned subjects.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.13 a and b. **Include** the process and criteria used for selecting *instructional faculty* in relation to the requirements of this standard.

A2.14 In addition to the *principal faculty*, there *must* be *sufficient* didactic *instructional faculty* to provide students with the necessary attention and instruction to acquire the knowledge, skills, and *competencies* required for entry into the profession.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.14.

A2.15 The program *should* not rely primarily on resident physicians for didactic instruction.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.15.

<sup>&</sup>lt;sup>3</sup> *Medical directors* appointed before 3/1/06 should have their current licensure in the state in which the program exists.

<sup>&</sup>lt;sup>4</sup> *Medical directors* appointed before 3/1/06 should be board certified, those appointed on or after 3/1/06 must be board certified.

A2.16 All *instructional faculty* actively serving as *supervised clinical practice experience preceptors must* hold a valid license to practice at the clinical site.

b) (rescinded effective 3.2022)

c) (moved to A2.17b, effective 3.2022)

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.16. **Include** the process used for verifying that all *supervised clinical practice experience preceptors* hold a current and valid license to practice at their respective clinical site.

- A2.17 In each location to which a student is assigned for didactic instruction or *supervised clinical practice experiences*, the program *must:* 
  - a) inform the student which *principal* or *instructional faculty* member is designated by the program to assess and supervise the student's progress in achieving the *learning outcomes* it requires of students and how to contact this faculty member, and

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A2.17a.

b) orient all instructional faculty to the specific learning outcomes it requires of students.

**Provide narrative** describing how the program demonstrates <u>and</u> review compliance with A2.17b.

#### **ADMINISTRATIVE SUPPORT STAFF**

A2.18 Administrative support for the program must be:

- a) at least a 1.0 FTE position dedicated exclusively to the program, and
- b) *sufficient* in number to manage the administrative responsibilities consistent with the organizational complexity and total enrollment of the program.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with A2.18a and b.

#### A3 OPERATIONS

**Note: In future applications,** the program will address assessment of administrative aspects (operations) of the program in standards C1.01, C1.02 and C1.03, the **self-study report**, documenting the process, application and results of ongoing program self-assessment.

#### POLICIES

#### Note:

Not all standards require written policy to demonstrate compliance. The standard's language specifies which policies must be published.

In response to the individual standards in sections A3 of the Standards:

**IF** evidence of compliance with these standards is on the program or institution website, **include**, in the narrative box, **the hyperlink to the specific page** where compliance is demonstrated. If compliance is demonstrated by a page in a document on the website, the program must also **list the document name and specific page number within the document**.

If evidence of compliance with these standards is NOT on the program or institution website, **provide a copy of the document(s)** that demonstrates compliance in the appendix indicated with the standard.

Provisional applicant programs may not yet have required policies *published* and *readily available* to enrolled and *prospective students* because institutional policies prevent the program from making its website publicly available prior to accreditation. If the program's website is not available at the time the application is submitted, the program must describe its plan to meet the applicable Standards and provide a copy of the content to be published on its website in Appendix 19 or as indicated with the standard.

The program is NOT to include an entire manual in response to a standard about specific policies, but only the appropriate page(s) of the manual labeled with the standard for which the page provides evidence. Complete copies of the handbooks/manuals containing policies will be placed in **Appendix 16.** Providing copies of policy manuals in the application of record does not negate the need for programs to **append evidence of compliance in appendices** as required throughout the application.

Site visitors and ARC-PA commissioners **WILL** review the content on the program's/institution's website.

A3.01 Program policies *must* apply to all students, *principal faculty* and the program director regardless of location. A signed clinical affiliation agreement or memorandum of understanding may specify that certain program policies will be superseded by those at the clinical site.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.01.

If documentation of compliance is **not available on the web** for reference as noted above and the program can provide copies of documents that support compliance, **provide** a copy, as noted above, in **Appendix 05**.

A3.02 The program *must* define, publish, make *readily available* and consistently apply its policies and practices to all students.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.02.

A3.03 The program *must* define, publish, make *readily available* and consistently apply a policy for prospective and enrolled students that they *must* not be required to provide or solicit clinical sites or *preceptors*.

**Provide the hyperlink** directly to the page of the program's website where this information is made available. See instructions above. **If not available on the web**, provide the information published for prospective and enrolled students in **Appendix 05**, demonstrating compliance with A3.03.

A3.04 The program *must* define, publish, make *readily available* and consistently apply a policy that PA students *must* not be required to work for the program.

**Provide the hyperlink** directly to the page of the program's website where this information is made available. See instructions above. **If not available on the web,** provide the information published for students in **Appendix 05**, demonstrating compliance with A3.04.

- A3.05 The program *must* define, publish, make *readily available* and consistently apply a policy that PA students *must* not substitute for or function as:
  - a) instructional faculty and
  - b) clinical or administrative staff.

**Provide the hyperlink** directly to the page of the program's website where this information is made available. See instructions above. **If not available on the web,** provide the information published for students in **Appendix 05**, demonstrating compliance with A3.05.

A3.06 The program *must* define, publish, make *readily available* and consistently apply a policy that PA students *must* be clearly identified in the clinical setting to distinguish them from other health profession students and practitioners.

**Provide the hyperlink** directly to the page of the program's website where this information is made available. See instructions above. **If not available on the web,** provide the information published for students in **Appendix 05**, demonstrating compliance with A3.06.

A3.07 The program *must* define, publish, make *readily available* and consistently apply:

a) a policy on immunization and health screening of students. Such policy *must* be based on then current Centers for Disease Control and Prevention recommendations for health professionals and state specific mandates.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with A3.07a. If documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

b) written travel health policies based on then current CDC recommendations for international travel for programs offering elective international curricular components.

**Provide narrative** describing how the program demonstrates <u>and</u> will reviews compliance with A3.07b. If documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**. If not applicable, write N/A.

A3.08 The program *must* define, publish, make *readily available* and consistently apply policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities which would place them at risk. Those polices *must*:

- a) address methods of prevention,
- b) address procedures for care and treatment after exposure, and
- c) clearly define financial responsibility.

**Provide narrative** describing how the program plans to demonstrate compliance with A3.08 a-c. **Provide the hyperlink** directly to the page of the program's website where this information is made available. See instructions above. **If not available on the web,** provide the information published for students in **Appendix 05,** demonstrating compliance with A3.08 a-c.

A3.09 The program *must* define, publish, make *readily available* and consistently apply policies that preclude *principal faculty*, the program director and the *medical director* from participating as health care providers for students in the program, except in an emergency situation.

**Provide the hyperlink** directly to the page of the program's website where this information is made available. See instructions above. **If not available on the web,** provide the information published for students in **Appendix 05,** demonstrating compliance with A3.09.

A3.10 The program *must* define, publish, make *readily available* and consistently apply written procedures that provide for *timely* access and/or referral of students to services addressing personal issues which may impact their progress in the PA program.

**Provide the hyperlink** directly to the page of the program's website where this information is made available. See instructions above. **If not available on the web**, provide the information published for students in **Appendix 05**, demonstrating compliance with A3.10.

#### FAIR PRACTICES AND ADMISSIONS

#### Note:

Not all standards require written policy to demonstrate compliance. The standard's language specifies which policies must be published.

In response to the individual standards in sections A3 of the Standards:

**IF** evidence of compliance with these standards is on the program or institution website, **include**, in the narrative box, **the hyperlink to the specific page** where compliance is demonstrated. If compliance is demonstrated by a page in a document on the website, the program must also **list the document name and specific page number within the document**.

If evidence of compliance with these standards is NOT on the program or institution website, **provide a copy of the document(s)** that demonstrates compliance in the appendix indicated with the standard.

Provisional applicant programs may not yet have required policies *published* and *readily available* to enrolled and *prospective students* because institutional policies prevent the program from making its website publicly available prior to accreditation. **If the program's website is not available at the time the application is submitted**, the program must describe its plan to meet the applicable Standards and provide a copy of the content to be published on its website in **Appendix 19** or as indicated with the standard.

The program is NOT to include an entire manual in response to a standard about specific content, but only the appropriate page(s) of the manual labeled with the standard for which the page provides evidence. Complete copies of the handbooks/manuals containing policies will be placed in **Appendix 16.** Providing copies of policy manuals in the application of record does not negate the need for programs to **append evidence of compliance in appendices** as required throughout the application.

Site visitors and ARC-PA commissioners **WILL** review the content on the program's/institution's website.

A3.11 The sponsoring institution and program's announcements and advertising *must accurately* reflect the program offered.

**Provide an active hyperlink(s)** <u>directly to the specific page</u>(s) of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

#### and

**Include** a **blinded** sample of the correspondence/document used to communicate with those inquiring about the program in **Appendix 6a.** (Note: DO NOT include program brochures, university/college catalogue.)

A3.12 The program *must* define, publish and make *readily available* to enrolled and *prospective students* general program information to include:

a) the program's ARC-PA accreditation status as provided to the program by the ARC-PA,

**Provide an active hyperlink(s)** <u>directly to the specific page</u>(s) of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

b) evidence of its *effectiveness* in meeting its *goals*,

**Note: In future applications,** the program will address *effectiveness* in meeting its *goals* in standards C1.01, C1.02 and C1.03, the **self-study report**, documenting the process, application and results of ongoing program self-assessment.

**Provide narrative** describing how the program plans to come into compliance with A3.12b.

c) the most current annual *NCCPA PANCE* Exam Performance Summary Report Last 5 Years provided by the *NCCPA* through its program portal, no later than April first each year,

**Note: In future applications,** the program will address *PANCE* performance in standards C1.01, C1.02 and C1.03 in the self-study report, documenting the process, application and results of ongoing program self-assessment.

Provide narrative describing how the program plans to come into compliance with A3.12c.

d) all required curricular components including required rotation disciplines,

**Provide an active hyperlink(s)** <u>directly to the specific page</u>(s) of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

e) academic credit offered by the program,

**Provide an active hyperlink(s)** <u>directly to the specific page(s)</u> of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

f) estimates of all costs (tuition, fees, etc.) related to the program,

**Include** list of required texts, subscriptions, references, and equipment (required to be purchased and used by students) in **Appendix 18**.

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**Provide an active hyperlink(s)** <u>directly to the specific page</u>(s) of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

g) program required *competencies* for entry level practice, consistent with the competencies as defined by the PA profession,

**Provide an active hyperlink(s)** <u>directly to the specific page(s)</u> of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

h) whether certain services and resources are only available to students and faculty on the main campus when the program is offered at a geographically *distant campus* location, and

Note: This sub-standard is not applicable for programs entering the *Provisional* process.

i) the most current annual student attrition information, on the table provided by the ARC-PA, no later than April first each year.

Provide narrative describing how the program plans to come into compliance with A3.12i.

- A3.13 The program *must* define, publish, consistently apply and make *readily available* to *prospective students,* policies and procedures to include:
  - a) admission and enrollment practices that favor specified individuals or groups (if applicable),

**Provide an active hyperlink(s)** <u>directly to the specific page</u>(s) of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

b) admission requirements regarding prior education or work experience,

**Provide an active hyperlink(s)** <u>directly to the specific page(s)</u> of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

c) practices for awarding or granting advanced placement,

**Provide an active hyperlink(s)** <u>directly to the specific page</u>(s) of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

d) any required academic standards for enrollment, and

**Provide an active hyperlink(s)** <u>directly to the specific page</u>(s) of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

e) any required *technical standards* for enrollment.

**Provide an active hyperlink(s)** <u>directly to the specific page(s)</u> of the program's website where this information is found. If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

A3.14 The program *must* make student admission decisions in accordance with clearly defined and *published* practices of the institution and program.

**Complete ARC-PA Admission Policies and Procedures TEMPLATE for Appendix 6b.** 

**Include** copies of the forms used to screen applications and select candidates for class positions in **Appendix 6c.** 

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.14.

#### In responding to standard A3.15:

The program must **include the hyperlink to the specific page** where compliance is demonstrated. If compliance is demonstrated by a page in a document on the website, the program must also **list the document name and specific page number within the document.** If a website requires a password, include the access information.

If the program does NOT post its policies or manuals on its website, in responding to standard A3.15, provide a copy of the documents that demonstrate compliance in Appendix 07. The program is NOT to include an entire manual in response to a standard about specific content, but only the appropriate page(s) of the manual, which must be labeled with the standard for which the pages provide evidence.

Complete copies of the handbooks/manuals containing policies will be placed in **Appendix 16**. Providing copies of institution or program policy manuals in the application of record does not negate the need for programs to **append evidence of compliance in appendices** as required throughout the application.

Site visitors and ARC-PA commissioners WILL review the content on the program's website.

- A3.15 The program *must* define, publish, consistently apply and make *readily available* to students upon admission:
  - a) any required academic standards,

**Provide the hyperlink** directly to the page of the program's website where this information is made available to students (A3.15a). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15a.

b) requirements and deadlines for progression in and completion of the program,

**Provide the hyperlink** directly to the page of the program's website where this information is made available to students (A3.15b). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15b.

c) policies and procedures for remediation and deceleration,

**Provide the hyperlink** directly to the page of the program's website where this information is made available to students (A3.15c). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15c.

d) policies and procedures for withdrawal and dismissal,

**Provide the hyperlink** directly to the page of the program's website where this information is made available to students (A3.15d). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15d.

e) policy for student employment while enrolled in the program,

**Provide the hyperlink** directly to the page of the program's website where this information is made available to students (A3.15e). See instructions above. **If not available on the web**,

**provide the information published for students in Appendix 07** demonstrating compliance with A3.15e.

f) policies and procedures for allegations of student mistreatment, and

**Provide the hyperlink** directly to the page of the program's website where this information is made available to students (A3.15f). See instructions above. **If not available on the web, provide the information published for students in Appendix 07** demonstrating compliance with A3.15f.

g) policies and procedures for student grievances and appeals.

**Provide the hyperlink** directly to the page of the program's website where this information is made available to students (A3.15g). See instructions above. **If not available on the web**, **provide the information published for students in Appendix 07** demonstrating compliance with A3.15g.

A3.15 a-g **Provide narrative** describing how the program will review compliance with all policies and procedures for A3.15a-g.

**Complete** the following regarding **advanced placement**, check all that apply

The program does not grant advanced placement to any applicant. (If this box is checked, write N/A in response to A3.16 a, b, c below.)

Advanced placement is granted based on an evaluation of the applicant's transcripts.

Advanced placement is granted based on applicant's performance on institution required standardized exams, like CLEP. Explanatory comment **required** If box checked;

Advanced placement is granted based on applicant's performance on program offered content exams. Explanatory comment **required** If box checked:

A3.16 Programs granting *advanced placement must* document within each student's file that those students receiving *advanced placement* have:

a) met program defined criteria for such placement,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.16a. **If not applicable, write N/A.** 

b) met institution defined criteria for such placement, and

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.16b. **If not applicable, write N/A.** 

c) demonstrated appropriate *competencies* for the curricular components in which *advanced placement* is given.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.18c. **If not applicable, write N/A.** 

#### **STUDENT RECORDS**

#### **Complete ARC-PA Institutional and Program Records TEMPLATE** for **Appendix 08**.

- A3.17 Student academic records kept by the sponsoring institution or program, in a paper or electronic format, *must* be readily accessible to authorized program personnel and *must* include documentation:
  - a) that the student has met *published* admission criteria including *advanced placement* if awarded,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.17a.

b) that the student has met institution and program health screening and immunization requirements,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.17b.

c) of student performance while enrolled,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.17c.

d) of *remediation* efforts and outcomes,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.17d.

e) of summaries of any formal academic/behavioral disciplinary action taken against a student, and

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.17e.

f) that the student has met requirements for program completion.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.17f.

A3.18 PA students and other unauthorized persons *must* not have access to the academic records or other confidential information of other students or faculty.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.18.

A3.19 Student *health records* are confidential and *must* not be accessible to or reviewed by *program, principal* or *instructional faculty* or staff except for immunization and screening results, which may be maintained and released with written permission from the student.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.19.

#### **FACULTY RECORDS**

- A3.20 Faculty records, including program director, *medical director* and *principal faculty must* include:
  - a) current job descriptions that include duties and responsibilities specific to each faculty member, and

Materials related to this standard *must* be available for the site visit.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.20a.

b) current curriculum vitae.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.20b.

A3.21 Program records *must* include a current curriculum vitae for each *course director*.

Materials related to this standard *must* be available for the site visit.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with A3.21.

#### SECTION B: CURRICULUM AND INSTRUCTION

#### INTRODUCTION

The program curriculum *must* prepare students to provide patient-centered care and collegially work on collaborative medical teams in an *interprofessional* environment. The curriculum *must* establish a strong foundation in health information technology and evidence-based medicine and *must* emphasize the importance of remaining current with the changing nature of clinical practice.

Section B addresses all aspects of the curriculum. The professional curriculum for PA education *must* include applied medical, behavioral and social sciences; patient assessment and clinical medicine; *supervised clinical practice*; and health policy and professional practice issues. Issues relating to individual professional responsibility and working in the health care delivery system are included in the clinical preparatory section of this *Standards* section and apply to *supervised clinical practice* settings in the clinical curriculum.

Programs need not have discrete courses for each of the instructional areas discussed within this section. However, *learning outcomes* related to all instructional areas are important elements of the curriculum and course syllabi.

The standards in section B1 apply to the entire curriculum of the program and have application to all curricular components.

The standards in section B2 apply primarily to the didactic curriculum of the program but may be included in the clinical curriculum as appropriate and determined by the program.

The standards in section B3 apply to the clinical curriculum of the program.

The standards in section B4 apply to the entire curriculum of the program and have application to all curricular components.

#### B1 CURRICULUM

**Provide narrative** describing how the program determined curricular content as a whole <u>and</u> how it determined what components should be addressed in the didactic phase and in clinical rotations.

#### Complete ARC-PA Curriculum Schematic TEMPLATE for Appendix 9a.

In **Appendix 9c**, provide documentation of institutional approval of the curriculum including all didactic and clinical components of the program, if approved prior to submission of the application. If this is not provided in the application, the program is required to provide this documentation at the time of the site visit.

Place syllabi used for ALL courses in the curriculum following the directions provided in Appendix 17.

**Note: In future applications,** the program will address the *effectiveness* of the didactic and clinical curriculum, and the program's preparation of graduates to achieve program defined *competencies* in standards C1.01, C1.02 and C1.03, the **self-study report**, documenting the process, application and results of ongoing program self-assessment.

#### B1.01 The curriculum *must*:

a) be consistent with the mission and goals of the program,

The mission and the goals of the program were **provided** in **Appendix 4d & 4e**, if not available on the web. If these are on the program's/institution's website, **provide the URL** for the page on which these are found here.

If on the website, provide URL(s) here.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B1.01.

b) be consistent with program competencies,

Include the following in Appendix 9b: The program competencies.

Provide narrative describing how the program demonstrates <u>and</u> will review compliance with B1.01b.

c) include core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care, and

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B1.01c.

d) be of *sufficient* breadth and depth to prepare the student for the clinical practice of medicine.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B1.0d. **Include** the considerations used to determine "*sufficient* breadth and depth" of the program curriculum.

B1.02 The curriculum design *must* reflect content and course sequencing that builds upon previously achieved student learning.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B1.02. **Include** the considerations used to determine the program curriculum design and sequencing.

- B1.03 For each didactic and clinical course (including *required* and *elective rotations*), the program *must* define and publish for students the following detailed information in syllabi or appendix to the syllabi:
  - a) course name,
  - b) course description,
  - c) faulty instructor of record,
  - d) course goal/rationale,
  - e) *learning outcomes* and *instructional objectives*, in measurable terms that can be assessed, that guide student acquisition of required *competencies*,
  - f) outline of topics to be covered that align with learning outcomes and instructional objectives,
  - g) methods of student assessment/evaluation, and
  - h) plan for grading.

Course syllabi with appendices applicable for all courses/rotations in the curriculum are provided in **Appendix 17**.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B1.03. Address the processes, activities, resources used for the development of the *instructional objectives*.

- B1.04 The program *must* ensure educational equivalency of course content, student experience and access to didactic and laboratory materials when instruction is:
  - a) conducted at geographically separate locations, and/or

Note: This sub-standard is not applicable for programs entering the *Provisional* process.

b) provided by different pedagogical and instructional methods or techniques for some students.

If the program provides instruction by different pedagogical and instructional methods or techniques for some students, **provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with B1.04b. Write N/A if not applicable.

#### **B2 DIDACTIC INSTRUCTION**

**Note:** the program is reminded that **Standards B4.01a-b** address how the program conducts *frequent*, objective and documented evaluations of student performance, aligned to show that students meet the program's *instructional objectives* and *learning outcomes*, including those listed for the B2 Standards, and allows the program to identify and address any student deficiencies in a *timely* manner.

Materials related to didactic instruction *must* be available and flagged for easy review in the materials provided for the site visit.

B2.01 While programs may require specific course(s) as prerequisites to enrollment, those prerequisites *must* not substitute for more advanced applied content within the professional component of the program.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B2.01.

**Note:** the program is reminded that **Standards B4.01a-b** address how the program conducts *frequent*, objective and documented evaluations of student performance, aligned to show that students meet the program's *instructional objectives* and *learning outcomes*, including those listed for the B2 Standards, and allows the program to identify and address any student deficiencies in a *timely* manner.

- B2.02 The curriculum *must* include instruction in the following areas of medical sciences and their application in clinical practice:
  - a) anatomy,
  - b) physiology,
  - c) pathophysiology,
  - d) pharmacology and pharmacotherapeutics, and
  - e) the genetic and molecular mechanisms of health and disease.

**Include** *instructional objectives* related to standard B2.02a-e following the instructions in **Appendix 10.** If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

B2.03 The curriculum *must* include instruction in clinical medicine covering all organ systems.

Include *instructional objectives* related to standard B2.03 following the instructions in Appendix
10. If these are addressed in several courses/documents, create a composite document including all the *instructional objectives*, listing in which courses they are addressed.

B2.04 The curriculum *must* include instruction in interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families and other health professionals.

Include instructional objectives related to standard B2.04 following the instructions in Appendix
10. If these are addressed in several courses/documents, create a composite document including all the instructional objectives, listing in which courses they are addressed.

B2.05 The curriculum *must* include instruction related to the development of clinical reasoning and problem-solving abilities.

Include instructional objectives related to standard B2.05 following the instructions in Appendix
10. If these are addressed in several courses/documents, create a composite document including all the instructional objectives, listing in which courses they are addressed.

- B2.06 The curriculum *must* include instruction to prepare students to provide medical care to patients with consideration for:
  - a) disability status or special health care needs,
  - b) ethnicity/race,
  - c) gender identity,
  - d) religion/spirituality,
  - e) sexual orientation, and
  - f) social determinants of health.

**Include** *instructional objectives* related to standard B2.06 a-f following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

- B2.07 The curriculum *must* include instruction in patient evaluation, diagnosis and management across all age groups and from initial presentation through ongoing follow-up, including:
  - a) interviewing and eliciting a medical history,
  - b) performing complete and focused physical examinations,
  - c) generating differential diagnoses,
  - d) ordering and interpreting diagnostic studies,
  - e) patient management including acute and chronic care plans, and
  - f) patient education and referral.

**Include** *instructional objectives* related to standard B2.07 a-f following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

B2.08 The curriculum *must* include instruction in:

- a) the provision of medical care across the life span including prenatal, infant, children, adolescents, adults and elderly,
- b) preventive, emergent, acute, chronic, and rehabilitative patient encounters,
- c) pre-, intra-, and post-operative care,
- d) psychiatric/behavioral conditions, and
- e) palliative and end-of-life care.

**Include** *instructional objectives* related to standard B2.08a-e following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

B2.09 The curriculum *must* include instruction in clinical and technical skills including procedures based on then current professional practice.

Include instructional objectives related to standard B2.09 following the instructions in Appendix
10. If these are addressed in several courses/documents, create a composite document including all the instructional objectives, listing in which courses they are addressed.

- B2.10 The curriculum *must* prepare students to work collaboratively in *interprofessional* patient centered teams. Instruction *must*:
  - a) include content on the roles and responsibilities of various health care professionals,
  - b) emphasize the team approach to patient centered care beyond the traditional physician-PA team approach, and
  - c) include application of these principles in *interprofessional* teams.

**Include** *instructional objectives* related to standard B2.10a-c following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

**Provide narrative** describing how the curriculum includes application of *interprofessional* principles in *interprofessional* teams.

- B2.11 The curriculum *must* include instruction in the following areas of social and behavioral sciences and their application to clinical practice in:
  - a) death, dying and loss,
  - b) human sexuality,
  - c) normal and abnormal development across the life span,
  - d) patient response to illness or injury,
  - e) patient response to stress,
  - f) substance use disorders, and
  - g) violence identification and prevention.

**Include** *instructional objectives* related to standard B2.11a-g following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

- B2.12 The curriculum *must* include instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping patients:
  - a) adhere to treatment plans,
  - b) modify their behaviors to more healthful patterns, and
  - c) develop coping mechanisms.

**Include** *instructional objectives* related to standard B2.12a-c following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

- B2.13 The curriculum *must* include instruction to prepare students to search, interpret and evaluate the medical literature to include:
  - a) framing of research questions,
  - b) interpretation of basic biostatistical methods,
  - c) the limits of medical research,
  - d) types of sampling methods, and
  - e) the use of common databases to access medical literature.

**Include** *instructional objectives* related to standard B2.13a-e following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

- B2.14 The curriculum *must* include instruction about the business of health care to include:
  - a) coding and billing,
  - b) documentation of care,
  - c) health care delivery systems, and
  - d) health policy.

**Include** *instructional objectives* related to standard B2.14a-d following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

- B2.15 The curriculum *must* include instruction in concepts of public health as they relate to the role of the practicing PA and:
  - a) disease prevention, surveillance, reporting and intervention,
  - b) the public health system,
  - c) patient advocacy, and
  - d) maintenance of population health.

**Include** *instructional objectives* related to standard B2.15a-d following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

- B2.16 The curriculum *must* include instruction in:
  - a) patient safety,
  - b) prevention of medical errors,
  - c) quality improvement, and

d) risk management.

**Include** *instructional objectives* related to standard B2.16a-d following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

- B2.17 The curriculum *must* include instruction about the PA profession to include:
  - a) credentialing,
  - b) historical development,
  - c) laws and regulations regarding professional practice and conduct,
  - d) licensure and certification,
  - e) the PA relationship with the physician and other health care providers,
  - f) policy issues that affect practice, and
  - g) professional organizations.

**Include** *instructional objectives* related to standard B2.17a-g following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

B2.18 The curriculum *must* include instruction in the principles and practice of medical ethics.

Include *instructional objectives* related to standard B2.18 following the instructions in Appendix
10. If these are addressed in several courses/documents, create a composite document including all the *instructional objectives*, listing in which courses they are addressed.

- B2.19 The curriculum *must* include instruction in:
  - a) intellectual honesty,
  - b) academic integrity, and
  - c) professional conduct.

**Include** *instructional objectives* related to standard B2.19a-c following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

- B2.20 The curriculum *must* include instruction about provider *personal wellness* including prevention of:
  - a) impairment and
  - b) burnout.

**Include** *instructional objectives* related to standard B2.20a and b following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document including all the *instructional objectives*, listing in which courses they are addressed.

#### **B3** SUPERVISED CLINICAL PRACTICE EXPERIENCE INSTRUCTION

Complete ARC-PA Supervised Clinical Practice Experiences (SCPE) TEMPLATE (Excel) for Appendix 11a.

Place syllabi used for ALL clinical courses/rotations in the curriculum in Appendix 17.

B3.01 The program *must* secure clinical sites and *preceptors* in *sufficient* numbers to allow all clinical students to meet the program's *learning outcomes* for *supervised clinical practice experiences*.

Include copies of two signed agreements from clinical facilities in Appendix 2b.

This was addressed in part by completing the ARC-PA Supervised Clinical Practice Experience TEMPLATE in Appendix 11a.

At the time of the site visit, in addition to the ARC-PA Supervised Clinical Practice Experience (SCPE) TEMPLATE, the program must have signed affiliation agreements with facilities that have agreed to accept students for clinical *rotations*, based on the needs of the proposed *maximum class size*, for all SCPEs for the entire clinical phase of the program.

If number of clinical placements are not included in the signed affiliation agreements, the program must provide another form of documentation at the time of the site visit to verify sufficient clinical placements.

If the program's *supervised clinical practice experiences* (SCPEs) span greater than 12 months, **provide narrative** explaining how the program schedules the overlap of the two (2) classes. Be sure to include detail on how the program assures it has active sites with agreements *sufficient* in number to accommodate all students during the overlap.

Write N/A if not applicable.

B3.02 Clinical sites and *preceptors* located outside of the *United States must* only be used for *elective rotations*.

**Complete** the **Elective Experiences Outside the United States TEMPLATE** for **Appendix 11b**, whether the program has such experiences or not.

**Provide narrative describing** how the program demonstrates <u>and</u> will review compliance with B3.02.

Write N/A If the program has no clinical sites located outside of the United States.

**Note:** the program is reminded that **Standards B4.01a-b** address how the program conducts *frequent*, objective and documented evaluations of student performance, aligned to show that students meet the program's *instructional objectives* and *learning outcomes*, including those listed for the B3.03 Standards, and allows the program to identify and address any student deficiencies in a *timely* manner.

- B3.03 *Supervised clinical practice experiences must* enable all students to meet the program's *learning outcomes*:
  - a) for preventive, emergent, acute, and chronic patient encounters,

**Include** the program's *learning outcomes* for *supervised clinical practice experiences* related to standard B3.03a in **Appendix 12.** 

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B3.03a.

b) across the life span, to include infants, children, adolescents, adults, and the elderly,

**Include** the program's *learning outcomes* for *supervised clinical practice experiences* related to standard B3.03b in **Appendix 12**.

Provide narrative describing how the program demonstrates <u>and</u> will review compliance with B3.03b.

c) for women's health (to include prenatal and gynecologic care),

**Include** the program's *learning outcomes* for *supervised clinical practice experiences* related to standard B3.03c in **Appendix 12**.

**Provide narrative describing** how the program demonstrates <u>and</u> will review compliance with B3.03c.

d) for conditions requiring surgical management, including pre- operative, intra-operative, post-operative care, and

**Include** the program's *learning outcomes* for *supervised clinical practice experiences* related to standard B3.03d in Appendix 12.

**Provide narrative describing** how the program demonstrates <u>and</u> will review compliance with B3.03d.

e) for behavioral and mental health conditions.

**Include** the program's *learning outcomes* for *supervised clinical practice experiences* related to standard B3.03e in **Appendix 12**.

**Provide narrative describing** how the program demonstrates <u>and</u> will review compliance with B3.03e.

B3.04 *Supervised clinical practice experiences must* occur in the following settings:

a) emergency department,

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B3.04a.

b) inpatient,

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B3.04b.

c) outpatient, and

Provide narrative describing how the program demonstrates <u>and</u> will review compliance with B3.04c.

d) operating room.

Provide narrative describing how the program demonstrates <u>and</u> will review compliance with B3.04d.

B3.05 *Instructional faculty* for the *supervised clinical practice* portion of the educational program *must* consist primarily of practicing physicians and PAs.

Provide narrative describing how the program demonstrates <u>and</u> will review compliance with B3.05.

- B3.06 Supervised clinical practice experiences should occur with:
  - a) physicians who are specialty board certified in their area of instruction,

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B3.06a.

Are all physician preceptors board certified in their area of instruction?

If "No", the program must respond to the following:

Provide the program's compelling reason describing why Standard B3.06a is not being met.

Provide a narrative describing how the program evaluates any physician preceptor who is not board certified in their area of instruction to be an appropriate preceptor for the program.

b) NCCPA certified PAs, or

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B3.06b.

# Are all PA preceptors *NCCPA* certified?

If "No", the program must respond to the following:

Provide the program's compelling reason describing why Standard B3.06b is not being met.

Provide a narrative describing how the program evaluates any PA preceptor who is not *NCCPA* certified to be an appropriate preceptor for the program.

c) other licensed health care providers qualified in their area of instruction.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B3.06c.

Are all other licensed health care provider preceptors qualified in their area of instruction?

If "No", the program must respond to the following:

Provide the program's compelling reason describing why Standard B3.06c is not being met.

Provide a narrative describing how the program evaluates any other health care provider who is not qualified in their area of instruction to be an appropriate preceptor for the program.

- B3.07 *Supervised clinical practice experiences must* occur with *preceptors* who enable students to meet program defined *learning outcomes* for:
  - a) family medicine,

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B3.07a.

b) emergency medicine,

Provide narrative describing how the program demonstrates <u>and</u> will review compliance with B3.07b.

c) internal medicine,

**Provide narrative** describing how the program demonstrate <u>and</u> will review compliance with B3.07c.

d) surgery,

Provide narrative describing how the program demonstrates <u>and</u> will review compliance with B3.07d.

e) pediatrics,

Provide narrative describing how the program demonstrates <u>and</u> will review compliance with B3.07e.

f) women's health including prenatal and gynecologic care, and

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B3.07f.

g) behavioral and mental health care.

**Provide narrative** describing how the program demonstrates <u>and</u> will review compliance with B3.07g.

#### **B4** Assessment of Student Learning

#### **Complete ARC-PA Student Evaluation TEMPLATE** for **Appendix 13a**.

**Include** blank copies of the forms used by preceptors to evaluate students during *supervised clinical practice experiences* in Appendix 13b.

The program provided the following in Appendix 9b: The program competencies.

B4.01 The program *must* conduct *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. The evaluations *must*:
a) align with what is expected and taught and

Provide narrative describing how the program plans to demonstrate <u>and will</u> review compliance with B4.01a for the **didactic** *instructional objectives* and *learning outcomes*. **Include in the narrative**, how the program plans to align its *learning outcomes* and *instructional objectives*, including those required for the B2 standards, with the relevant evaluations listed in the **ARC-PA Student Evaluation TEMPLATE** in **Appendix 13a**.

**Include** blank copies of all forms that the program **plans to use for preceptors** to evaluate students during *supervised clinical practice experiences* in **Appendix 13b**. This may include but is not limited to preceptor evaluation of student forms and skills checklists used by the preceptor to evaluate the student.

Provide narrative describing how the program plans to demonstrate <u>and will</u> review compliance with B4.01a for the *supervised clinical practice experience instructional objectives* and *learning outcomes*. Include in the narrative, how the program plans to align its *learning outcomes*, including those required for standards B3.03a-e, with the relevant evaluations listed in the ARC-PA Student Evaluation TEMPLATE in Appendix 13a.

b) allow the program to identify and address any student deficiencies in a *timely* manner.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with B4.01b. Reference, as appropriate, the **ARC-PA Student Evaluation TEMPLATE** for didactic curriculum and *supervised clinical practice experiences* and the blank copy(ies) of the form(s) used by *preceptors* to evaluate students in **Appendix 13**.

B4.02 (rescinded effective 9.2020)

B4.03 The program *must* conduct and document a *summative evaluation* of each student within the final four months of the program to verify that each student meets the program *competencies* required to enter clinical practice, including:

Programs may reference as appropriate, the *competencies* provided in Appendix 9b.

a) clinical and technical skills,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with B4.03a.

b) clinical reasoning and problem-solving abilities,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with B4.03b.

c) interpersonal skills,

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with B4.03c.

d) medical knowledge, and

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with B4.03d.

e) professional behaviors.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with B4.03e.

- B4.04 The program *must* document equivalency of student evaluation methods and outcomes when instruction is:
  - a) conducted at geographically separate locations and/or

Note: This sub-standard is not applicable for programs entering the Provisional process.

 provided by different pedagogical and instructional methods or techniques for some students.

If the program provides instruction by different pedagogical and instructional methods or techniques for some students, **provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with B4.04b. If **not applicable**, write N/A.

## SECTION C: EVALUATION

#### INTRODUCTION

The program *must* have a robust and systematic process of ongoing self-assessment to review the quality and *effectiveness* of their educational practices, policies and outcomes. This process *should* be conducted within the context of the mission and *goals* of both the sponsoring institution and the program, using the 5<sup>th</sup> edition Accreditation Standards for Physician Assistant Education (*Standards*) as the point of reference. A well-developed process occurs throughout the academic year and across all phases of the program. It includes analysis of quantitative and qualitative data collected from students, graduates, faculty (principal and instructional) and staff, as applicable. It critically assesses all aspects of the program relating to sponsorship, resources, students, operational policies, curriculum and clinical sites. Ongoing assessment of educational experiences is used to identify strengths and areas in need of improvement and leads to the development of plans for corrective intervention. The program's data collection and evaluation *must* be submitted using forms and processes developed by the ARC-PA. The data sources specified are considered minimums. Programs are encouraged to use additional data sources.

#### C1 ONGOING PROGRAM SELF-ASSESSMENT

In responding to standards C1.01a-g, C1.02a-d and C1.03, Complete the separate Self-Study Report for Appendix 14.

#### C2 CLINICAL SITE EVALUATION

- C2.01 The program *must* define and maintain effective processes and document 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:
  - a) physical facilities,
  - b) patient populations, and
  - c) supervision.

Include a blank copy(ies) of the form(s) used in this process in Appendix 15.

**Provide narrative** describing how the program plans to demonstrate <u>and</u> will review compliance with C2.01a-c.

**Describe** the program's process for <u>the initial review</u> of all sites and preceptors used for *supervised clinical practice experiences* to ensure that they provide access to physical facilities, patient populations, and appropriate supervision allowing students to fulfill program *learning outcomes*.

**Describe** the program's process for <u>the **ongoing** review</u> of all sites and preceptors used for *supervised clinical practice experiences* to ensure that they provide access to physical facilities, patient populations, and appropriate supervision allowing students to fulfill program *learning outcomes*.

### SECTION D: PROVISIONAL ACCREDITATION

#### INTRODUCTION

Accreditation - Provisional is an accreditation status first awarded when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA *Standards*.

Only those institutions that meet the eligibility criteria and are actively engaged in establishing a program for the education of physician assistants are eligible for provisional accreditation. The ARC-PA will not consider institutions that are not in good standing with their regional accrediting bodies.

The provisional accreditation process begins with a determination of institutional eligibility to sponsor a program. The process involves a thorough review of the planning, organization, evaluation and proposed/actual content of a program that is in the advanced planning stages. The program is eligible to continue its accreditation status of accreditation-provisional with subsequent evaluations and commission reviews as defined in ARC-PA polices and processes. After successfully completing the multi-year provisional accreditation process, the program is eligible for the status of accreditation-continued.

The program will be subject to denial of accreditation and to denial of future eligibility for accreditation in the event that any of the statements or answers made in documents or the application are false or in the event that the program violates any of the rules or regulations governing applicant programs.

This section of the *Standards* applies only to programs applying for entry into the ARC-PA accreditation process as a new provisional applicant program.

#### D1 PROVISIONAL ACCREDITATION REQUIREMENTS

Programs applying for provisional accreditation *must* demonstrate compliance, or the ability to comply when operational, with all accreditation *Standards*, including the specific provisional accreditation standards below. Programs planning to apply for provisional accreditation *must* contact the ARC-PA early in their planning phase, and before preparing accreditation application materials, to discuss the process and timelines. Typically, the institution official assigned to be responsible for the development of the program is a Provost or individual designated by the institution President. The ARC-PA does not consider a *consultant* to be an appropriate individual responsible for the development of the program. The curriculum *must* be approved by the institutional process prior to the site visit.

D1.01 Based on the qualifications outlined in the *Standards*, the program *must* have:

a) A 1.0 FTE program director hired by the institution on a permanent basis at least 15 months prior to the date of the scheduled site visit. If the person holding the position of program director changes in the 15 months prior to the date of the scheduled site visit, the program may be removed from the commission agenda.

This was addressed in part by completing the Program Data Sheet (Appendix 1a) and providing the ARC-PA CV TEMPLATES in Appendix 4b.

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Hire Date of Program Director: Click or tap to enter a date.

Provide narrative describing how the program demonstrates compliance with D1.01a.
b) A medical director appointed by the institution on a permanent basis at least 15 months prior to the date of the scheduled site visit.
This was addressed in part by completing the Program Data Sheet (Appendix 1a) and providing the ARC-PA CV TEMPLATES in Appendix 4b.
Hire Date of Medical Director: Click or tap to enter a date.
Provide narrative describing how the program demonstrates compliance with D1.01b.
c) 2.0 FTE PA-C principal faculty and 1.0 FTE support staff hired by the institution on a permanent basis at least 9 months prior to the date of the scheduled site visit.
This was addressed in part by completing the Program Data Sheet (Appendix 1a) and providing the ARC-PA CV TEMPLATES in Appendix 4b.

## Hire Date(s) of Principal Faculty:

Name: Click or tap here to enter text. Hire Date: Click or tap to enter a date.Hire Date: Click or tap to enter a date.Hire Date: Click or tap to enter a date.Hire Date: Click or tap to enter a date.

#### Hire Date(s) of support staff:

Name: Click or tap here to enter text. Name: Click or tap here to enter text. **Hire Date:** Click or tap to enter a date. **Hire Date:** Click or tap to enter a date.

**Provide narrative** describing how the program demonstrates compliance with D1.01c.

d) A chief administrative officer or designee assigned to be responsible for the development of the program.

**Provide narrative** describing how the program demonstrates compliance with D1.01d including the name of the chief administrative officer or designee assigned.

- D1.02 The developing program *must* publish and make *readily available* to everyone who requests information, applies, or plans to enroll:
  - a) its ARC-PA applicant status as provided to the program by the ARC-PA,

- b) that the program is not yet accredited, and
- c) the implications of non-accreditation by the ARC-PA.

**The program provided** the active hyperlink to the web page where information about the program's accreditation status and implication is posted in response to standard **A3.12a.** If institutional policies prevent the program from making its website publicly available prior to accreditation, place a copy of the content to be published on its website in **Appendix 19**.

**The program included** a blinded sample of the correspondence/document used to communicate with those inquiring about the program in **Appendix 6a**, in response to standard **A3.11**.

Provide narrative describing how the program demonstrates compliance with D1.02a-c.

D1.03 Prior to the ARC-PA provisional comprehensive evaluation site visit, the program *must* have a complete and institution approved curriculum and have established evaluation methods for all didactic and clinical components of the program.

**Provide narrative** describing how the program demonstrates compliance with D1.03, including **detailed narrative** identifying the planned institutional approval of the curriculum if not approved prior to submission of the application.

In **Appendix 9c**, **provide documentation** of institutional approval of the curriculum including all didactic and clinical components of the program in an **appended document**, if approved prior to submission of the application. If this is not provided in the application, the program is required to provide this documentation at the time of the site visit.

- D 1.04 The program *must* provide detailed information for each course and *rotation* offered in the program. The program *must* have a course syllabus for each course and *rotation* that includes the:
  - a) course name,
  - b) course description,
  - c) course goal/rationale,
  - d) outline of topics to be covered,
  - e) learning outcomes and instructional objectives,
  - f) faculty instructor of record if known,
  - g) methods of student assessment/evaluation, and
  - h) plan for grading.

**The program included** all didactic and clinical syllabi in **Appendix 17**. Although these documents may be updated by the program between the time of application submission and the site visit. These are part of the application of record and are the syllabi the commission will use to verify the content of each course and rotation in the program.

As the program director, I am aware of this requirement. Enter Initials.

D1.05 The program *must* have signed agreements from prospective clinical sites participating in the *supervised clinical practice experiences sufficient* in number to meet the needs of the *maximum class size*.

This was addressed in part by completing the ARC-PA Supervised Clinical Practice Experience TEMPLATE in Appendix 11a.

**The program included** copies of **two** signed agreements between the sponsoring institution/PA program and clinical affiliates providing *supervised clinical practice experiences* in **Appendix 2b** in response to B3.01.

At the time of the site visit, in addition to the **ARC-PA Supervised Clinical Practice Experience (SCPE) TEMPLATE**, the program must have signed affiliation agreements with facilities that have agreed to accept students for clinical *rotations*. If number of clinical placements are not included in the signed affiliation agreements, the program must have another form of documentation at the time of the site visit to verify sufficient clinical placements, based on the needs of the *maximum class size*, for all SCPEs for the entire clinical phase of the program.

As the program director, I am aware of this responsibility. Enter Initials.

D1.06 If provisional accreditation status is granted, the program *must* not admit more students than the number requested by the program and approved by the ARC-PA.

This was addressed by completing the ARC-PA Institutional and Program Data Sheet in Appendix 1a.

As the program director, I am aware of this responsibility. Enter Initials.

## Provide additional comments on the D Standards for the site visitors to consider, if necessary.

#### SECTION E: ACCREDITATION MAINTENANCE

Programs are expected to provide reports and documents as required by the ARC-PA.

Based on the data contained in reports and documents, the program may be required to submit additional information, may be scheduled for an onsite evaluation, may have the length of time between comprehensive evaluation visits changed, or may have its accreditation status altered. Programs are reminded that the signatures of the chief administrative officer and program director in submission of this application indicate understanding and agreement to abide with this section of the *Standards*.

#### E1 PROGRAM AND SPONSORING INSTITUTION RESPONSIBILITIES

- E1.01 The program *must* inform the ARC-PA within 30 days of the date of notification of any:
  - a) change in the accrediting agency for the sponsoring institution, or
  - b) adverse accreditation action (probation, withdrawal of accreditation) received from the sponsoring institution's regional accrediting agency.

As the program director, I am aware of this responsibility. Enter Initials.

If this standard is currently applicable to the program, **include**, in an additional **Appendix**, a document from the Chief Administrative Officer of the Sponsoring Institution, that details the change and timeline for resolution.

The ARC-PA will not consider institutions that are not in good standing with their regional accrediting bodies.

E1.02 The program *must* agree to and cooperate with periodic comprehensive and/or focused reviews of the program by the ARC-PA. Such reviews may include a site visit, which are scheduled as determined by the ARC-PA.

As the program director, I am aware of this responsibility. Enter Initials.

E1.03 The program *must* submit reports or documents as required by the ARC-PA.

As the program director, I am aware of this responsibility, **Enter Initials** and I understand it is my responsibility to contact the ARC-PA if I have questions about the dates reports are due or the content to be included in required reports. **Enter Initials**.

- E1.04 The program *must* inform the ARC-PA in writing, with a plan and timeline to fill those positions, using forms and processes developed by the ARC-PA, of personnel changes in its positions of:
  - a) program director (or interim) within two business days of the vacancy,
  - b) medical director (or interim) within 30 days of the vacancy, and
  - c) *principal faculty* within 30 days of the vacancy.

As the program director, I am aware of this responsibility, **Enter Initials** and I understand it is my responsibility to contact the ARC-PA if I have questions about such notifications and understand it is my responsibility to update the ARC-PA Program Management Portal to reflect changes to personnel. **Enter Initials**.

E1.05 The program *must* demonstrate *active* recruitment to permanently fill vacated or interim positions. The program *must* provide quarterly updates to the ARC-PA, on progress filling vacated or interim positions.

As the program director, I am aware of this responsibility. Enter Initials.

E1.06 An interim program director (IPD) *must* meet the qualifications of the program director.

As the program director, I am aware of this responsibility. Enter Initials.

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- E1.07 The appointment of the IPD position *must:* 
  - a) occur within five business days of the vacancy caused by the resignation/termination of the program director, and
  - b) not exceed 12 months.

As the program director, I am aware of this standard. Enter Initials.

- E1.08 The program *must* inform the ARC-PA, using forms and processes developed by the ARC-PA, of a temporary vacancy or extended absence of:
  - a) the program director/interim program director greater than 21 calendar days, or
  - b) the *medical director*/interim *medical director* or *principal faculty* greater than 90 calendar days.

As the program director, I am aware of this responsibility. **Enter Initials**. and I understand it is my responsibility to contact the ARC-PA if I have questions about such notifications. **Enter Initials**.

- E1.09 The program *must* receive approval from the ARC-PA in writing, using forms and processes developed by the ARC-PA, no less than six months prior to implementation of proposed changes in the following:
  - a) program expansion to a distant campus,

As the program director, I understand that our program cannot apply to expand to a distant campus until the program has held Accreditation-Continued status for five years after completing the provisional accreditation process. Enter Initials.

- requirements for program completion/graduation that include changes in total credits required,
- c) the curriculum that result in an increase in the student tuition,
- d) an increase in the approved *maximum entering class size*, or

As the program director, I understand that our program cannot apply to increase class size until the program has held Accreditation-Continued status for two years after completing the provisional accreditation process. Enter Initials.

e) program length, greater than one month.

As the program director, I am aware of these responsibilities. Enter Initials.

E1.10 The program *must* inform the ARC-PA in writing, using forms and processes developed by the ARC-PA, no less than six months prior to implementation of proposed changes to the degree granted at program completion.

As the program director, I am aware of this responsibility. Enter Initials.

- E1.11 The program *must* immediately inform the ARC-PA in writing, using forms and processes developed by the ARC-PA when:
  - a) enrollment exceeds its maximum approved class size, or
  - b) it encounters a substantive decrease in fiscal support of:
    - i. 20% or more decrease in overall budget or for program expenditures, or
    - ii. 5% or more decrease in its operating budget.

As the program director, I am aware of these responsibilities. Enter Initials.

E1.12 The sponsoring institution *must* inform the ARC-PA in writing of the intent to transfer program sponsorship as soon as it begins considering transfer.

As the program director, I am aware of this responsibility. Enter Initials.

E1.13 The program and the sponsoring institution *must* pay ARC-PA accreditation and associated fees as determined by the ARC-PA.

As the program director, I am aware of this responsibility. Enter Initials.

#### **FINAL COMMENTS**

**Provide** any final comments here as they relate to the program's application, in relation to the *Standards*, that you believe the ARC-PA should know in reviewing your program.

All accreditation applications must include the completed signed Statements and Signature page found at the bottom of this document.

## **Required Appendices for Provisional Accreditation Application**

NOTE: The word **TEMPLATE** indicates the program is to complete an ARC-PA designed **TEMPLATE** as found in the application materials. For other required data and materials, the program is to include a program created document. Provide log-in information for any links that require passwords.

**Include** the following appendices with the application:

APPENDIX	CONTENT	
Appendix 01 (Administration)	a) Program Data Sheet TEMPLATE b) Program Budget TEMPLATE c) Physical Facilities TEMPLATE	
Appendix 02 (Administration)	<ul> <li>a) One copy of a signed agreement between the sponsoring institution and other institution involved in providing academic instruction, if applicable</li> <li>b) Two copies of signed agreements between the sponsoring institution/PA program and a clinical affiliate providing supervised clinical practice experiences</li> </ul>	
Appendix 03 (Administration)	<ul> <li>a) Diagram or description of the organizational relationship of the PA program to the sponsoring institution. (Include information regarding who has immediate administrative authority over the program director and that person's position in the administrative structure of the sponsoring institution.)</li> <li>b) Copy(ies) of the document(s) – <u>if not on the web</u> – which supports compliance with standard A1.02g, how the institution demonstrates responsibility for addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs</li> <li>c) Institutional policies and procedures for processing faculty grievances and allegations of harassment <u>if not available on the web</u></li> <li>d) Institutional policies and procedures for processing student allegations of harassment <u>if not available on the web</u></li> <li>e) Institutional policies and procedures for refunds of tuition and fees <u>if not available on the web</u></li> </ul>	
Appendix 04 (Program Personnel)	<ul> <li>a) Diagram or description of the organizational structure of the PA program, to include at a minimum, the program director, <i>medical director</i>, <i>principal faculty</i> and administrative support staff</li> <li>b) Written job descriptions AND Curricula Vitae, using ARC-PA CV TEMPLATE, for: <ul> <li>Program director</li> <li>Medical director</li> <li>Principal faculty (Job descriptions include duties and responsibilities specific to each principal faculty member, A3.20a)</li> </ul> </li> <li>c) Personnel Responsibilities TEMPLATE</li> <li>d) Mission of the institution and mission of the program, if not available on web</li> <li>e) Program goals, if not available on web.</li> </ul>	

APPENDIX	CONTENT
Appendix 05 (Policies)	Policies demonstrating compliance with A3.01, A3.03, A3.04, A3.05, A3.06, A3.07, A3.08, A3.09, and A3.10 as noted in the application. Reference appended documents in the application narrative and label policies by Standard and by source.
Appendix 06 (Admissions)	<ul> <li>a) Blinded sample of correspondence provided to those inquiring about the program, whether provided to them electronically or by paper (A3.11)</li> <li>b) Admission Policies and Procedure TEMPLATE</li> <li>c) Forms to be used to screen student applications or select students for class positions (A3.14)</li> </ul>
Appendix 07 (Published for Enrolled Students)	Information demonstrating compliance with A3.15 as noted in the application and <u>if not available on the web</u> . The program is NOT to include an entire manual in response to a standard about specific content, but only the appropriate pages of the manual labeled with the standard for which the page provides evidence.
Appendix 08 (Program Records)	Institutional and Program Records TEMPLATE
Appendix 09 (Curriculum)	<ul> <li>a) Curriculum Schematic TEMPLATE</li> <li>b) The program <i>competencies</i> (The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities required for PA practice.)</li> <li>c) Documentation of institutional approval of the curriculum including all didactic and clinical components of the program, if approved prior to submission of the application. If this is not provided in the application, the program is required to provide this documentation at the time of the site visit.</li> </ul>
Appendix 10 (Curriculum)	Instructional Objectives as required in body of application supporting evidence of compliance. Create separately named Word documents or folders for each of the B2 standards (clearly labeled by standard and sub-standard) including <u>only</u> the relevant (as related to the standard) <i>instructional objectives</i> , supporting compliance with the standard. These documents must be a composite of all relevant <i>instructional objectives</i> (whatever the source: course syllabi, individual lectures or other) <u>organized by and labeled with the standard</u> they address <u>and</u> <b>identified by course number(s) and course name(s)</b> . <i>Do not</i> include instructional objectives which do not directly address that specific standard or sub-standard. Providing copies of program course syllabi in the application of record <b>does not</b> negate the need for programs to append evidence of compliance in appendices as required throughout the application.
Appendix 11 (SCPEs)	a) Supervised Clinical Practice Experiences TEMPLATE (Excel) b) Elective Experiences Outside the United States TEMPLATE

APPENDIX	CONTENT	
	Program <i>learning outcomes</i> (The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem- solving abilities that have been attained at the completion of a curricular component, course or program.) for <i>supervised clinical practice experiences</i> addressing standards B3.03 a-e.	
Appendix 12 (Curriculum)	<ul> <li>a) program <i>learning outcomes</i> for supervised clinical practice experiences for preventive, emergent, acute, and chronic patient encounters</li> <li>b) program <i>learning outcomes</i> for patients seeking medical care across the life span to include infants, children, adolescents, adults, and the elderly</li> <li>c) program <i>learning outcomes</i> for patients seeking women's health (to include prenatal and gynecologic care)</li> <li>d) program <i>learning outcomes</i> for patients seeking care for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care</li> <li>e) program <i>learning outcomes</i> for patients seeking care for behavioral and mental health conditions</li> </ul>	
	Create a composite document including the program <i>learning outcomes</i> which supports standard B3.03 a-e. <i>Learning outcomes</i> must be organized by and labeled with the sub-standard they address.	
Appendix 13 (Student Evals)	<ul> <li>a) Student Evaluation TEMPLATE</li> <li>b) Blank copy(ies) of the form(s) used by <i>preceptors</i> to evaluate students during <i>supervised clinical practice experiences</i>.</li> </ul>	
Appendix 14 (Self-Study Report)	<ul> <li>a) Appendix 14 SSR, Self-Study Document using ARC-PA provided document</li> <li>b) Appendix A, Timeline for Data Gathering and Analysis TEMPLATE</li> </ul>	
Appendix 15 (Clinical Site Evals)	Forms used by the program to evaluate clinical sites and <i>preceptors</i> used for <i>supervised clinical practice experiences</i> in relation to C2.01	
Appendix 16	Copies of program and/or institutional handbooks/manuals containing policies Providing copies of handbooks/manuals in the application of record does not negate the need for programs to <b>append evidence of compliance in appendices</b> as required throughout the application. The site visitors will NOT search this appendix for evidence of compliance.	
	The handbooks and manuals appended to the program's application will be used by the commission, as needed, as evidence of compliance with the <i>Standards</i> . Although these documents may be updated by the program between the time of application submission and the site visit, they are part of the application of record and are the handbooks and manuals the commission will use to verify compliance with the related standards.	
Appendix 17	<ul> <li>Zip file containing syllabi for standard B1.03 &amp; D1.04 used for ALL courses/rotations in the curriculum that must include at a minimum:</li> <li>course name (academic credit),</li> <li>course description,</li> </ul>	

APPENDIX	CONTENT
	<ul> <li>faculty instructor of record if known,</li> <li>course goal/rationale,</li> <li>outline of topics to be covered,</li> <li>in measurable terms that can be assessed, that guide student acquisition of required <i>competencies</i>,</li> <li>outline of topics to be covered that align with <i>learning outcomes</i> and <i>instructional objectives</i>,</li> <li>methods of student assessment/evaluation, and</li> </ul>
	<ul> <li>plan for grading.</li> <li>The title of each syllabus file should be the course ID, number, and course name.</li> </ul>
	Providing copies of course syllabi in the application of record does not negate the need for programs to <b>append evidence of compliance in appendices</b> as required throughout the application. The site visitors will NOT search this appendix for evidence of compliance.
	The word 'syllabus' is purposefully not defined in the ARC-PA glossary. The Commission expects this information to be defined and published for students in a written or electronic document.
	If the program is under institutional restrictions to include any of the requirements for Standard B1.03 within its course syllabi, then the program must include that information as an appendix to the course syllabi.
	The syllabi appended to the program's application will be used by the commission, as needed, as evidence of compliance with the <i>Standards</i> . Although these documents may be updated by the program between the time of application submission and the site visit, they are part of the application of record and are the syllabi the commission will use to verify compliance with the related standards.
Appendix 18	<ul> <li>a) List of teaching equipment, models, simulators that are available or will be purchased (A1.09)</li> <li>b) List of required texts, subscriptions, references, and equipment (required to be purchased and used by students) (A3.12f)</li> </ul>
Appendix 19 (Fair Practices)	A copy of the content to be published on the program/institution website if institutional policies prevent the program from making its website publicly available prior to accreditation.
support responses	tach other documents in subsequently numbered appendices as needed to
Click here to enter text	Click here to enter text

APPENDIX	CONTENT
Click here to enter text	Click here to enter text
Click here to enter text	Click here to enter text
Click here to enter text	Click here to enter text
Click here to enter text	Click here to enter text

## Statements and Signatures for Provisional Accreditation Application

Enter institution name and Enter program name (collectively, "the Program"); I hereby apply to the Accreditation Review Commission on Education for the Physician Assistant ("ARC-PA") for accreditation of the Program as an Educational Program for the Physician Assistant in accordance with and subject to the procedures and regulations of the ARC-PA. On behalf of the Program, I have read and agree to the conditions set forth in the ARC-PA's most current edition of the *Standards* and other materials describing accreditation and the accreditation process. I authorize the ARC-PA to make whatever inquiries and investigations it deems necessary to verify the contents of this application.

The Program understands that this application and any information or material received or generated by the **ARC-PA** in connection with the accreditation process will be kept confidential and will not be released unless the Program has authorized such release or such release is required by law. However, the fact that the Program is or is not, or has or has not been accredited is a matter of public record and may be disclosed. Finally, the **ARC-PA** may use information from this application for the purpose of statistical analysis and education, provided that the Program's identification with that information has been deleted.

The Program hereby agrees to hold the **ARC-PA**, its officers, commissioners, employees, and agents harmless from any and all actions, suits, obligations, complaints, claims, or damages including, but not limited to, reasonable attorneys' fees, arising out of any action or omission by any of them in connection with this application; the application process; the denial or withdrawal of the Program's accreditation or eligibility for accreditation; or any other action by the ARC-PA.

Notwithstanding the above, should the Program file suit against the ARC-PA, the Program agrees that any such suit shall be brought in a federal or state court in Cook County, Illinois and shall be governed by, and construed under, the laws of the United States and the State of Illinois without regard to conflicts of law. The Program consents to the jurisdiction of such courts in Cook County and agrees that venue in such courts is proper. The Program further agrees that the ARC-PA shall be entitled to all costs, including reasonable attorneys' fees, incurred in connection with the litigation.

THE PROGRAM UNDERSTANDS THAT THE DECISION AS TO WHETHER IT QUALIFIES FOR ACCREDITATION AND ALL OTHER DECISIONS OF THE ARC-PA IN CONNECTION WITH THE ACCREDITATION PROCESS REST SOLELY AND EXCLUSIVELY WITH THE ARC-PA AND THAT THE DECISION OF THE ARC-PA IS FINAL.

#### I HAVE THE AUTHORITY TO ENTER INTO THIS AGREEMENT ON BEHALF OF THE PROGRAM.

The signatures of the chief administrative officer and Program Director attest to the completeness and accuracy of the information provided in this application and supporting materials.

The signatures also acknowledge that the program may not exceed the maximum numbers of students as identified in this application.

## ON BEHALF OF THE PROGRAM, I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS AND I INTEND FOR THE PROGRAM TO BE LEGALLY BOUND BY THEM.

I understand and agree that the Program will be subject to an adverse accreditation action which could include denial of accreditation or withdrawal of accreditation, and that future eligibility for accreditation may be denied in the event that any of the statements or answers made in this submitted response are false or in the event that the Program violates any of the policies governing accredited programs.

Chief Administrative Officer of Program's Sponsoring Institution: As listed in App 1a Institutional and Program Data Sheet Enter name

The name that appears here is deemed an electronic signature.

Program Director:Enter nameThe name that appears here is deemed an electronic signature.

Enter date

Enter date

## **Material List for Provisional Accreditation Visits**

The supplemental materials required for the site visit team must be available to the site visitors at least seven calendar days prior to the visit. While not all materials listed will necessarily be reviewed by site visitors, the following materials **must** be available for review prior to and during the site visit. Site visitors may not need to review all these materials and may request additional materials/documents **during the visit**. See "Organizing Materials Using a Document Sharing Application" document on the ARC-PA website (<u>http://www.arc-pa.org/provisional-accreditation/provisional-accreditation-site-visit-schedule/</u>).

- 1. Copies of each document that support the program's compliance with the Standards must be readily available for site visitors as directed in the Organizing Materials Using a Secure Document Sharing Application instructions and as requested by the commission.
- 2. Copies of ALL signed agreements with other entities providing didactic or supervised clinical practice experiences must be readily available for site visitors and as requested by the commission.
- 3. If number of clinical placements are not included in the signed affiliation agreements, the program must provide another form of documentation to verify sufficient clinical placements.
- 4. Source documents for data summaries and analysis within the application and appendices must be readily available for site visitors and as requested by the commission.
- 5. Data and activities presented in ARC-PA TEMPLATES and program-designed graphic presentations must be verifiable. Documents and materials in support of entries must be available for review and as requested by the commission.
- 6. Documents identified in the Material List for Provisional Accreditation Visits are available at the end of the application.
  - 1) Program promotional materials and catalogs, access to the program's website.
  - 2) Three-year (current and next two years) line item operational program budget
  - 3) Faculty handbooks/manuals containing relevant policies.
  - 4) Sample of student health forms, if used
  - 5) Materials used to screen applicants for admission to the program.
  - 6) Listing of student record content to be maintained by program office.
  - 7) Faculty records containing written job descriptions that include duties and responsibilities specific to each faculty member and CVs for *principal faculty* employed to date.
  - 8) Documentation of institutional approval of the curriculum including all didactic and clinical components of the program, if **NOT** submitted in the application of record.
  - 9) Spreadsheet (or similar documentation) of all active preceptors (physicians, physician assistants and other licensed health care professionals) who will be providing the *supervised clinical practice experiences/rotations*, their area of instruction, and name of their associated clinical site as identified in Appendix 11a SCPEs. For each preceptor, provide current licensure information, including expiration dates. In addition, and as appropriate, provide certification body and expiration dates. If the number of clinical placements is not included in the signed affiliation

agreements, the program must provide another form of documentation at the time of the site visit to verify sufficient clinical placements.

- 10) Current signed agreements with all institutions involved in the didactic and clinical components of the program.
- 11) Signed agreements with clinical facilities and individuals who plan to participate *in supervised clinical practice experiences,* in numbers *sufficient* to accommodate students for the proposed maximum class size.
- 12) Sample instructor and course evaluation instruments to be completed by students.
- 13) Preceptor files to include evidence of current licensure, current board certification, number of clinical slots for the proposed maximum class size, program's documentation of initial and ongoing evaluation to include verification that students will be able to achieve program learning outcomes in the practice area (B3.04a-d; B3.07a-f) and clinical sites (C2.01a-c)
- 14) Proposed student exit/ graduate evaluation of the curriculum and program effectiveness
- 15) Minutes from program committee meetings which may include admissions, curriculum, self-study, program planning and development (i.e., advisory committee)
- 16) List of required texts / resources for students
- 17) Additional materials that support data in the application, but were not included with the application.

# Glossary

### **NOTE:** Where terms are not defined, their definitions are at the discretion of the ARC-PA.

TERM	DEFINITION	
ABMS	American Board of Medical Specialties.	
Accurately	Free from error.	
Active	Having practical operation or results, characterized by action rather than by contemplation or speculation.	
Administrative Support (Staff)	Those individuals providing administrative, secretarial or clerical help to the program. Administrative support staff do not include other staff working in or with the program who are assigned a traditional faculty role or those who function to provide technical assistance for instructional technology or data analysis.	
Advanced Placement	A waiver of required coursework included in the PA curriculum for applicants to the program and/or a waiver of required coursework included in the PA curriculum for currently enrolled students in the program which results in the student advancing in the curriculum without completing required curriculum components at the sponsoring institution.	
Analysis	Study of compiled or tabulated data interpreting correlations and trends, with the subsequent understanding and conclusions used to validate current practices or make changes as needed for program improvement.	
AOA	American Osteopathic Association	
Attrition	A reduction in number.	
	Student attrition: the permanent loss of a matriculated student from the course of study in a physician assistant program.	
	Faculty attrition: the loss of a faculty member from a position assigned to physician assistant program.	
Clinical Affiliates	Clinical practice sites used by the program to provide supervised clinical practice experiences for students.	
Comparable	Similar but not necessarily identical.	
Competencies	The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities required for PA practice.	
Consultant	An individual from within or outside the sponsoring institution who provides advice to the program, but who is not hired by the program to serve as program, principal or instructional faculty or staff.	
Course Director	Faculty member primarily responsible for the organization, delivery and evaluation of a course.	
Deceleration	The loss of a student from the entering cohort, who remains matriculated in the physician assistant program.	
Distant Campus	A campus geographically separate from the main program at which didactic, preclinical or clinical instruction occurs for all or some of the students matriculated to that campus.	

TERM	DEFINITION
Distant Education	A formal educational process in which 50% or more of the required content/time/credit hours, excluding supervised clinical practice experiences, may be accrued when the student and instructor/faculty are not in the same physica location at the same time. The interaction may be synchronous or asynchronous.
Diversity	Differences within and between groups of people that contribute to variations in habits, practices, beliefs and/or values. The inclusion of different people (including but not limited to gender and race/ethnicity, age, physical abilities, sexua orientation, socioeconomic status) in a group or organization. Diversity includes a the ways in which people differ, and it encompasses all the different characteristic that make one individual or group different from another.
Effectiveness	The degree to which objectives are achieved and the extent to which problems are solved.
Elective Rotation	Supervised clinical practice experiences that may differ by student and which allow students to gain exposure to or deeper understanding of medical specialties related to their clinical or academic areas of interest.
Equity	The implementation of resources that improve or eliminate the remediable differences among diverse groups for all to achieve academic success.
Equivalent	Resulting in the same outcomes or end results.
Formative Evaluation	Intermediate or continuous evaluation that may include feedback to help student in achieving goals.
Frequent	Occurring regularly at brief intervals.
Goals	The end toward which effort is directed.
Health record(s)	The primary legal record documenting the health care services provided to a person in any aspect of the health care system. This term includes routine clinical or office records, records of care in any health related setting, preventive care, lifestyle evaluation, research protocols and various clinical databases.
Inclusion	The active, intentional and ongoing engagement with diversity in ways that increase awareness, content knowledge, cognitive sophistication and empathic understanding of the complex ways individuals interact within systems and institutions. The act of creating involvement, environments and empowerment in which any individual or group can be and feel welcomed, respected, supported, and valued to fully participate.
Instructional Faculty	Individuals providing instruction or supervision during the didactic and/or clinical phases of the program, regardless of length of time of instruction, faculty status or rank.
Instructional Objectives	Statements that describe observable actions or behaviors the student will be able to demonstrate after completing a unit of instruction.
Interprofessional	Practice involving individuals from different health care professions workin
practice	together to provide patient centered care in a collaborative manner.
earning Outcomes	The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities that have bee attained at the completion of a curricular component, course or program.
Waximum Class Size	Maximum potential number of students enrolled for each admission cycle a approved by the ARC-PA.
Medical director	Physician assigned to the PA program and who reports to the program director. The FTE assigned to the medical director is specific to this position/role. Supports the program in ensuring that didactic and clinical instruction meet current practic standards as they relate to the role of the PA in providing patient care.

TERM	DEFINITION
Must	The term used to designate requirements that are compelled or mandatory. "Must'
Iviust	indicates an absolute requirement.
NCCPA	National Commission on Certification of Physician Assistants
PANCE	Physician Assistant National Certification Exam administered by the National Commission on Certification of Physician Assistants.
	The quality or state of being in good health especially as an actively sought goal
Personal wellness	It includes choices and activities aimed at achieving physical vitality, sense of
reisonal weimess	accomplishment, and personal fulfillment.
	Any instructional faculty member who provides student supervision during
Preceptor	supervised clinical practice experiences.
	Those faculty working at least 50% FTE with primary academic responsibility
Principal Faculty	assigned to the PA program who report to the program director.
Program Faculty	The program director, medical director, principal faculty and instructional faculty
	Any individuals who have requested information about the program or submittee
Prospective Students	information to the program.
Published	Presented in written or electronic format.
	Made accessible to others in a timely fashion via defined program or institution
Readily Available	procedures. Navigation to digital content should take little effort or time.
	Middle States Commission on Higher Education (MSCHE)
	New England Commission of Higher Education (NECHE)
Decomized Decional	Higher Learning Commission (HLC)
Recognized Regional Accrediting Agencies	Northwest Commission on Colleges and Universities (NWCCU),
Acciediting Agencies	Southern Association of Colleges and Schools- Commission on Colleges (SACS COC)
	Western Association of Schools and Colleges- Accrediting Commission fo
	Community & Junior Colleges (WASC-ACCJC)
	WASC Senior College & University Commission (WSCUC)
	The program defined and applied process for addressing deficiencies in a student's
Remediation	knowledge and skills, such that the correction of these deficiencies is measurable
	and can be documented.
Required Rotation(s)	Rotations which the program requires all students to complete. While an elective
	rotation may be one of the required rotations, it is not included in this definition. A supervised clinical practice experience for which there are published expected
Rotation	<i>A supervised clinical practice experience for which there are published expected learning outcomes</i> and student evaluation mechanisms.
	The term used to designate requirements that must be met unless there is a
	compelling reason, acceptable to the ARC-PA, for not complying. A program of
Should	institution may be cited for failing to comply with a requirement that includes the
	term 'should'.
	Services aimed at helping students reach their academic and career goals. Such
Student Services	services typically include academic advising, tutoring, career services, financial aid
	student health, computing and library resources and access.
Subspecialists	A narrow field of practice within its medical specialty as defined by ABMS and AOA
Succinctly	Marked by compact, precise expression without wasted words.
Sufficient	Enough to meet the needs of a situation or proposed end.
	An assessment of the learner conducted by the program to ensure that the learner
	has the medical knowledge, interpersonal, clinical and technical skills, professiona
Summative Evaluation	behaviors, and clinical reasoning and problem-solving abilities required for entry
	into the profession. This evaluation must consist of more than a listing and review
	of student outcomes otherwise obtained in the course of the program.

TERM	DEFINITION
Supervised Clinical Practice Experiences	Supervised student encounters with patients that include comprehensive patient assessment and involvement in patient care decision making and which result in a detailed plan for patient management
Teaching Out	Allowing students already in the program to complete their education or assisting them in enrolling in an ARC-PA accredited program in which they can continue their education.
Technical Standards	Nonacademic requirements for participation in an educational program or activity. They include physical, cognitive and behavioral abilities required for satisfactory completion of all aspects of the curriculum and for entry into the profession.
Timely	Without undue delay; as soon as feasible after giving considered deliberation.
United States	The fifty States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, Guam, the Virgin Islands, American Samoa, Wake Island, the Midway Islands, Kingman Reef and Johnston Island. A program may satisfy the requirement of <i>supervised clinical practice</i> <i>experiences</i> through medical facilities located in the <i>United States</i> and through a limited number of medical facilities that are accredited by the United States Joint Commission and operated by the American government under a signed Status of Forces Agreement with the host nation.

#### Saving and Submission of Provisional Accreditation Application and Appendices

After you have completed the application and each appendix, use the "Save" or "Save As" command under the File menu. The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT SAVE AS PDF.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget Name is to be saved in the Appendix 01 folder.

The program must submit an electronic copy of the application to include:

- Complete application and all appendices.
- Completed institutional signature page. (Electronically signed is acceptable.)

The application must include all appendices as required and be completed according to the instructions provided. Failure to complete all components of the application exactly as instructed (narratives, templates, program-created documents, etc.) and/or failure to submit a complete application as required in the instructions may result in one or more of the following actions by the ARC-PA:

- Removal of the program from the current ARC-PA agenda
- Requirement for application resubmission
- Placement of the program on administrative probation
- Reconsideration of the program's current accreditation status

Determination of the appropriate action(s) is solely at the discretion of the ARC-PA and is not subject to appeal.

The program will submit the application electronically. The ARC-PA will contact the program approximately one month prior to the due date of the application with instructions on how to upload.

Contact the ARC-PA offices at <u>accreditationservices@arc-pa.org</u> if unclear about the directions.

Place the following documents for **Appendix 01** in this folder:

- a) Program Datasheet TEMPLATE
- b) Program Budget TEMPLATE
- c) Physical Facilities TEMPLATE

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE ARC-PA FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 1b Program Budget Name is to be saved in the Appendix 01 folder.



# Appendix 1 for Provisional Accreditation Application

# **Institutional and Program Datasheet**

Today's date: Enter date

Official program name: (To be listed on Certificate of Accreditation) Enter program name Address: Enter address including city, state and zip Program phone #: Enter phone # Program fax #: Enter fax # Program web site address:

Enter web site address

# E-mail address:

Enter email address

# Institutional sponsor: (entity regionally accredited):

Enter sponsor

Type of institution: Choose institution type

Institution description: Choose description

Financial type: Choose financial type

Institutional accreditation<sup>1</sup>: Choose accrediting agency

Program institutionally located in: Choose location

Middle States Association of Colleges and Schools- Commission on Higher Education (MSA-CHE) New England Association of Schools and Colleges- Commission on Institutions of Higher Education (NEASC-CIHE) North Central Association of Colleges and Schools- The Higher Learning Commission (NCA-HLC) Northwest Commission on Colleges and Universities (NWCCU), Southern Association of Colleges and Schools- Commission on Colleges (SACS)

Western Association of Schools and Colleges- Accrediting Commission for Senior Colleges and Universities (WASC-ACSCU)

# Chief Administrative Officer of the Sponsoring Institution: (to receive copies of accreditation correspondence)

\*\*Notify the ARC-PA regarding any changes immediately via email to accreditationservices@arc-pa.org \*\*

Name prefix:	Choose an item	
First name:	Enter first name Enter middle name	
Middle name (or initial): Last Name:	Enter last name	
Academic credentials:	Enter credentials	
Institution title:	Choose an item or enter new title	
Address:	Enter address Enter city, Enter state Enter zip	
Phone #:	Enter phone #	
Fax #:	Enter fax #	
E-mail address:	Enter email address	

# Program Director Reports To:

\*\*Notify the ARC-PA regarding any changes immediately via email to accreditationservices@arc-pa.org \*\*

Name prefix:	Choose an item
First name: Middle name (or initial):	Enter first name Enter middle name
Last Name:	Enter last name
Academic credentials:	Enter credentials
Institution title:	Choose an item or enter new title
Address:	Enter address Enter city, Enter state Enter zip
Phone #:	Enter phone #
Fax #:	Enter fax #
E-mail address:	Enter email address

## **Program Director:**

- A2.06 The program director *must* be a  $PA^2$ .
  - a) The program director *must* possess at least three years of full-time higher education experience at the time of appointment.<sup>3</sup>
  - b) The program director *must* be assigned to the program on a 12-month full time basis and at least 80% of that time *must* be devoted to academic and administrative responsibilities in support of the program.
  - c) The program director *must* hold current or emeritus *NCCPA* certification status.

\*\*Notify the ARC-PA regarding any changes immediately via email to accreditationservices@arc-pa.org \*\*

Name prefix:	Choose an item
First name: Middle name (or initial): Last Name:	Enter first name Enter middle name Enter last name
Academic credentials:	Enter credentials
Program title:	Enter title
FTE% with program:	Enter %
Address:	Enter address Enter city, Enter state Enter zip
Phone #:	Enter phone #
Fax #:	Enter fax #
E-mail address:	Enter email address

# Medical Director(s):

Name prefix:	Choose an item
First name: Middle name (or initial): Last Name:	Enter first name Enter middle name Enter last name
Academic credentials:	Enter credentials
Program title:	Enter title
FTE% with program:	Enter %
Address:	Enter address Enter city, Enter state Enter zip

 $<sup>^2</sup>$  Program directors appointed before 9/1/2020 should be a physician assistant, those appointed on or after 9/1/2020 must be a physician assistant.

<sup>&</sup>lt;sup>3</sup> Program directors appointed before 9/1/2020 should have at least 3 years higher education experience at the time of appointment, those appointed on or after 9/1/2020 must have at least 3 years higher education experience at the time of appointment.

Name prefix:	Choose an item	
First name: Middle name (or initial): Last Name:	Enter first name Enter middle name Enter last name	C
Academic credentials:	Enter credentials	
Program title:	Enter title	
FTE% with program:	Enter %	
Address:	Enter address Enter city, Enter state Enter zip	

# **Principal Faculty:**

A2.02 The program *must* have:

- a) *program faculty* that include the program director, *principal faculty, medical director*, and *instructional faculty*, and
- b) at least three FTE *principal faculty*, of which two FTE *principal faculty must* be PAs who are currently *NCCPA-certified*.

Principal faculty are defined as: Those faculty working at least 50% FTE with primary academic responsibility assigned to the PA program who report to the program director.

Name prefix:	Choose an item
First name: Middle name (or initial): Last Name:	Enter first name Enter middle name Enter last name
Academic credentials:	Enter credentials
Program title:	Enter title
FTE% with program:	Enter %
Address:	Enter address Enter city, Enter state Enter zip
Phone #:	Enter phone #
Fax #:	Enter fax #
E-mail address:	Enter email address

Name prefix:	Choose an item	
First name: Middle name (or initial):	Enter first name Enter middle name	
Last Name:	Enter last name	
Academic credentials:	Enter credentials	
Program title:	Enter title	
FTE% with program:	Enter %	
Address:	Enter address	
	Enter city, Enter state Enter zip	
Phone #:	Enter phone #	
Fax #:	Enter fax #	
E-mail address: Enter em	ail address	

Name prefix:	Choose an item
First name:	Enter first name
Middle name (or initial):	Enter middle name
Last Name:	Enter last name
Academic credentials:	Enter credentials
Program title:	Enter title
FTE% with program:	Enter %
Address:	Enter address
	Enter city, Enter state Enter zip
Phone #:	Enter phone #
Fax #:	Enter fax #
E-mail address:	Enter email address

Name prefix:	Choose an item
First name: Middle name (or initial): Last Name:	Enter first name Enter middle name Enter last name
Academic credentials:	Enter credentials
Program title:	Enter title
FTE% with program:	Enter %
Address: Phone #: Fax #: E-mail address:	Enter address Enter city, Enter state Enter zip Enter phone # Enter fax # Enter email address
Name prefix:	Choose an item
First name: Middle name (or initial): Last Name:	Enter first name
Academic credentials:	Enter credentials
Program title:	Enter title
FTE% with program:	Enter %
Address: Phone #: Fax #: E-mail address:	Enter address Enter city, Enter state Enter zip Enter phone # Enter fax # Enter email address
Name prefix:	Choose an item
First name: Middle name (or initial): Last Name:	Enter first name Enter middle name Enter last name
Academic credentials:	Enter credentials
Program title:	Enter title
FTE% with program:	Enter %
Address: Phone #:	Enter address Enter city, Enter state Enter zip Enter phone #
Fax #: E-mail address:	Enter fax # Enter email address

- A2.18 Administrative support for the program must be:
  - a) at least a 1.0 FTE position dedicated exclusively to the program, and
  - b) *sufficient* in number to manage the administrative responsibilities consistent with the organizational complexity and total enrollment of the program.

Name prefix:	Choose an item	
Name:	Enter name	
Program title:	Enter title	
Phone #:	Enter phone #	
E-mail address:	Enter email address	
FTE% with program:	Enter %	
Name prefix:	Choose an item	
Name:	Enter name	
Program title:	Enter title	
Phone #:	Enter phone #	
E-mail address:	Enter email address	
FTE% with program:	Enter %	
Name prefix:	Choose an item	
Name:	Enter name	
Program title:	Enter title	
Phone #:	Enter phone #	
E-mail address:	Enter email address	
FTE% with program:	Enter %	

# Complete the following program data:

Classes begin (list month/day/year):	Enter month/day/year	
Maximum Class Size planned:	Enter number	
Degree(s) to be awarded (Complete name of degree	e & acronym): Enter degree	
Length of the entire ARC-PA accredited program (mo DO NOT include pre-requisites:	onths) Enter # months	
Length of the pre-clinical (didactic) phase component	nt of program (months): Enter # months	
Length of the <u>clinical phase</u> component of program	(months): Enter # months	
Anticipated date (month/year) of the start of <i>super</i> first class:	vised clinical practice experiences (SCPEs) for the Enter month/year	
Anticipated date (month/year) of the start of the se	econd class: Enter month/year	
Proposed date (month/year) of program completion first class admitted:	n for the Enter month/year	
Estimated total tuition & fees that student incurs foResident:\$ Enter amountNon-resident:\$ Enter amount	or the <u>entire ARC-PA accredited</u> PA Program:	

Other relevant Institutional or program data that you wish to include:

Enter text

# Appendix 1c for Provisional Accreditation Application Institutional Resources TEMPLATE

Program Name:

Identify major sources of financial support and expenditures for the program\_by completing the table. Enter whole dollars only.

Standard A1.06

\*\* Insert additional funding sources and/or expenditures

Month FY Begins:	Past FY	Current FY	Projected Next FY
Source of Funds			
Tuition and Fees assigned to the program			
State Appropriation			
Sponsoring Institution			
State Grants/Contracts			
Federal Grants/Contracts			
Private Foundation Specify here:			
Indirect Cost Recovery			
Endowment			
Gifts			
**			
**			
**			
Total	\$ -	\$-	\$-
Expenditures			
Faculty* Salaries and Benefits. List the			
number of FTE Faculty here:			
Staff* Salaries and Benefits. List the			
number of FTE Staff here:			
Operations			
Operations			
Faculty Development Institution Tax			
**			
**			
**			
Total	¢	¢	ć
Total	\$-	\$-	\$-

\*Faculty and Staff salaries and benefits must reflect the total for all program faculty/staff assigned to the program and whose salary lines are listed in the program budget. If an individual is a parttime FTE with the program, only the percentage of the salary and benefits included on the program budget should be included in the total.

# Appendix 1c for Provisional Accreditation Application

# Physical Facilities **TEMPLATE**

Program: Enter name of program

## **Complete** the following table:

RESOURCE	Dedicated/Shared	Seating Capacity
Classrooms	Choose dedicated or shared	Enter capacity
Lab (wet) space, i.e. anatomy	Choose dedicated or shared	Enter capacity
Physical diagnosis lab space	Choose dedicated or shared	Enter capacity
Computer lab	Choose dedicated or shared	Enter capacity
Faculty offices	Choose dedicated or shared	N/A
Medical director office	Choose dedicated or shared	N/A
Enter space	Choose dedicated or shared	Enter capacity
Enter space	Choose dedicated or shared	Enter capacity
Enter space	Choose dedicated or shared	Enter capacity

If resource space is shared, provide narrative describing how space is secured by program when needed.

Provide narrative here

### Question

## Explain all "NO" answers below

Each faculty has ready access to a PC or laptop	Choose yes or no
A medical library is available to faculty and students (either on	Choose yes or no
campus and/or virtually)	
The program has its own meeting/conference room	Choose yes or no
The program has space for confidential academic counseling of	Choose yes or no
students by faculty	
The program has secure storage for student files	Choose yes or no

Explain all "no" answers

Place the following program-created documents for **Appendix 02** in this folder:

- a) One copy of a signed agreement between the sponsoring institution and other institution involved in providing academic instruction, if applicable
- b) Two copies of signed agreements between the sponsoring institution/PA program and a clinical affiliate <u>providing supervised clinical practice experiences</u>

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE ARC-PA FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 2b Agreement Name is to be saved in the Appendix 02 folder.

Place the following program-created documents for **Appendix 03** in this folder:

 a) Diagram or description of the organizational relationship of the PA program to the sponsoring institution. (Include information regarding who has immediate administrative authority over the program director and that person's position in the administrative structure of the sponsoring institution.)

<u>If not available on the web and provided as a link in the application</u>, then the program must provide copies of document(s) which support compliance with standards:

- b) A1.02g: how the institution demonstrates responsibility for addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs
- c) A1.02i: Institutional policies and procedures for processing faculty grievances and allegations of harassment.
- d) A1.02j: Institutional policies and procedures for processing student allegations of harassment.
- e) A1.02k: Institutional policies and procedures for refunds of tuition and fees

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE ARC-PA FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 3a Org Chart Name is to be saved in the Appendix 03 folder.

Place the following documents for **Appendix 04** in this folder:

- a) Diagram or description of the organizational structure of the PA program, to include at a minimum, the program director, *medical director*, *principal faculty* and *administrative support staff*
- b) Written job descriptions AND Curricula Vitae, using ARC-PA CV TEMPLATE, for:
  - Program director
  - Medical director
  - *Principal faculty* (Job descriptions include duties and responsibilities specific to each principal faculty member)

### c) Personnel Responsibilities TEMPLATE

- d) Mission of the institution and mission of the program, if not available on web.
- e) Program goals, if not available on web.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 4c Personnel Resp Template Name is to be saved in the Appendix 04 folder.



#### Updated 12.2021

### Faculty Curriculum Vitae TEMPLATE

Program: Enter name of program

**Complete** ARC-PA Faculty Curriculum Vitae TEMPLATE for the program director, *medical director* and *principal faculty*.

CV's to be available on site for *instructional faculty* should use the institution's academic format.

Date Form Completed: Click here to enter a date

Last Name: Last name	MI: MI	First Name: First name	
Academic Credentials: Credentials			
*Position in Program: Position			% FTE: % FTE

### **Contact Information**

Complete Program Office Mailing Address	
Program name	
Institution	
Address 1	
Address 2	
City, State, Zip	
Daytime phone: XXX-XXX-XXXX	
Email at program: Email address	

**Education** Include baccalaureate, professional education (to include PA), and graduate academic education. Please list from most recent to earliest.

Institution	Course of Study	Credential/Degree Earned	Year Awarded
Institution	Course of study	Credential earned	Year
Institution	Course of study	Credential earned	Year
Institution	Course of study	Credential earned	Year
Institution	Course of study	Credential earned	Year
Institution	Course of study	Credential earned	Year
Institution	Course of study	Credential earned	Year
Institution	Course of study	Credential earned	Year
Institution	Course of study	Credential earned	Year
Institution	Course of study	Credential earned	Year
Institution	Course of study	Credential earned	Year

Graduate Medical Education / Postgraduate Clinical PA Program Education (include all physician or

physician assistant residencies and fellowships) Please list from most recent to earliest.

Institution	Specialty	Credential/Degree Earned	Year Awarded	
Institution	Specialty	Credential earned	Year	
Institution	Specialty	Credential earned	Year	
Institution	Specialty	Credential earned	Year	
Institution	Specialty	Credential earned	Year	
Institution	Specialty	Credential earned	Year	
Institution	Specialty	Credential earned	Year	
Institution	Specialty	Credential earned	Year	
Institution	Specialty	Credential earned	Year	

Academic Appointments - List the past five positions, beginning with your current position.			
Start Date	End Date	Institution Name and Description of Position(s)	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	

Non-Acader	Non-Academic Positions - List the past five positions beginning with your current position		
Start Date	End Date	Institution Name and Description of Position(s)	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	
xx/xx/xxxx	xx/xx/xxxx	Institution Name and Description	

Certifying Body (abbreviation acceptable)	Initial Certificatio Year	n Next Re-Certification Year
Certifying body	Year	Year

Licensure Information		
Title	State	Date of Expiration
Title	State	xx/xx/xxxx
Title	State	xx/xx/xxxx

Licensure Information		
Title	State	Date of Expiration
Title	State	xx/xx/xxxx
Title	State	xx/xx/xxxx
Title	State	xx/xx/xxxx

Other: Click here to enter text

# Appendix 4c for Provisional Accreditation Application

## Personnel Responsibilities **TEMPLATE**

Program: Enter name of program

**List** below the program director, *medical director*, *principal faculty* and *administrative support staff*. Identify their responsibilities by the list provided.

				I	ndivio	dual N	lame	and T	itle (u	ise ab	brevia	ations	5)			
Responsibilities	Enter name and title															
Academic counseling																
Administration																
Administrative support																
Accreditation activities																
Applicant selection																
Clinical site development																
Clinical site monitoring																
Curriculum coordination																
Curriculum development																
Curriculum evaluation																
Fiscal management																

		1	1	I	ndivio	dual N	lame	and T	itle (u	ise ab	brevi	ations	s)	1	1	
Responsibilities	Enter name and title															
Mission statement review/revision													P			
Program evaluation																
Program competencies review/revision																
Program goals review/revision																
Remedial instruction																
Student recruitment																
Student performance evaluation																
Teaching and instruction																
Enter other																
Enter other																
Enter other																
Enter other																

Comments: Click here to enter text

Place the following program-created document for **Appendix 05** in this folder:

Policies demonstrating compliance with A3.01, A3.03, A3.04, A3.05, A3.06, A3.07, A3.08, A3.09, and A3.10 as noted in the application. Reference appended documents in the application narrative and label policies by Standard and by source.

The program is NOT to include an entire manual/handbook in response to a standard about specific policy content, but only the appropriate page(s) labeled with the standard for which the page provides evidence.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. **Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.** 

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 5A Policy A301 Name is to be saved in the Appendix 05 folder.

Place the following document(s) for **Appendix 06** in this folder:

a) Blinded sample of correspondence provided to those inquiring about the program, whether provided to them electronically or by paper (A3.11)

### b) Admission Policies and Procedure TEMPLATE

c) Forms to be used to screen student applications or select students for class positions (A3.14)

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 6b AdmissPolandProc Name is to be saved in the Appendix 06 folder.

### Appendix 6b for Provisional Accreditation Application

### Admission Policies and Procedures TEMPLATE

Program: Enter name of program

**1. Provide** the hyperlink(s) where defined and *published* practices of the institution and program relating to admissions are found. Click here to enter text.

IF the information is **not** on the web site, provide copies of documents in this appendix. (DO NOT provide copies if available on web)

2. Include forms used to screen applications and select candidates for the class in Appendix 6.

Save the document(s) in this folder. Important Note – Abbreviate file names so not to exceed 20 characters, including spaces. For example: App 6c Screen Form Name is to be saved in the Appendix 6 folder.

**Complete** the following:

Admission screening measures include which of the following?

application	standardized exams (i.e., GRE)	community service
personal statement	reference letters/forms	CASPA
essays submitted with application	GPA	personal interviews
review of transcripts	healthcare experience	narrative writing at time of interview
Enter other	Enter other	Enter other
Enter other	Enter other	Enter other

**Complete** the following regarding how individuals participate in the selection process.

Individual	Application Screening	Interviewing	Final selection decision
Program Director			
Medical Director			
Principal faculty			
Didactic instructors			
Clinical preceptors			
Students			
Alumni			

Individual	Application Screening	Interviewing	Final selection decision
Community organizations			
representatives			
PA employers			
Community PAs			
Community MDs/DOs			
Program admission staff			
Institutional representatives:			
(specify below)			
Enter institutional reps			
Enter institutional reps			
Other (specify below)			
Enter other			
Enter other			

# Additional Comments:

Click here to enter text

Place the following program-created document(s) for **Appendix 07** in this folder:

Information demonstrating compliance with A3.15 as noted in the application and <u>if not available on</u> <u>the web</u>.

The program is NOT to include an entire manual in response to a standard about specific content, but only the appropriate pages of the manual labeled with the standard for which the page provides evidence.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 7a Admission Info A315a Name is to be saved in the Appendix 07 folder.

Place the following document for **Appendix 08** in this folder:

### Completed Institutional and Program Records TEMPLATE

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 8 InstProgRecords Name is to be saved in the Appendix 08 folder.

# **Appendix 8** for Provisional Accreditation Application

# Institutional and Program Records **TEMPLATE**

# **Complete** the following:

Institutional and Program R	ecords TEI	MPLATE		
Program: Enter name of progra	am			
<b>complete</b> the following:				
<b>D</b>	-	itained: s/no	program f	Where Maintained: iles or elsewhere in institution
Document		<b>If yes,</b> for how long		If elsewhere in institution, specify where
itudent admission record	Select	Enter text	Select	Enter where maintained
esults of selection terviews	Select	Enter text	Select	Enter where maintained
Advanced placement met	Select	Enter text	Select	Enter where maintained
tudent performance in rogram	Select	Enter text	Select	Enter where maintained
vidence student has met ompletion requirements	Select	Enter text	Select	Enter where maintained
CPE assignments	Select	Enter text	Select	Enter where maintained
ademic advising records	Select	Enter text	Select	Enter where maintained
sciplinary action records	Select	Enter text	Select	Enter where maintained
mediation records	Select	Enter text	Select	Enter where maintained
smissal records	Select	Enter text	Select	Enter where maintained
udent health records	Select	Enter text	Select	Enter where maintained
surance of health eening	Select	Enter text	Select	Enter where maintained
surance of immunization quirements	Select	Enter text	Select	Enter where maintained
aculty teaching assignments	Select	Enter text	Select	Enter where maintained
culty job descriptions	Select	Enter text	Select	Enter where maintained
incipal faculty CVs	Select	Enter text	Select	Enter where maintained
urse director CVs	Select	Enter text	Select	Enter where maintained
ogram committee minutes becify below)				
Enter text	Select	Enter text	Select	Enter where maintained
Enter text	Select	Enter text	Select	Enter where maintained
Enter text	Select	Enter text	Select	Enter where maintained
ther: Enter text	Select	Enter text	Select	Enter where maintained
ther: Enter text	Select	Enter text	Select	Enter where maintained

Comments: Click here to enter text

Place the following document(s) for **Appendix 09** in this folder:

### a) Completed Curriculum Schematic TEMPLATE

- b) The program defined *competencies* (The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities required for PA practice.)
- c) Documentation of institutional approval of the curriculum including all didactic and clinical components of the program, if approved prior to submission of the application. If this is not provided in the application, the program is required to provide this documentation at the time of the site visit.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 9b Program Competencies Name is to be saved in the Appendix 09 folder.

### Appendix 9a for Provisional Accreditation Application

### Curriculum Schematic TEMPLATE

Program: Enter name of program

### **Complete** the two tables below.

**Table One.** Use the codes provided to present a monthly calendar schematic representation of the entire program. Only include coursework for the PA program. Do not include any pre-requisite courses or post graduation coursework that some students may take.

D Preclinical/DidacticSCPE Supervised Clinical Practice ExperiencesV Vacation, breaks

In the sample 29-month program below, the program begins in July. In the first year of the program students have preclinical/didactic content. There is vacation in December. Vacation in July of the second year is followed by 15 months of *SCPEs*. There is a one-month period of specialty lectures (didactic instruction) in July of year 3.

					SAMI	PLE PROC	GRAM					
Year	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
1	D	D	D	D	D	V	D	D	D	D	D	D
2	V	SCPE	SCPE	SCPE	SCPE	SCPE	SCPE	SCPE	SCPE	SCPE	SCPE	SCPE
3	D	SCPE	SCPE	SCPE	SCPE							
4					r							
5												

**Comments:** Students have a 2 week break in December year 1 and a 1 week break in July year 2

**Note:** Begin the table in the top row with the month your program begins. Be sure to add the month abbreviation.

	Applicant Program											
Year	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month
1	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select
2	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select
3	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select
4	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select
5	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select	Select

**Comments:** Click here to enter text

Table Two.Enter all required didactic and clinical courses in the curriculum, (by course name and number)sequentially as they occur in the program. Use the codes provided to describe the type of course content.

**D** Preclinical/ Didactic

**SCPE** Supervised Clinical Practice Experiences

Only include coursework for the PA program curriculum. Do not include any pre-requisite courses or postgraduation coursework that some students may take.

In the sample below, only selected courses are shown for each year of the program to demonstrate how information should be entered. The program must enter all courses offered in the PA curriculum. For SCPEs which may not occur in the same order for all students, list in a potential sequence.

The sample program below begins in July. In the first year of the program students have preclinical/didactic content. Supervised clinical practice experiences occur from August year 2.

	SAMPLE P	ROGRAM	1	
Program Year	Course # and Name	D/ SCPE	Start Date (Month/Program Year)	End Date (Month/Program Year)
1	PA 234 Introduction to the Profession	D	July /1	October/1
1	AN 300 Human Anatomy	D	August/1	October/1
1	PY 444 Human Physiology	D	September/1	November/1
1	PA 300 Physical Diagnosis	D	September/1	December/1
1	PA 444 Clinical Medicine 1	D	January /1	March/1
1	PA555 Pharmacology	D	January/1	June/1
1	PA 445 Clinical Medicine 2	D	March/1	May/1
	Other courses entere	d for actu	al program	
2	PA 661 Internal Medicine	SCPE		
3	PA662 Pediatrics	SCPE		
3	PA 663 General Surgery	SCPE		
3	PA 567 Lecture Series	D	July/3	July/3
	Other courses entere	d for actu	al program	

**Comments:** All rotations start in August of the second year for all students. Sequences vary for each student.

Program Year	Course Name and #	D/ SCPE	Start Date (Month/Program Year)	End Date (Month/Program Year)
Select	Course # and Name	Select	Start Date	End Date
Select	Course # and Name	Select	Start Date	End Date
Select	Course # and Name	Select	Start Date	End Date
Select	Course # and Name	Select	Start Date	End Date
Select	Course # and Name	Select	Start Date	End Date
Select	Course # and Name	Select	Start Date	End Date
Select	Course # and Name	Select	Start Date	End Date
Select	Course # and Name	Select	Start Date	End Date
Select	Course # and Name	Select	Start Date	End Date
Select	Course # and Name	Select	Start Date	End Date
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Select	Course # and Name	Select	Start Date	End Date

Comments: Click here to enter text

Place the following program-created document(s) for **Appendix 10** in this folder:

*Instructional Objectives* as required in body of application supporting evidence of compliance.

Create separately named Word documents or folders for each of the B2 standards (clearly labeled by standard and sub-standard) including <u>only</u> the relevant (as related to the standard) *instructional objectives*, supporting compliance with the standard. These documents must be a composite of all relevant *instructional objectives* (whatever the source: course syllabi, individual lectures or other) <u>organized by and labeled with the standard</u> they address <u>and</u> <u>identified by course number(s)</u> and <u>course name(s)</u>. *Do not include instructional objectives which do not directly address the specific standard* or *sub-standard*.

Providing copies of program course syllabi in the application of record **does not** negate the need for programs to append evidence of compliance in appendices as required throughout the application.

#### EXAMPLE:

### Standard B2.19

- **B2.19** The curriculum *must* include instruction in:
  - a) intellectual honesty,
    - PA 501 Research Methods
    - Identify the fundamental principles of ethics in research.
    - Apply the concept of intellectual honesty by problem solving with an unbiased, honest attitude.
    - Uphold the academic honesty policies set forth by the University
- **B2.19** The curriculum *must* include instruction in:

#### **b)** academic integrity, and

PA 501 Research Methods

- Discuss the guidelines for ethical conduct in the academic and clinical setting
- Uphold the academic honesty policies set forth by the University
- **B2.19** The curriculum *must* include instruction in:

#### c) professional conduct.

PA 459 Introduction to PA Practice

- Formulate the appropriate approach to resolving professional issues given a clinical case scenario.
- Demonstrate respect, high ethical standards, and professionalism when providing patient care for a diverse patient population.
- PA 500 Ethics and Law
- Explain how the values of medical ethics guide healthcare professionalism.
- Define autonomy, patient confidentiality, and informed consent.
- List the requirements for informed consent.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: Standard B2.02a Name is to be saved in the Appendix 10 folder.

Place the following document(s) for **Appendix 11** in this folder:

- a) Supervised Clinical Practice Experiences TEMPLATE (Excel)
- b) Elective Experiences Outside the United States TEMPLATE

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 11a SCPE Excel Name is to be saved in the Appendix 11 folder.

### Appendix 11a for Provisional Accreditation Application

Supervised Clinical Practice Experiences TEMPLATE

**Program Name:** 

Anticipated Maximum Class Size:

**List** all clinical facilities, to include institutions, clinics, private offices, etc., that will be used by the program as *supervised clinical practice experiences (SCPEs)* in the "Site Name" column.

List the state in which the facility is located (use state abbreviation) in the "ST" column.

**Indicate** which facilities have a written agreement with the program/institution by placing an "x" in the appropriate cell. **Indicate** which facilities are more than 50 miles from the program/institution by placing an "x" in the appropriate cell. **Indicate** the type of setting(s) for each facility by placing an "x" in the appropriate cell(s).

**Insert** the **number of students** each site can take from each cohort for the offered clinical experience(s), as appropriate. **DO NOT** alter the total row at the bottom.

**Comments** may be added at the bottom.

					Set	ting		Clinical Experience								
Site Name	ST	Written Agreement	More than 50 miles from program	Outpatient	Inpatient	Emergency Department	Operating Room	Family Medicine	Internal Medicine	Behavioral & Mental	Surgery	Pediatrics	Women's Health (prenatal & gyn)	Emergency Medicine	Other (Specify Below)	

Site Name	ST	Written Agreement	More than 50 miles from program	Outpatient	Inpatient	Emergency Department	Operating Room	Family Medicine	Internal Medicine	Behavioral & Mental	Surgery	Pediatrics	Women's Health (prenatal & gyn)	Emergency Medicine	Other (Specify Below)
											_				
									_						
								-							

Site Name	ST	Written Agreement	More than 50 miles from program	Outpatient	Inpatient	Emergency Department	Operating Room	Family Medicine	Internal Medicine	Behavioral & Mental	Surgery	Pediatrics	Women's Health (prenatal & gyn)	Emergency Medicine	Other (Specify Below)
											_				
									_						
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Site Name	ST	Written Agreement	More than 50 miles from program	Outpatient	Inpatient	Emergency Department	Operating Room	Family Medicine	Internal Medicine	Behavioral & Mental	Surgery	Pediatrics	Women's Health (prenatal & gyn)	Emergency Medicine	Other (Specify Below)
											_				
									_						
								-							

Site Name	ST	Written Agreement	More than 50 miles from program	Outpatient	Inpatient	Emergency Department	Operating Room	Family Medicine	Internal Medicine	Behavioral & Mental	Surgery	Pediatrics	Women's Health (prenatal & gyn)	Emergency Medicine	Other (Specify Below)
							_		1						
Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0

# Comments (to make a carriage return, hold down the ALT key and press Enter)



Site Name	ST Written Accounted	written Agreement More than 50 miles from program	Outpatient	Inpatient	Emergency Department	Operating Room	Family Medicine	Internal Medicine	Behavioral & Mental	Surgery	Pediatrics	Women's Health (prenatal & gyn)	Emergency Medicine	Other (Specify Below)
									(					

### Appendix 11b for Provisional Accreditation Application

### **Elective Experiences Outside the United States TEMPLATE**

Program: Enter name of program

1. Are experiences outside the *United States* offered for *elective* didactic or clinical experiences? Select Yes or No

If NO, do not go any further, include the TEMPLATE as directed, with the application. If YES, complete all questions below:

2. Do you have program-established as well as PA student-established experiences outside the *United States*?

Select Yes or No

Provide narrative explanation below:

Click here to enter text

3. Are experiences outside the *United States* offered to <u>all</u> PA students enrolled in the program? Select Yes or No

**Provide narrative** explanation below:

Click here to enter text

4. Do you have affiliation agreements for experiences offered outside the *United States*? Select Yes or No

Provide narrative explanation below:

Click here to enter text

5. Does your program advertise the experiences offered outside the *United States*? Select Yes or No

IF YES, does the information address travel, housing and other expenses? Select Yes or No

Provide narrative explanation below:

Click here to enter text

6. Is the PA student responsible for any of the above costs? Select Yes or No

Provide narrative explanation below:

Click here to enter text

7. Describe how *instructional objectives* are developed for the experiences outside the *United States*.

Click here to enter text

8. Describe how PA student *learning outcomes* are developed for the experiences outside the *United States*.

Click here to enter text

9. Describe how PA students are oriented to the role of the PA/mid-level practitioner in the international experience country.

Click here to enter text

10. Describe how the program evaluates international clinical sites and <u>assures</u> that the sites provide the PA student access to physical facilities, patient populations and supervision necessary to fulfill program *learning outcomes* for the experience.

Click here to enter text

11. Describe how the PA student's performance is assessed during experiences outside the *United States*.

Click here to enter text

12. Describe how PA students are covered for liability/malpractice on experiences outside the *United States*.

Click here to enter text

13. Describe measures taken related to PA student safety during experiences outside the United States.

Click here to enter text

14. Additional comments about experiences outside the United States:

Click here to enter text

Place the following program-created documents for **Appendix 12** in this folder:

Program *learning outcomes* (The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities that have been attained at the completion of a curricular component, course or program.) for *supervised clinical practice experiences* addressing standards B3.03 a-e:

- a) program *learning outcomes* for supervised clinical practice experiences for preventive, emergent, acute, and chronic patient encounters
- b) program *learning outcomes* for patients seeking medical care across the life span to include infants, children, adolescents, adults, and the elderly
- c) program *learning outcomes* for patients seeking women's health (to include prenatal and gynecologic care)
- d) program *learning outcomes* for patients seeking care for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care
- e) program *learning outcomes* for patients seeking care for behavioral and mental health conditions

Create a composite document listing the program *learning outcomes* supporting standard B3.03 a-e. *Learning outcomes* must be organized by and labeled with the sub-standard they address.

### EXAMPLE: Standard B3.03a

### **Preventive Learning Outcomes**

Family Medicine:

- 1. Generate differential and final diagnoses based on the history of the patient, the physical examination, various diagnostic studies performed, and clinical knowledge of common family medicine disorders.
- 2. Evaluate and develop an appropriate treatment/management plan for patients of all ages requiring preventative care.
- 3. Educate patients and families regarding common preventable medical conditions.
- 4. Demonstrate ability to provide routine immunizations.
- 5. Demonstrate professional behavior in interactions with patients and members of the medical team.

### Pediatrics

- 1. Apply knowledge of normal patterns of physical, cognitive, and behavioral growth with consideration of age-appropriate developmental milestones during preventive care in infants, children, and adolescents
- 2. Perform a well child physical exam appropriate to the age of the infant, child or adolescent.
- 3. Provide and document anticipatory guidance and disease prevention to parents appropriate to the age of the infant, child or adolescent.
- 4. Demonstrate ability to provide routine immunizations.

#### **Emergent Learning Outcomes**

### **Emergency Medicine**

- 1. Interpret the clinical features, develop a differential diagnosis, and plan management of common acute conditions seen in the emergency department from across the lifespan.
- 2. Gather histories and perform physical exams relevant to common emergent medical conditions.
- 3. Triage patients appropriately recognize those needing immediate care from those urgent or acute care.
- 4. Demonstrate the ability to provide basic life support.
- 5. Demonstrate professional behavior in interactions with patients and members of the medical team.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 12 SCPE LO Name is to be saved in the Appendix 12 folder.

Place the following document(s) for **Appendix 13** in this folder:

### a) Student Evaluation TEMPLATE

b) Blank copy(ies) of the form(s) used by *preceptors* to evaluate students during *supervised clinical practice experiences*. This may include but is not limited to preceptor evaluation of student forms and skills checklists used by the preceptor to evaluate the student.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 13a Student Eval Name is to be saved in the Appendix 13 folder.

# Appendix 13a for Provisional Accreditation Application

### Student Evaluation **TEMPLATE**

Program: Enter name of program

List every <u>didactic course and *rotation*</u> in the sequence typically taken.

**Indicate** which method(s) of evaluation will be used during each didactic <u>and</u> supervised clinical practice experience components of the program <u>and</u> the method(s) to be used as part of the summative evaluation.

Course or <i>rotation</i> listed in sequence typically taken	H&Ps (or other clinical docs) submitted to faculty	Written exams	Practical exams	Oral presentations	Oral exams	Group Projects	OSCE	Research project	Capstone project	Preceptor evaluation	Student self-evaluation	Other: Click here to enter text	Other: Click here to enter text
Summative Evaluation													
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Course or <i>rotation</i> listed in sequence typically taken	H&Ps (or other clinical docs) submitted to faculty	Written exams	Practical exams	Oral presentations	Oral exams	Group Projects	OSCE	Research project	Capstone project	Preceptor evaluation	Student self-evaluation	Other: Click here to enter text	Other: Click here to enter text
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Course or <i>rotation</i> listed in sequence typically taken	H&Ps (or other clinical docs) submitted to faculty	Written exams	Practical exams	Oral presentations	Oral exams	Group Projects	OSCE	Research project	Capstone project	Preceptor evaluation	Student self-evaluation	Other: Click here to enter text	Other: Click here to enter text
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Comments: Click here to enter text

Place the following documents in Appendix 14:

- a) Appendix 14 SSR, Self-Study Document using ARC-PA provided document
- b) Appendix A, Timeline for Data Gathering and Analysis TEMPLATE

The SSR and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 14A Timeline ABC. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces. DO NOT CHANGE THE FORMAT OR FILE TYPE.

The document must be saved in the Appendix 14 folder.



# SELF-STUDY REPORT<sup>©</sup>

For programs eligible for Accreditation-Provisional

### To be submitted with the application in Appendix 14

December 2023

The Self-Study Report (SSR) must be submitted according to the directions at the end of the application.

## THE SELF-ASSESSMENT PROCESS AND REPORT

This application requires the completion of templates and narrative questions related to the ongoing self-assessment process which constitute the content of the Self-Study Report (SSR, Appendix 14).

Since a program applying for provisional accreditation has no students and little data, the majority of this report is descriptive.

The program may need to refer to issues related to selected standards addressed within the body of the application as it completes its SSR. The program need not repeat exact content from elsewhere in the application and may refer the reader to the specific standard and page of the application for content reference.

TECHNICAL DIRECTIONS FOR COMPLETING THE SELF-STUDY REPORT (SSR)

This SSR and its appendices were developed for use with Word 2010 or later for PC. As some features of the documents are NOT compatible with Word for Mac, the use of a Mac for completion is NOT recommended. Furthermore, some functionalities in the documents may not be supported by applications such as Google Documents or similar products.

The SSR and appendices require programs to complete tables, provide narratives and mark text boxes. To complete the tables, left click inside the cells and type the required information. To provide narratives, left click inside the narrative boxes and begin typing. Although the fields may appear small, they will expand to allow as much text as needed. If the text extends beyond the page, the document will automatically repaginate. Tables, or graphs MAY NOT be added to text boxes. You may add as an appendix if needed in your response.

**Note** that words appearing in *italics* are defined in the glossary of the Accreditation *Standards*. The glossary can be found at the end of the application.

The **Provide Narrative** sections are to be answered with brief and *succinct* answers. It is essential that programs give careful thought to providing responses that address their plans for the critical *analysis* of data.

The SSR and appendices are "protected." You will be unable to insert or delete pages or modify anything that is not inside a text or form field. **DO NOT** attempt to unprotect the document. If you unprotect the document, there is a strong possibility that all entered data will be lost.

## SAVING YOUR DOCUMENTS

After you have completed the SSR and each appendix, use the "Save" or "Save As" command under the File menu. The SSR and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 14A Timeline UABC. Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 20 characters, including spaces. DO NOT SAVE AS A PDF. The document must be saved in the Appendix 14 folder.

If you have any difficulties or questions, contact the ARC-PA offices at <u>accreditationservices@arc-pa.org</u>.

### **APPENDIX 14**

## **Insert program name and location** (city, state):

Click here to enter text.

# **STANDARDS SECTION C: EVALUATION**

Provide a one to two-paragraph overview describing the proposed program.

**Include**: a brief description of the sponsoring institution; the type and number of students planned for admission; a brief description of the curriculum including length and degree awarded and how the program plans to meet its mission. **Include** any other unique features that you believe will be helpful for the commission to better know the program. If this overview is available on a web site, include the URL here. Click here to enter URL.

#### Overview of the proposed program:

Click here to enter text

# C1 Ongoing Program Self-Assessment

- **C1.01** The program *must* define its ongoing self-assessment process that is designed to document program *effectiveness* and foster program improvement. At a minimum, the process *must* address:
  - a) administrative aspects of the program and institutional resources,
  - b) effectiveness of the didactic curriculum,
  - c) effectiveness of the clinical curriculum,
  - d) preparation of graduates to achieve program defined competencies,
  - e) PANCE performance,
  - f) sufficiency and effectiveness of principal and instructional faculty and staff, and
  - g) success in meeting the program's goals.

**Provide Narrative** describing the program's planned, formal, continuous self-assessment process utilized throughout the academic year and in all phases of the program. Indicate how evidence of student learning, program administrative functions/operations and outcomes (C1.01a-g) will be gathered, critically analyzed, and applied to identify program strengths, program areas in need of improvement, and action plans.

The process described should be consistent with the data sources and timing of data collection and analysis listed in the **Timeline for Data Gathering and Analysis TEMPLATE Appendix 14A.** 

### Narrative must Include:

- Identification of how data (qualitative and quantitative) will be collected addressing all aspects of the program's self-assessment process (C1.01a-g).
- Description of the program plans to approach analysis of the qualitative data to be collected, including the benchmarks/thresholds (with rationale)

- Description of the program plans to approach analysis of the quantitative data to be collected, including the benchmarks/thresholds (with rationale)
- Identification of who will be responsible for the analysis.
- The process of analysis of data to determine relationships and monitor trends, relating the data to the expectations or identified issues or concerns of the program.
- How strengths and areas in need of improvement will be identified.
- Who will be responsible for implementation of actions to address needed improvements.

#### Click here to enter text

For this provisional application, complete the ARC-PA Timeline for Data Gathering and Analysis TEMPLATE (Appendix 14A) showing the planned self-assessment process.

- **C1.02** The program *must* implement its ongoing self-assessment process by:
  - a) conducting data collection,
  - b) performing critical *analysis* of data, and
  - c) applying the results leading to conclusions that identify:
    - i. program strengths,
    - ii. program areas in need of improvement, and
    - iii. action plans.

**If accredited,** for future ARC-PA comprehensive reviews, the program will be asked to verify by its self-study report (SSR), how it has implemented its ongoing program self-assessment to identify program strengths, areas in need of improvement and resulting actions.

As the program director, I am aware of this requirement and responsibility. <u>Click here to enter</u> <u>name and date</u>

### SELF-STUDY REPORT

Accredited programs are asked to complete a Self-Study Report (SSR) that requests specific data the program collects in various areas related to standard C1.01. The program may be required to provide data or ARC-PA data templates may be provided to display that data. The report requires programs to provide narrative about *analysis* of data and actions taken based upon that *analysis*. Programs are not limited to *analysis* of the ARC-PA required data but should report on *analysis* and actions taken based upon the program's ongoing program self-assessment process that is designed to document program effectiveness and foster program improvement.

If accredited, for future ARC-PA comprehensive reviews, the program will be required to complete ALL tables, templates and questions as part of the Self-Study Report (SSR) component of the application.

As the program director, I am aware of this requirement and responsibility. <u>Click here to enter</u> <u>name and date</u>

**C1.03** The program *must* prepare 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. The report *must* follow the guidelines provided by the ARC-PA.

**Review the required SSR** from the Sample Continuing Application or Sample Final Provisional Application provided on the ARC-PA website <u>http://www.arc-pa.org/accreditation/resources/application-materials/</u>.

As the program director, I have reviewed the Self-Study Report documents on the ARC-PA website, and I am aware of the requirements and responsibility related to the required self-study report for future ARC-PA reviews. <u>Click here to enter name and date</u>

Use this space to **provide additional narrative** as needed.

Click here to enter text

### SSR APPENDIX 14A

### **Timeline for Data Gathering and Analysis TEMPLATE**

(To support the process described in response to C1.01)

**Complete the** table below representing the program's planned self-assessment process. The table must include the timing of data collection and analysis (for example: "end of each semester", "annually in August", etc.). The timing of data collection and analysis may be listed separately if appropriate for example "Data collected March – April. Analysis annually in May." Indicate who (job title, committee name etc.) will be responsible for study of the data.

Save this document in the folder labeled **Appendix 14**. Include an abbreviation of the program's name at the end of the document name. For example, App 14A SSR Timeline UABC

Important Note – Abbreviate as necessary; the title of <u>any</u> document or folder in the application may not exceed 20 characters, including spaces.

Include other data sources as appropriate.

If any of the data sources listed are not used by the program, leave that row blank.

#### EXAMPLE:

Relevant Appendix	Data Source(s) Collected	Timing of Data Collection	Responsible Party(ies)	Timing of Data Analysis	Responsible Party(ies)
	Sufficiency of institutiona	al resources (human, techno	ology, physical)		
Appendix 14B	Student Exit Survey	Annual – August	Program Coordinator	Annual Program Retreat February	Program Faculty
Administrative Aspects of the Program and	Faculty Annual Program Evaluation	Annual- November	Program Director	Annual Program Retreat February	
Institutional Resources					

Relevant Appendix	Data Source	Timing of Data Collection	Responsible Party(ies)	Timing of Data Analysis	Responsible Party(ies)						
	Sufficiency of institutiona	<i>l resources</i> : (human, te	echnology, physical)								
	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text						
	Sufficiency of institutional resources: Student services (academic advising, tutoring, career services, financial aid, student health, computing, library) and safety and security.										
	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text						
Appendix 14B		• •	inancial, faculty development, cl gram <i>diversity, equity</i> and <i>inclus</i>	•	riculum design and						
Administrative Aspects of the Program and Institutional Resources	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text						
	Effectiveness of administr	rative aspects of the p	rogram: Admissions process and	loutcomes							
	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text						
	Effectiveness of administ	rative aspects of the p	rograms: Program policies/proce	edures							
	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text						



Relevant Appendix	Data Source	Timing of Data Collection	Responsible Party(ies)	Timing of Data Analysis	Responsible Party(ies)
	Other data sources: Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
	Student evaluation of didactic courses	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
Appendix 14C	Student evaluation of didactic faculty	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
Effectiveness of the Didactic Curriculum	Number of final didactic course grades of C or below	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
	Student <i>remediation</i> in didactic courses	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
	Other data sources: Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
	Student evaluation of <i>rotations</i> Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
Appendix 14D	Student evaluation of <i>preceptors</i> Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
Effectiveness of the Clinical Curriculum	Number of <i>rotation</i> grades of C or below	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
	Student remediation in rotations	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
	Other data sources: Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
Appendix 14E	Summative evaluation performance	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text

Relevant Appendix	Data Source	Timing of Data Collection	Responsible Party(ies)	Timing of Data Analysis	Responsible Party(ies)				
Preparation of Graduates to Achieve Program	Exiting Student/Graduate Feedback	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text				
Defined Competencies	Faculty evaluation of the	curriculum: (List sourc	ces of data used by faculty to eva	aluate curriculum)					
	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text				
	Other data sources: Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text				
Appendix 14F PANCE	PANCE Performance	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text				
	Sufficiency of program fa	culty							
	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text				
Appendix	Sufficiency of administrat	tive support staff							
14G Sufficiency and	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text				
Effectiveness of Program									
Faculty and Staff	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text				
	Effectiveness of administ	rative support staff							
	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text				

Relevant Appendix	Data Source	Timing of Data Collection	Responsible Party(ies)	Timing of Data Analysis	Responsible Party(ies)							
	Faculty and Staff changes											
	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text							
	Other data sources: Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text							
Appendix	Success in meeting progr	am goals			•							
14H Success in meeting	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text							
program goals	Other data sources: Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text							
Appendix 14 Student Attrition	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text							
Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text							

Comments: Click here to enter text.

Place the following program-created documents for Appendix 15 in this folder:

Forms used by the program to evaluate clinical sites and *preceptors* used for *supervised clinical practice experiences* in relation to C2.01.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 15 Initial Evaluation Form Name is to be saved in the Appendix 15 folder.

Place the following program-created document for Appendix 16 in this folder:

Copies of program and/or institutional handbooks/manuals containing policies

Providing copies of handbooks/manuals in the application of record does not negate the need for programs to **append evidence of compliance in appendices** as required throughout the application. The site visitors will NOT search this appendix for evidence of compliance.

The handbooks and manuals appended to the program's application will be used by the commission, as needed, as evidence of compliance with the *Standards*. Although these documents may be updated by the program between the time of application submission and the site visit, they are part of the application of record. The commission will use the handbooks/manuals to verify compliance with the related standards.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The application and templates provided by the ARC-PA are to be saved in the format in which they were created. **DO NOT CHANGE THE FORMAT OR FILE TYPE.** Program-generated documents can be saved in any format.

The document must be saved in the appropriate folder. For example: App 16 Clinical Year Manual Name is to be saved in the Appendix 16 folder.

Place the following program-created document for **Appendix 17** in this folder:

**Zip file** containing syllabi for standard B1.03 & D1.04 used for **ALL** courses/rotations in the curriculum that must include at a minimum:

- course name (academic credit),
- course description,
- faculty instructor of record if known,
- course goal/rationale,
- outline of topics to be covered,
- in measurable terms that can be assessed, that guide student acquisition of required *competencies*,
- outline of topics to be covered that align with *learning outcomes* and *instructional* objectives,
- methods of student assessment/evaluation, and
- plan for grading.

Providing copies of course syllabi in the application of record does not negate the need for programs to **append evidence of compliance in appendices** as required throughout the application. The site visitors will NOT search this appendix for evidence of compliance.

The word 'syllabus' is purposefully not defined in the ARC-PA glossary. The Commission expects this information to be defined and published for students in a written or electronic document. If the program is under institutional restrictions to include any of the requirements for Standard B1.03 within its course syllabi, then the program must include that information as an appendix to the course syllabi.

The syllabi appended to the program's application will be used by the commission, as needed, as evidence of compliance with the *Standards*. Although these documents may be updated by the program between the time of application submission and the site visit. These are part of the application of record. The commission will use the syllabi to verify the content of each course and rotation in the program.

Course syllabi must be saved to include **BOTH** the **course number** and **course name** for easy identification. For example: PAS5000 Anatomy

Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

Place the following program-created document(s) for **Appendix 18** in this folder:

- a) List of teaching equipment, models, simulators that are available or will be purchased (A1.09)
- b) List of required texts, subscriptions, references, and equipment (required to be purchased and used by students) (A3.12f)

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The document must be saved in the appropriate folder. For example: App 18a Name is to be saved in the Appendix 18 folder.

Place the following document(s) for Appendix 19 in this folder:

A copy of the content to be published on the program/institution website if institutional policies prevent the program from making its website publicly available prior to accreditation.

The application and each appendix are to be saved with the same name it was given by the ARC-PA, with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App 1b Program Budget Name or App 4c Personnel Resp Name. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

The document must be saved in the appropriate folder. For example: App 19 Name is to be saved in the Appendix 19 folder.