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

Application for Final Provisional Visit©
Revised 12.2023

For Accreditation *Standards*, fifth edition as of 9.2023©

A final provisional site visit to the program is a required component of the provisional accreditation process. An interval assessment fee of $10,000 must be mailed to the ARC-PA at the time of submission of the application.

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 granted 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* or when a program holding accreditation-provisional status appears to demonstrate continued progress in complying with the *Standards* as it prepares for the graduation of the first class (cohort) of students.

Accreditation-provisional status does not ensure any subsequent accreditation status. As is true for other accredited programs, serious issues concerning the institution's or program's ability to demonstrate compliance with the *Standards*, at any point in the provisional process, may result in an adverse accreditation action. Programs that have their accreditation withdrawn may re-enter the provisional process at a later date.

The provisional accreditation review process includes a series of three site visits prior to subsequent commission reviews and accreditation action. **Final provisional visits** are conducted at institutions and programs that have successfully achieved and maintained provisional accreditation after the initial provisional and provisional monitoring commission reviews. They are scheduled to occur 18-24 months following the second provisional review and accreditation action by the commission and after the program has analyzed the *NCCPA PANCE* results from the first class of graduates. These visits assess the institution's and program's demonstration of compliance with the *Standards* including their ability to incorporate and report the findings of a robust self-assessment process as required by the ARC-PA.

An on-site evaluation of the sponsoring institution/program is an important and required part of the provisional accreditation process. The final provisional visit includes meetings with representatives of the administration, the program director, *program faculty* and staff, as well as with current students.

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 and the program accreditation history.

The program management portal and the program website must be maintained and be up to date and compliant with the *Standards* at all times. The program management portal and the program website will be reviewed by the commission in conjunction with this application. It is the responsibility of the program to maintain both the website and the portal on an on-going basis. Failure to maintain either may result in reconsideration of the program's accreditation status. A user manual is available on the portal to provide guidance and answer questions about the portal.

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*. The glossary may be found at the end of this document as well.

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 of an abbreviation of the program's name at the end of the document name.

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 offices at accreditationservices@arc-pa.org.

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 term is 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 made to meet the standard and explain 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

Programs must follow the directions **in this application** which requires the completion of templates and narrative questions related to the ongoing self-assessment process which will constitute the content of the Self-Study Report. The SSR included with this application is to demonstrate ongoing self-assessment. It is essential that programs give careful thought to providing responses that address the 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 and 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. *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.*

4. *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.*

5. *Documents identified in the Material List for Final Provisional Visits 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.

SECTION A: ADMINISTRATION

<u>INTRODUCTION</u>

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.

Follow the instructions in Appendix 01 to download and save the **Program Data Sheet** from the program's program management portal and **include** it as a PDF 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 student*s 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 student*s, 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.

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

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 and reviews compliance with A1.02a.

b) hiring faculty and staff,

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

c) ensuring effective program leadership,

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

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

Provide narrative describing how the institution demonstrates responsibility for <u>and</u> reviews compliance with A1.02e.

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> reviews 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 evidence of compliance is NOT on a website, **provide a copy of the document(s)** that demonstrates compliance in **Appendix 3b**.

Provide narrative describing how the institution demonstrates <u>and</u> reviews 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 plans to demonstrate responsibility for A1.02h should the need arise.

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 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 and reviews 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 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 and reviews 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 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 and reviews 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**.

☐   non-vacation time for review and study for certification maintenance and licensure
    If checked, please provide a brief description:

☐   funding related to certification maintenance and licensure
    If checked, please provide a brief description:

☐   non-vacation time to attend professional development opportunities
    If checked, please provide a brief description:

☐   funding 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 compliance with A1.04 **only if this has changed since the provisional monitoring visit.** If unchanged, note below.

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 with Accreditation-Provisional status.

INSTITUTION RESOURCES

Note: The program will document faculty evaluation of institutional resources in the **self-study report**, addressing standards C1.01, C1.02 and C1.03.

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**.

Follow the instructions in Appendix 01 to download and save the **Program Budget** from the program's program management portal and **include** it as directed in **Appendix 1b.**

Provide narrative describing how the institution demonstrates and reviews 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 and reviews 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 and reviews 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.

Provide narrative describing how the institution demonstrates and reviews 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 demonstrates and reviews compliance with A1.10a and b.

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: 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*.

Follow the directions in Appendix 04 to download and save the **Program Personnel Excel Export** from the ARC-PA program management portal and **include** it in **Appendix 4b.**

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

   Provide narrative describing how the program demonstrates and reviews compliance with A2.01.

Include the following CURRENT documents in **Appendix 4c**: Written job descriptions **and** Curricula Vitae, using App4c **ARC-PA CV Template** provided in this application for: Program Director, *Medical Director* and *Principal Faculty*.

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 by completing **Appendix 1a** and providing the **CVs** and **job descriptions** in **Appendix 4c**.

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

This was addressed by completing the **Program Data Sheet** (**Appendix 1a**) and providing the CVs in **Appendix 4c**.

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** (**Appendix 1a**).

The commission expects to see how the program determines *sufficiency* of faculty to meet the needs of enrolled students addressed in the **Self-Study Report.**

Provide narrative describing how the program demonstrates compliance with A2.03. The program may refer to the **Self-Study Report** as needed to show how it determines sufficiency of principal faculty to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program.

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 program demonstrates and reviews 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 4d.**

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

Include the following in **Appendix 4e & 4f**: Mission of the Institution, the mission of the program and the g*oals* of the program. 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 and reviews compliance with A2.05a.

b) selecting applicants for admission to the PA program,

Provide narrative describing how the program demonstrates and reviews compliance with A2.05b.

c) providing student instruction,

Provide narrative describing how the program demonstrates <u>and</u> reviews compliance with A2.05c.

d) evaluating student performance,

Provide narrative describing how the program demonstrates <u>and</u> reviews compliance with A2.05d.

e) academic counseling of students,

Provide narrative describing how the program demonstrates <u>and</u> reviews compliance with A2.05e.

f) assuring the availability of remedial instruction,

Provide narrative describing how the program demonstrates <u>and</u> reviews compliance with A2.05f.

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

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

h) evaluating the program.

Provide narrative describing how the program demonstrates <u>and</u> reviews compliance with A2.05h.

PROGRAM DIRECTOR

A2.06   The program director *must* be a PA[1].
   a) The program director *must* possess at least three years of full-time higher education experience at the time of appointment.[2]

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[1] 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.

[2] 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.

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.

This was addressed by completing the **Program Data Sheet** (**Appendix 1a**) and providing a CV and job description in **Appendix 4c.**

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

This was addressed by completing the **Program Data Sheet** (**Appendix 1a**) and by providing the **Program Personnel Excel Export** 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 institution assesses the program director's leadership of the program. **Include** how the institution reviews compliance with A2.08a-c 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 a **job description** and **CV** using the ARC-PA CV template in **Appendix 4c**.

Provide narrative describing how the program demonstrates compliance with A2.09a-h. **Include** how the institution and program assesses the program director's knowledge and responsibility for each component a-h of A2.09. **Include** how the institution reviews compliance with A2.09a-h 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 demonstrates and reviews compliance with A2.10.

MEDICAL DIRECTOR

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

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

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 and reviews 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 demonstrates and reviews compliance with A2.13a and b. **Include** the process and criteria used for selecting faculty in relation to the requirements of these standards.

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 demonstrates and reviews compliance with A2.14. The program may refer to the **self-study report** as needed to show how it determines *sufficiency* of *instructional faculty.*

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[3] *Medical directors* appointed before 3/1/06 should have their current licensure in the state in which the program exists.
[4] *Medical directors* appointed before 3/1/06 should be board certified, those appointed on or after 3/1/06 must be board certified.

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

Provide narrative describing how the program demonstrates and reviews compliance with A2.15.

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 demonstrates and reviews compliance with A2.16.

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 demonstrates and reviews 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 and 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 and reviews compliance with A2.18a and b.
The program may refer to the **Self-Study Report** as needed to show how it determines the sufficiency of administrative support staff to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program.

A3   OPERATIONS

Note: 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.
>
> 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 and must be 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 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.

A3.01   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 demonstrates compliance with A3.01. **If the program has documents supporting compliance, see note above**. **If** documentation of compliance is not available on the web for reference as noted above and the program can provide copies of documents that demonstrate 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 demonstrates and reviews 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 narrative describing how the program demonstrates and reviews compliance with A3.03. **Include** the website hyperlink where above policy may be found.

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 narrative describing how the program demonstrates and reviews compliance with A3.04. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

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) *c*linical or *administrative staff*.

Provide narrative describing how the program demonstrates and reviews compliance with A3.05a and b. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 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 narrative describing how the program demonstrates and reviews compliance with A3.06. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

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 and reviews 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 and 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 policies *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 demonstrates and reviews compliance with A3.08 a-c. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

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 narrative describing how the program demonstrates and reviews compliance with A3.09. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

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 narrative describing how the program demonstrates and reviews compliance with A3.10. **If** documentation of compliance is not available on the web for reference as noted above, **provide** a copy in **Appendix 05**.

FAIR PRACTICES AND ADMISSIONS

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

Provide the program website hyperlink where this information is found.

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

In responding to standard **A3.12, provide the hyperlink directly to the specific page** where information may be found.

> **Note:** If compliance is demonstrated by a page in a document on the website, the program must also **list the specific page number within the document.**
>
> Site visitors and ARC-PA commissioners **will** review the content on the program's website.

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 the program website hyperlink where information is published.

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

Provide the program website hyperlink where information is published.

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,

Provide the program website hyperlink where information is published.

d)   all required curricular components including *required rotation* disciplines,

Provide the program website hyperlink where information is published.

e)   academic credit offered by the program,

Provide the program website hyperlink where information is published.

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

Provide the program website hyperlink where information is published.

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

Provide the program website hyperlink where information is published.

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 with Accreditation-Provisional status.

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

Provide the program website hyperlink where information is published.

In responding to standard **A3.13, provide the hyperlink directly to the specific page** where information may be found.

Note: If compliance is demonstrated by a page in a document on the website, the program should also **list the specific page number within the document.**

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

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 the program website hyperlink where information is published. **If not applicable, write N/A.**

b) admission requirements regarding prior education or work experience,

Provide the program website hyperlink where information is published.

c) practices for awarding or granting *advanced placement*,

Provide the program website hyperlink where information is published.

d) any required academic standards for enrollment, and

Provide the program website hyperlink where information is published.

e) any required *technical standards* for enrollment.

Provide the program website hyperlink where information is published.

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 demonstrates compliance with A3.14.

A3.13 a-e and A3.14: **Provide narrative** describing how the program will review compliance with all practices, policies and procedures for A3.13 a-e and 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 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 provides evidence.

Complete copies of the handbooks/manuals containing policies will be placed in **Appendix 16**. Providing copies of 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 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 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 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 hyperlink directly to the page of the program's website where this information is made available to students (A3.15d). **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 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 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 *s*tudent grievances and appeals.

Provide 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 (A3.16):

☐   The program does not grant *advanced placement* to any applicant**. (If this box is checked, write N/A in response to answer 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.

         [ ]

         How many students have been given advanced standing by the program to date?

         [ ]

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 demonstrates 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 demonstrates 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 demonstrates compliance with A3.16c. **If not applicable, write N/A.**

[ ]

DURING THE VISIT, the site visit team will review student files for any students considered for *advanced placement*.

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,
   b)   that the student has met institution and program health screening and immunization requirements,
   c)   of student performance while enrolled,
   d)   of *remediation* efforts and outcomes,
   e)   of summaries of any formal academic/behavioral disciplinary action taken against a student, and
   f)   that the student has met requirements for program completion.

DURING THE VISIT, the site visit team will review student files to determine if the program has provided evidence in support of compliance with this standard.

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 demonstrates and reviews 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 demonstrates and reviews 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
   b)   current curriculum vitae.

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

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.**

SECTION B: CURRICULUM AND INSTRUCTION

<u>**INTRODUCTION**</u>

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

Note: The program will address the *effectiveness* of the didactic and clinical curriculum, and its preparation of graduates to achieve program defined *competencies* in 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 has changed or revised its curriculum, as a whole, since its last accreditation application (Provisional Monitoring), detailing **how and why** the changes were made. Refer to the **self-study report** as needed.

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

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

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 4e & 4f**, 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> reviews compliance with B1.01a.

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> reviews 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> reviews 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 compliance with B1.01d. **Include** the considerations used to determine "*sufficient* breadth and depth" of the program curriculum. Refer to the **self-study report** as needed.

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 compliance with B1.02. **Include commentary** concerning what the program has learned to date about the sequencing of curriculum. Refer to the **self-study report** as needed.

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 as applicable for all courses/rotations in the curriculum are provided in **Appendix 17***.*

Provide narrative describing how the program demonstrates and reviews compliance with B1.03.

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 with Accreditation-Provisional status.

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 demonstrates 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 and reviews 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 with 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 with 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 with 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 with 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 B2.06a-f following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with 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 B2.07a-f following the instructions in **Appendix 10**. If these are addressed in several courses/documents, **create a composite** document with 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 with 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 with 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 with the *instructional objectives*, listing in which courses they are addressed.

Provide narrative describing how the program provides students the opportunity to apply principles of *interprofessional practice* 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 with 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 with 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 with 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 with 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 with 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 with 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 with 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 with 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 with 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 with the *instructional objectives*, listing in which courses they are addressed.

B3   SUPERVISED CLINICAL PRACTICE EXPERIENCE INSTRUCTION

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.*

Follow instructions in Appendix 11 for downloading **the Supervised Clinical Practice Experiences (SCPE) Portal Tab to Create an Excel Document** for inclusion in **Appendix 11a.**

Provide narrative describing any issues related to the program's ability to secure clinical sites in *sufficient* number **to meet the needs of currently enrolled clinical students and the next planned cohorts.** Refer to **the self-study report** as needed.

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 **ARC-PA 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 and reviews 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 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> reviews 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> reviews 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> reviews 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> reviews 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 and reviews 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 and reviews compliance with B3.04a.

> [ ]

   b)   inpatient,

Provide narrative describing how the program demonstrates and reviews compliance with B3.04b.

> [ ]

   c)   outpatient, and

Provide narrative describing how the program demonstrates and reviews compliance with B3.04c.

> [ ]

   d)   operating room.

Provide narrative describing how the program demonstrates and reviews 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 and reviews 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 and reviews compliance with B3.06a.

> [ ]

Are all physician preceptors board certified in their area of instruction?
☐ Yes   ☐ No

    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 and reviews compliance with B3.06b.

Are all PA preceptors *NCCPA* certified?
☐ Yes   ☐ No

    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 and reviews compliance with B3.06c.

Are all other licensed health care provider preceptors qualified in their area of instruction?
☐ Yes   ☐ No

    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.

```

```

DURING THE VISIT, the site visit team will review documentation of all active preceptors (physicians, physician assistants, and other licensed health care professionals) who currently precept the supervised clinical practice experiences/rotations in support of compliance with this standard.

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

   Provide narrative describing how the program demonstrates and reviews compliance with B3.07a.

```

```

   b)   emergency medicine,

   Provide narrative describing how the program demonstrates and reviews compliance with B3.07b.

```

```

   c)   internal medicine,

   Provide narrative describing how the program demonstrates and reviews compliance with B3.07c.

```

```

   d)   surgery,

   Provide narrative describing how the program demonstrates and reviews compliance with B3.07d.

```

```

   e)   pediatrics,

   Provide narrative describing how the program demonstrates and reviews compliance with B3.07e.

```

```

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

Provide narrative describing how the program demonstrates and reviews compliance with B3.07f.

```
[                                                                    ]
```

g) behavioral and mental health care.

Provide narrative describing how the program demonstrates and reviews compliance with B3.07g.

```
[                                                                    ]
```

B4   ASSESSMENT OF STUDENT LEARNING

> **NOTE:** In advance of the site visit, the SV team chair may request the program have available select student evaluation instruments in support of the B4 standards. **The SV team will determine which student evaluation instruments should be reviewed for the site visit.**

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

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 demonstrates and reviews compliance with B4.01a for the **didactic** *instructional objectives* and *learning outcomes*. **Include in the narrative,** how the program aligns 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 **used by 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 demonstrates and reviews compliance with B4.01a for the *supervised clinical practice experience instructional objectives* and *learning outcomes*. **Include in the narrative,** how the program aligns 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 demonstrates compliance with B4.01b.

SAMPLE DEC 2023

(Programs may reference as appropriate, the **ARC-PA Student Evaluation TEMPLATE** for didactic curriculum and *supervised clinical practice experiences* and 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:
a)   clinical and technical skills,
b)   clinical reasoning and problem-solving abilities,
c)   interpersonal skills,
d)   medical knowledge, and
e)   professional behaviors.

Provide narrative describing the program's *summative evaluation* process including how methods of evaluation measure required components a-e of the program's *competencies* and how *summative evaluation* of each student is documented. Indicate timing during the program and what will occur if a student does not meet defined performance expectations. Programs may reference as appropriate, the *competencies* provided in **Appendix 9b.**

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 with Accreditation-Provisional status.

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 demonstrates and reviews compliance with B4.04b. Refer to **the self-study report** as needed.
   Write N/A if not applicable.

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 5th 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 demonstrates and reviews compliance with C2.01 a-c.
>
> **Describe** the program's process for the **initial** review 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*. Refer to **the self-study report** as needed.
>
> | |
> | --- |
> | |
>
> **Describe** the program's process for the **ongoing** review 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*. Refer to **the self-study report** as needed.
>
> | |
> | --- |
> | |

SECTION D: PROVISIONAL ACCREDITATION

D1   PROVISIONAL ACCREDITATION REQUIREMENTS

When the institution and program first applied for accreditation, it was reviewed with the D section of the *Standards*. Within this application, programs need not address the D standards.

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 or adverse action and timeline for resolution.

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**.

If this standard is currently applicable to the program, **provide narrative** describing the situation and how and when it will be resolved:

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**.

If this standard is currently applicable to the program, **provide narrative** describing the situation and how and when it will be resolved:

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**.

If this standard is currently applicable to the program, **provide narrative** describing the situation and how and when it will be resolved:

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**.

If this standard is currently applicable to the program, **provide narrative** describing the situation and when it will be resolved:

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 am aware that our program will not be eligible to apply for expansion to a *distant campus* until we have achieved accreditation - continued status and maintained five years of accreditation - continued without an adverse accreditation status. **Enter Initials**.

b) requirements for program completion/graduation that include changes in total credits required,

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

c) the curriculum that result in an increase in the student tuition,

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

d) an increase in the approved *maximum entering class size,* or

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

As the program director, I am also aware that our program will not be eligible to increase our class size beyond that noted in our accreditation letter until we have achieved Accreditation - Continued status and maintained two years of Accreditation-Continued. Policy excerpt (10.2) **Enter Initials**.

e) program length, greater than one month.

As the program director, I am aware of this responsibility. **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 this responsibility. **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 Statements and Signatures page found at the bottom of this document.

Required Appendices for Final Provisional Application

Include the following appendices with the 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.

APPENDIX	CONTENT
Appendix 01 (Administration)	a) Downloaded **Program Data Sheet** as a pdf file from the program's ARC-PA program management portal per included directions. b) **Budget** as downloaded and saved as an Excel file per included directions. c) **Physical Facilities TEMPLATE**
Appendix 02	**Do Not Use –** Copies of signed agreements *must* be available for the site visit. **Do not append agreements to this application.**
Appendix 03 (Administration)	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.) **Only** if not available on the web, 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
Appendix 04 (Program Personnel)	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) Downloaded **Program Personnel Excel Export** from the program's ARC-PA program management portal per included directions. c) Current written job descriptions **AND** Curricula Vitae, using **ARC-PA CV TEMPLATES**, for: • Program director • *Medical director* • *Principal faculty* (Job descriptions include duties and responsibilities specific to each *principal faculty* member) d) **Personnel Responsibilities TEMPLATE** e) Mission of the institution and mission of the program, if not available on the web

APPENDIX	CONTENT
	f) Program goals, <u>if not available on the web</u>
Appendix 05 (Policies)	Policies demonstrating compliance with A3.01, A3.04, A3.05, A3.06, A3.07, A3.08, A3.09 and A3.10 as noted in the application and if <u>not available on the web.</u> Reference appended documents in the application narrative and label policies by Standard and by source.
Appendix 06 (Admissions)	a) Blinded sample of correspondence provided to those inquiring about the program, whether provided to them electronically or on paper. b) **Admission Policies and Procedure TEMPLATE** c) Forms to be used to screen student applications and select students for class positions (A3.14)
Appendix 07 (Published for Enrolled Students)	Information demonstrating compliance with A3.15 as noted in the application and if <u>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)	a) **Curriculum Schematic TEMPLATE** b) The program *competencies* (The medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities required for PA practice.)
Appendix 10 (Curriculum)	*Instructional Objectives* as required in the body of the 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) **organized by and labeled with the standard** they address <u>and</u> **identified by course number(s) and course name(s)**. *Do not* 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 **does not** 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 Excel document** from program management portal per SCPE Directions b) **Elective Experiences Outside the United States TEMPLATE**
Appendix 12 (Curriculum)	Program *learning outcomes* for *supervised clinical practice experiences* addressing standards B3.03 a-e.

APPENDIX	CONTENT
	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. ***Learning outcomes* must be organized by and labeled with the substandard they address.**
Appendix 13 (Student Evals)	a) **Student Evaluation TEMPLATE** b) Blank copy(ies) of all 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.

Appendix 14
(Self-Study Report)
	Self-Study Document using ARC-PA provided application and appendices
	    A. Timeline for Data Gathering and Analysis **TEMPLATE**
	    B. Administrative Aspects of the Program and Institutional Resources
	    C. Effectiveness of the Didactic Curriculum
	    D. Effectiveness of the Clinical Curriculum
	    E. Preparation of Graduates to Achieve Program Defined Competencies
	    F. PANCE Performance
	    G. Sufficiency and Effectiveness of Program & Instructional Faculty and Staff
	    H. Success in Meeting the Program's Goals

Appendix 15 (Clinical Site Evals)	Forms used by the program for the initial and ongoing evaluation of clinical sites and *preceptors* to address standard 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 **append evidence of compliance in appendices** as required throughout the application. The site visitors will NOT search this appendix for evidence of compliance. The documents 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

APPENDIX	CONTENT
	record and are the handbooks/manuals the commission will use to verify compliance with the related standards.
Appendix 17	Zip file containing syllabi for standard B1.03 used for **ALL** courses/*rotations* in the curriculum that must include at a minimum: • course name, (academic credit) • course description, • faculty instructor of record, • course goal/rationale, • *learning outcomes* and *instructional objectives* 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. The title of each syllabus file should be the course ID, number, and course name. 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, 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	Document(s) concerning institutional regional accreditation status of probation, if applicable
Use space below to attach other documents in subsequently numbered appendices as needed to support responses	
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

Statements and Signatures for Final Provisional 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 the Program Management Portal

Enter name   Enter date

The name that appears here is deemed an electronic signature.

Program Director: Enter name   Enter date

The name that appears here is deemed an electronic signature.

Material List for Final Provisional 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 during the site visit. Site visitors may not need to review all these materials and may request additional materials/documents prior to or **during the visit**.

See "Organizing Materials Using a Document Sharing Application" document on the ARC-PA website (http://www.arc-pa.org/provisional-accreditation/provisional-accreditation-site-visit-schedule/).

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. *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.*

4. *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.*

5. *Documents identified in the Material List for Final Provisional Visits available at the end of the application.*

1) Program promotional materials and catalogs, access to the program's website
2) Minutes from program committee meetings which may include faculty, curriculum, self-study/planning, etc.
3) Current signed agreements with all institutions involved in the didactic and clinical components of the program. Agreements must be *sufficient* in number to accommodate students on *supervised clinical practice experiences* for the current clinical class(es)
4) List of required texts/resources for students
5) Three-year line-item operational program budget (past year, current year, and projected next year if available)
6) Faculty handbooks/manuals containing relevant policies
7) Materials used to screen applicants for admission to the program
8) Sample of student health forms, if used
9) Actual student records maintained by program office
10) Faculty records to include CVs and written job descriptions that include duties and responsibilities specific to each faculty member for *principal faculty,* the *medical director*, program director and *course director*(s).
11) Spreadsheet (or similar documentation) of all active licensed preceptors (physicians, physician assistants and other licensed health care professionals) who currently precept the *supervised clinical practice experiences/rotations*,

their area of instruction, and name of their associated clinical site as identified on the ARC-PA portal. For each preceptor, provide current licensure information, including expiration dates. In addition, and as appropriate, provide current certification body and expiration dates.

12) Clinical year rotation/SCPE assignment schedule for current class(es)
13) Preceptor files to include evidence of current licensure, current board certification, number of clinical slots for current clinical year, program's documentation of initial and ongoing evaluation to include verification that students are able to achieve program learning outcomes in practice area (B3.04a-d; B3.07a-f) and clinical sites (C2.01a-c)
14) Additional materials that support data collected for the self-study report, but which were not included with 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.
Distant Education	A formal educational process in which 50% or more of the required content/time/credit hours, excluding supervised clinical practice experiences, may

TERM	DEFINITION
	be accrued when the student and instructor/faculty are not in the same physical 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, sexual orientation, socioeconomic status) in a group or organization. Diversity includes all the ways in which people differ, and it encompasses all the different characteristics 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 students 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	Practice involving individuals from different health care professions working together to provide patient centered care in a collaborative manner.
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.
Maximum Class Size	Maximum potential number of students enrolled for each admission cycle as 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 practice standards as they relate to the role of the PA in providing patient care.
Must	The term used to designate requirements that are compelled or mandatory. "Must" indicates an absolute requirement.
NCCPA	National Commission on Certification of Physician Assistants

TERM	DEFINITION
PANCE	Physician Assistant National Certification Exam administered by the National Commission on Certification of Physician Assistants.
Personal wellness	The quality or state of being in good health especially as an actively sought goal. It includes choices and activities aimed at achieving physical vitality, sense of accomplishment, and personal fulfillment.
Preceptor	Any instructional faculty member who provides student supervision during supervised clinical practice experiences.
Principal Faculty	Those faculty working at least 50% FTE with primary academic responsibility assigned to the PA program who report to the program director.
Program Faculty	The program director, medical director, principal faculty and instructional faculty
Prospective Students	Any individuals who have requested information about the program or submitted information to the program.
Published	Presented in written or electronic format.
Readily Available	Made accessible to others in a timely fashion via defined program or institution procedures. Navigation to digital content should take little effort or time.
Recognized Regional Accrediting Agencies	Middle States Commission on Higher Education (MSCHE) New England Commission of Higher Education (NECHE) Higher Learning Commission (HLC) Northwest Commission on Colleges and Universities (NWCCU), Southern Association of Colleges and Schools- Commission on Colleges (SACS COC) Western Association of Schools and Colleges- Accrediting Commission for Community & Junior Colleges (WASC-ACCJC) WASC Senior College & University Commission (WSCUC)
Remediation	The program defined and applied process for addressing deficiencies in a student's 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.
Rotation	A supervised clinical practice experience for which there are published expected *learning outcomes* and student evaluation mechanisms.
Should	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 or institution may be cited for failing to comply with a requirement that includes the term 'should'.
Student Services	Services aimed at helping students reach their academic and career goals. Such 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.
Summative Evaluation	An assessment of the learner conducted by the program to ensure that the learner has the medical knowledge, interpersonal, clinical and technical skills, professional 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.
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

TERM	DEFINITION
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 supervised clinical practice experiences through medical facilities located in the United States 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 Final Provisional Visit 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 4d 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.

A check for the $10,000 interval assessment fee must be mailed to the ARC-PA at the time of submission of the application. The checked should be mailed to:
>ARC-PA
>3325 Paddocks Parkway, Suite 345
>Suwanee, Georgia 30024

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

DIRECTIONS FOR USING PROGRAM PORTAL TO CREATE DATA SHEET FOR APPLICATION OR REPORT TO THE ARC-PA

Log into the Portal. From the Home Page, click on Reports on the menu to the left. Select Program Data Sheet. A Report Filter will appear.

Choose the first option, *Select All*. When this is selected, all other boxes will automatically be selected as they are important components of the **Program Data Sheet** for the application.

Click on "View" to see the report.
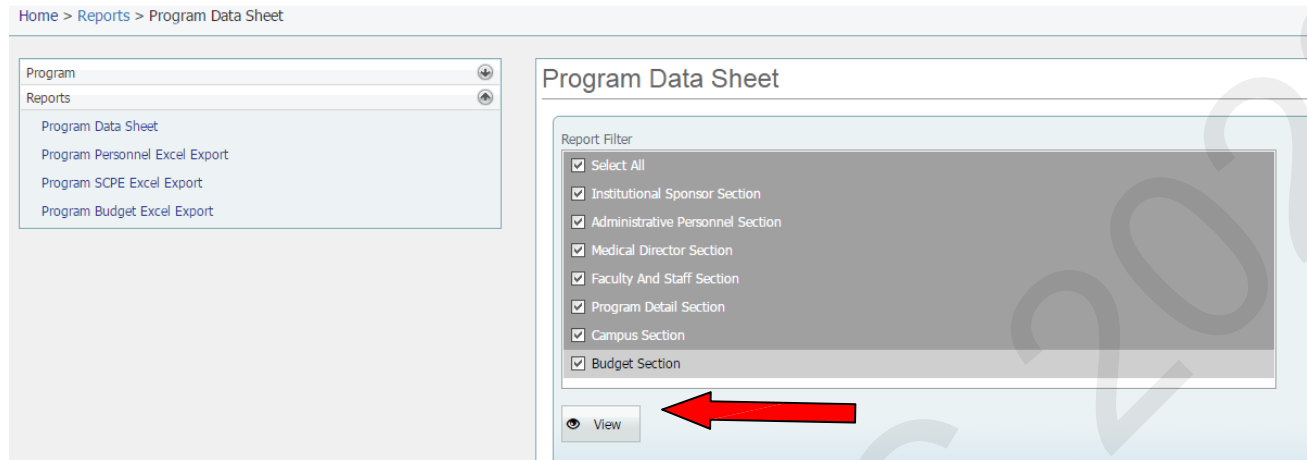
Click on the icon to "Export to" This wording will appear when you hold the cursor over the disk icon.
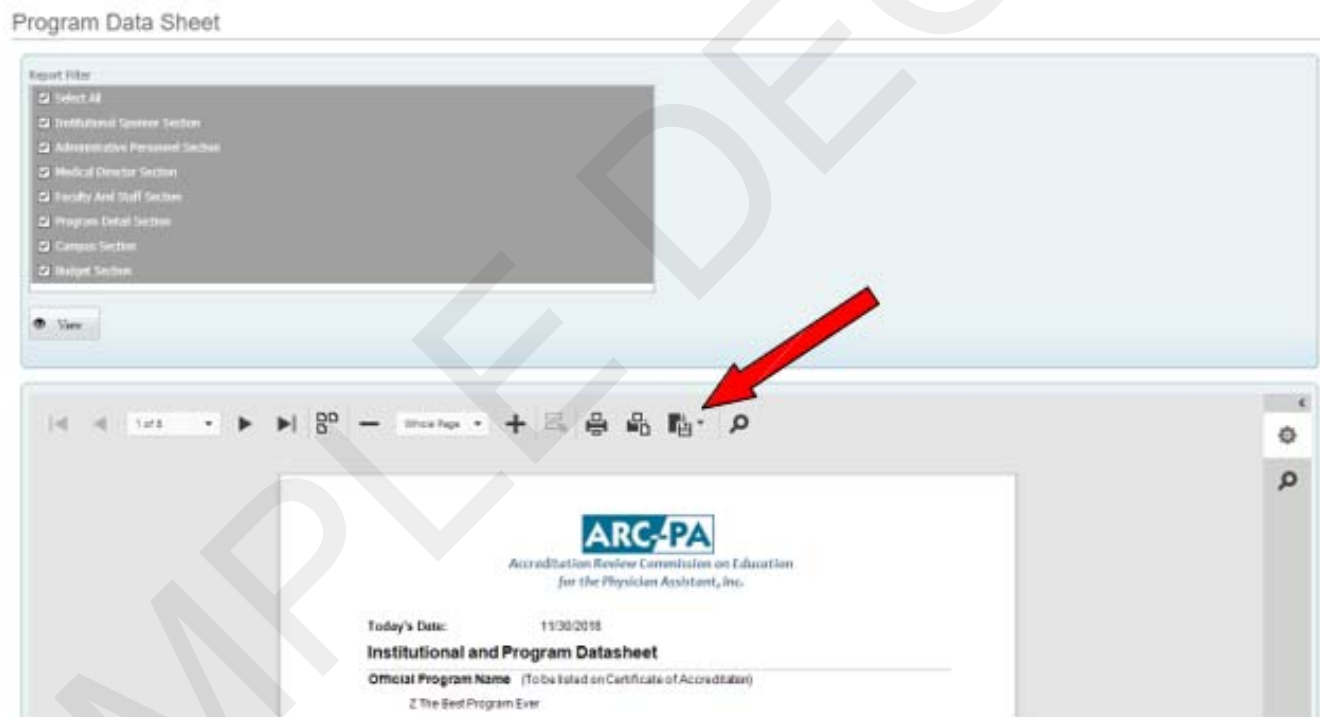
Save the document as directed "Program Data Sheet *insert program name* or *abbreviation*." **Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces. Do not include commas in the document name.**

Keep a copy of the document for your records. Be sure to include the e-copy in the appropriate appendix as directed in the application, form or letter from the ARC-PA.

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

a) Downloaded **Program Data Sheet** as a pdf file from the program's ARC-PA program management portal per directions at http://www.arc-pa.org/portal/.

b) **Budget** as downloaded and saved in an Excel file per directions at http://www.arc-pa.org/portal/

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 4d 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.

**DIRECTIONS FOR USING PROGRAM BUDGET PORTAL TAB TO CREATE AN EXCEL DOCUMENT
FOR APPLICATION OR A REPORT TO THE ARC-PA**

Be sure that the Program Budget tab in the portal is up-to-date and complete.

At a minimum, the budget detail in the Budget tab must include the following:
1) Program budget for salaries, benefits and development. List the total amount available, whether funds are budgeted from the PA Program budget, another departmental/institutional budget or both:
   a. Program **faculty** salaries and benefits (for the total # positions budgeted),
   b. **Staff** salaries and benefits (for the total # positions budgeted),
   c. **Faculty development** (Funding provided to the program director and principal faculty in support of maintenance of certification, licensure, and professional development directly relevant to PA education).
2) Program **operations** (total program budget less salaries and benefits)

When editing the Program Budget tab on the Portal, remember to hit the "Save" button to save changes you have entered.

1) Click on "Reports" and then "Program Budget Excel Export," then click on "Export."
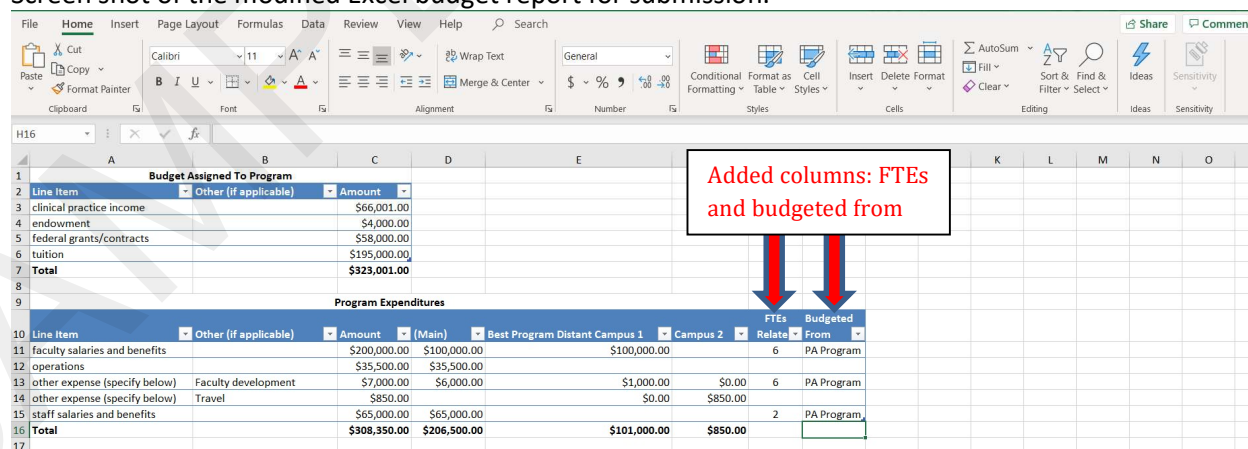
2) OR Download the Program Budget tab data to Excel by pressing "Export to Excel" button on the Program Budget tab on the Program Detail page. If you open the page directly you may receive a notice that requires you to "Enable Editing" before you can see the Totals or otherwise use the file.

January 22, 2021

3) Save the downloaded spread sheet as "**Program Budget *insert program name/abbreviation***"
   Important Note – Abbreviate as necessary; the title should not exceed 20 characters, including spaces. Do not include commas in the document name.

4) On the downloaded copy of the program budget for the application/report **please add the following information to the Excel worksheet:**

a) Add a new column to the right of the last column and title it "FTEs related"

b) Add a second column entitled "Budgeted from"

c) For program faculty salaries and benefits: indicate in the cell adjacent to the budgeted amount (within the column entitled "FTEs related," the total number of faculty FTEs this budgeted amount is for. In the next cell adjacent to the FTEs (within the column entitled "Budgeted from") indicate the budget where this expenditure is funded from, for example, PA Program, College, Dean's Budget, etc.

d) For staff salaries and benefits: indicate in the cell adjacent to the budgeted amount (within the column entitled "FTEs related," the total number of staff FTEs this budgeted amount is for. In the next cell adjacent to the FTEs (within the column entitled "Budgeted from") indicate the budget where this expenditure is funded from, for example, PA Program, College, Dean's Budget, etc.

e) Operations: As indicated in the ARC-PA Program Portal user manual, operations refer to daily operating expenses such as copying, telephone costs, postage, office and lab supplies, books purchased for the program, software, etc. The program budget less salaries and benefits.

f) For faculty development: indicate in the cell adjacent to the budgeted amount (within the column entitled "FTEs related," the total number of faculty FTEs this budgeted amount is for. In the next cell adjacent to the FTEs (within the column entitled "Budgeted from") indicate the budget where this expenditure is funded from, for example, PA Program, College, Dean's Budget, etc.

Screen shot of the modified Excel budget report for submission:

5) Keep a copy of the file for your records. Submit the e-copy in the appropriate appendix or as directed in the application, form, or letter from the ARC-PA.

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Appendix 1c for Final Provisional Visit 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 campus and/or virtually)	Choose yes or no
The program has its own meeting/conference room	Choose yes or no
The program has space for confidential academic counseling of students by faculty	Choose yes or no
The program has secure storage for student files	Choose yes or no

Explain all "no" answers

Appendix 02 *must* be addressed at the site visit.

Copies of signed agreements *must* be available for the site visit. **Do not append agreements to this application.**

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.)

If not available on the web and provided as a link in the application, 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 4d 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) Downloaded **Program Personnel Excel Export** from the program's ARC-PA program management portal per directions at http://www.arc-pa.org/portal/

c) Current 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)

d) **Personnel Responsibilities TEMPLATE**

e) Mission of the institution <u>and</u> mission of the program, <u>if not available on the web</u>

f) Program goals, <u>if available not on the web</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 4d 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 4b Program Personnel Template Name is to be saved in the Appendix 04 folder.

DIRECTIONS FOR USING PROGRAM PORTAL TO CREATE PROGRAM PERSONNEL EXCEL EXPORT

FOR APPLICATION OR REPORT TO ARC-PA

Log into the Portal. Be sure the personnel tab is up to date. From the Home Page, click on Reports on the menu to the left. Select Program Personnel Excel Export.
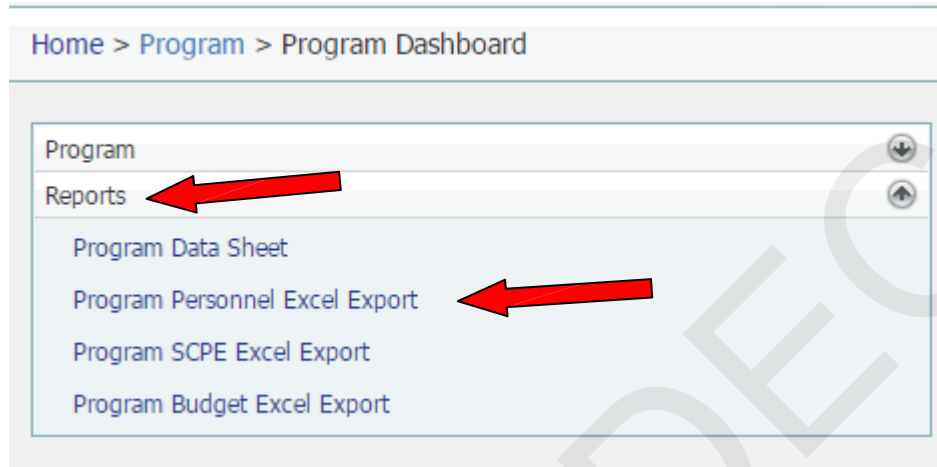
Next, click on "Export."
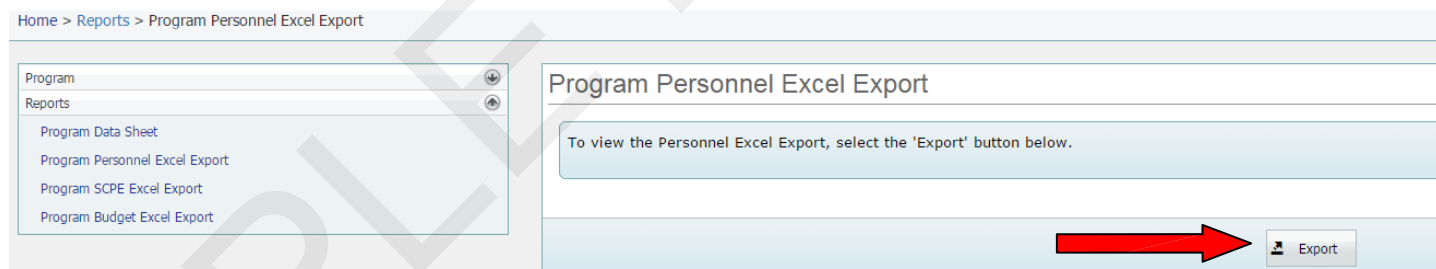
Open the report. (Note that you may have to select "Enable Editing" in order to save the spreadsheet.)

Edit the Excel sheet by clicking on "Data" and then "Sort."

Directions for Application or Report Downloads from Portal

Then click on the drop down by "Sort by" and choose "Standards Required Role" and then click on the "Order" drop down to switch to "Z to A."

Then click on "Add level"

Click on the drop down for "Then by" and add "Program FTE%" and click on "Order" drop down to change to "largest to smallest" and click "ok."
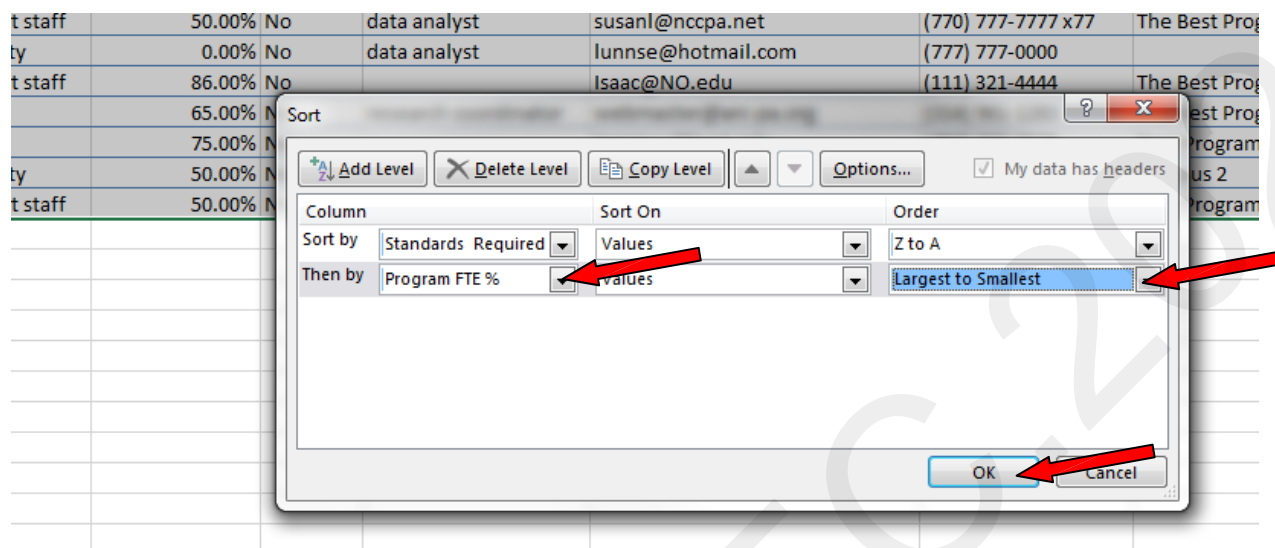
Save the document as directed "Program Personnel *insert program name or abbreviation*." **Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces. Do not include commas in the document name.**

OR the Program Personnel Report can be downloaded from the Program Detail page within the Personnel tab, by clicking on "Export to Excel."
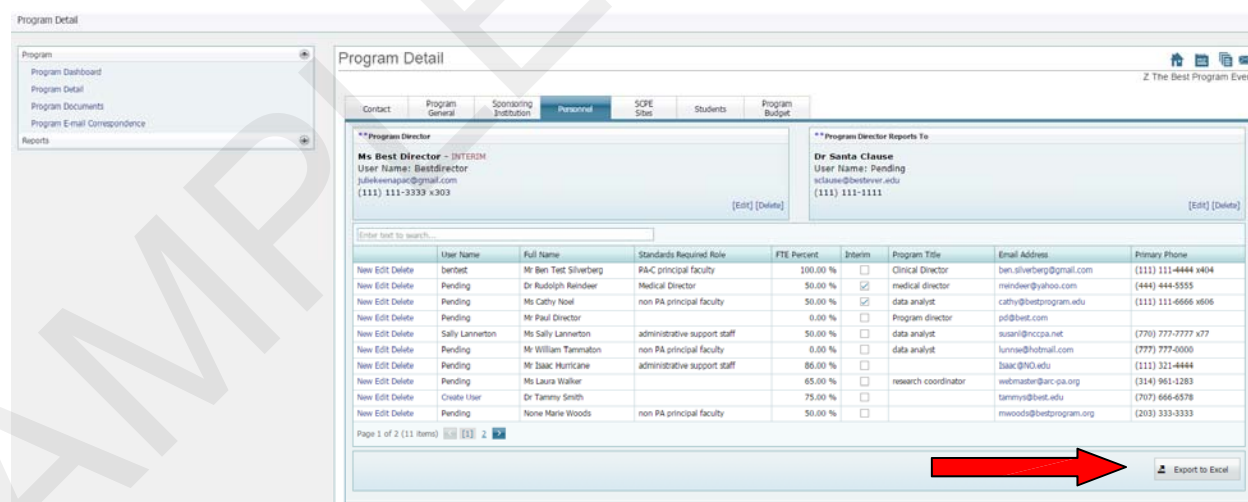
Open the report. (Note that you may have to select "Enable Editing" in order to save the spreadsheet.)

Edit the Excel sheet as indicated above.

Keep a copy of the document for your records. Submit the e-copy in the appropriate appendix as directed in the application, form or letter from the ARC-PA.

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-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 Certification Year**	**Next Re-Certification Year**
Certifying body	Year	Year
Certifying body	Year	Year
Certifying body	Year	Year
Certifying body	Year	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 4 for Final Provisional 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.

Responsibilities	Individual Name and Title (use abbreviations)															
	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	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	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Responsibilities	Individual Name and Title (use abbreviations)															
	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title	Enter name and title
Mission statement review/revision	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
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(s) for **Appendix 05** in this folder:

Policies demonstrating compliance with A3.01, A3.04, A3.05, A3.06, A3.07, A3.08, A3.09 and A3.10, as noted in the application and if not available on the web. Reference appended documents in the application narrative and label policies by Standard and by source.

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 4d 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 on paper

b) **Admission Policies and Procedure TEMPLATE**

c) Forms to be used to screen student applications and 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 4d 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 Final Provisional Visit Application

Admission Policies and Procedures TEMPLATE

Program: Enter name of program

1) **Provide** the URL(s) where defined and *published* practices of the institution and program relating to admissions are found.

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

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 ABC is to be saved in the Appendix 06 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	☐	☐	☐
Community organizations representatives	☐	☐	☐

Individual	Application Screening	Interviewing	Final selection decision
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 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 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 4d 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(s) 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 4d 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 Final Provisional Visit Application

Institutional and Program Records TEMPLATE

Program: Enter name of program

Complete the following:

Document	Maintained: yes/no		Where Maintained: program files or elsewhere in institution	
		If yes, for how long		**If elsewhere in institution, specify where**
Student admission record	Select	Enter text	Select	Enter where maintained
Results of selection interviews	Select	Enter text	Select	Enter where maintained
Advanced placement met	Select	Enter text	Select	Enter where maintained
Student performance in program	Select	Enter text	Select	Enter where maintained
Evidence student has met completion requirements	Select	Enter text	Select	Enter where maintained
SCPE assignments	Select	Enter text	Select	Enter where maintained
Academic advising records	Select	Enter text	Select	Enter where maintained
Disciplinary action records	Select	Enter text	Select	Enter where maintained
Remediation records	Select	Enter text	Select	Enter where maintained
Dismissal records	Select	Enter text	Select	Enter where maintained
Assurance of health screening	Select	Enter text	Select	Enter where maintained
Assurance of immunization requirements	Select	Enter text	Select	Enter where maintained
Faculty teaching assignments	Select	Enter text	Select	Enter where maintained
Faculty job descriptions	Select	Enter text	Select	Enter where maintained
Principal faculty CVs	Select	Enter text	Select	Enter where maintained
Course director CVs	Select	Enter text	Select	Enter where maintained
Program committee minutes (specify 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
Other: Enter text	Select	Enter text	Select	Enter where maintained
Other: 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.)

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 4d 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 Final Provisional Visit 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/ Didactic
SCPE   Clinical/*Supervised Clinical Practice Experiences*
V   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.

SAMPLE PROGRAM												
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												
5												

Comment: The students have a two week break in December year 1 and a one 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   Clinical/*Supervised Clinical Practice Experiences*

Only include coursework for the PA program curriculum. Do not include any pre-requisite courses or post-graduation 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 all courses 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 PROGRAM				
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 entered for actual program				
2	PA 661 Internal Medicine	SCPE	August/2	September/2
3	PA 567 Lecture Series	D	July/3	July/3
3	PA662 Pediatrics	SCPE	August/3	September/3
3	PA 663 General Surgery	SCPE	October/3	November/3
Other courses entered for actual program				

Comments: All rotations start in August of the second year for all students. Sequence varies for each student.

Applicant Program				
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
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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

Comments: Click here to enter text

Place the following program-created documents for **Appendix 10** in this folder:

Instructional Objectives as required in the body of the 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) **organized by and labeled with the standard** they address <u>and</u> **identified by course number(s) and course name(s)**. *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,
> <u>PA 501 Research Methods</u>
> - 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
> <u>PA 501 Research Methods</u>
> - 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.
> <u>PA 459 Introduction to PA Practice</u>
> - 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.
> <u>PA 500 Ethics and Law</u>
> - 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 4d 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 Excel document** from program management portal per SCPE Directions at http://www.arc-pa.org/portal/
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 4d 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.

DIRECTIONS FOR USING SCPE PORTAL TAB TO CREATE EXCEL DOCUMENT FOR APPLICATION OR REPORTS TO ARC-PA ABOUT NUMBER AND TYPES OF CLINICAL SITES USED
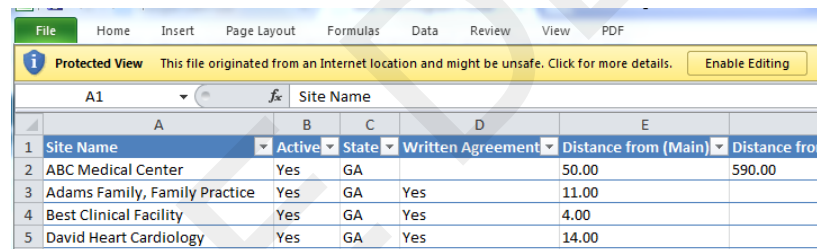
A. To export SCPE information to a spreadsheet **for SINGLE CAMPUS programs**:

   Note: Make sure that all **SCPE** information is updated before exporting to Excel.

1 From the **Program Detail** Page, select the **SCPE** tab.

2 At the bottom of the page, click the **Export to Excel** button.

   The information on the page is exported into a downloaded Excel file. Depending on your browser and the version of Microsoft Office you have installed, the downloaded Excel file may appear in various locations on your screen (most commonly, the exported file will appear in the bottom left corner of your screen). The exported file created contains all the information displayed in the columns on the **SCPE** tab of the portal.

3 Open the file. Enable editing, if asked.

Note: Any changes you make in the Excel file do not affect the information in the SCPE tab in the portal. Also, to keep your Excel file up-to-date, you will need to use the **Export to Excel** button each time you modify the information in the **SCPE** tab in the portal.

4 Sort the data in the columns so that the sites are sorted first by those that are active, then by those with agreements and finally sorted alphabetically. This will place the active sites with agreements listed at the top of their respective columns.
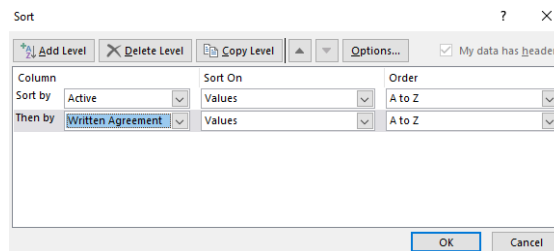
5 Delete all rows representing sites that are not active (i.e. are not being used for SCPEs in the clinical phase covered by the application). Delete all rows representing sites that do not have written agreements. **Note: Do not delete the bottom "TOTAL" row.**

Site Name	Active	St	W	Distance	Dist	Dist	outpatient	inpatient	emergency department	operating room	family med	internal med	behavior & ment	emerg	peds	elective	gen surg	ob/gyn	geriatrics
Adams Family, Family Practice	Yes	GA	Yes	11.00			X				6				6			6	
Best Clinical Facility	Yes	GA	Yes	4.00			X	X			25	50	10						
David Heart Cardiology	Yes	GA	Yes	14.00			X	X								1			
Notso Great Facilitiy	Yes	GA	Yes	10.00			X		X		6				6				
Susie Smilth, DO	Yes	GA	Yes	30.00			X	X				6				5			
Test Emergency Department	Yes	DC	Yes	560.00					X					-1					
University Hospital	Yes	GA	Yes	1.00			X	X	X			30		15			40	5	
XYZ Site	Yes	AL	Yes	1.00												1			1
ABC Medical Center	Yes	GA		50.00	590.00	248.00	X	X	X	X		2		3	4		1	3	
Hospital for Joint Disease	Yes	GA		2.50				X		X							12		
ENT Specialist		AR	Yes	5.00	8.00	22.00	X	X			1			4			7		
Family Health Care		GA	Yes	1.00			X				2			2					
Hoppie Rabbit, LCSW		AR	Yes	300.00			X							5		3			
joe site		AR	Yes	0.00				X		X				7		5	4		
Jones, Dr. Bob		GA	Yes	3.00			X				4								
New Release Hospital		AR	Yes	235.00				X			44		4						
New test tise		AZ	Yes	500.00				X								4			
Sad Clinic		GA	Yes	12.50			X							1					
The Best Family Medicine Site Ever		DE	Yes	20.00			X				12								
Joe Jones, MD		CA		2300.00			X				5				6				
New Release Clinic		FL		245.00				X		X							7		
So-so Rehab Center		GA		12.00			X	X								5			
Total											105	88	22	34	21	14	76	14	1

In this example: delete all grayed rows in the spreadsheet, without deleting the last "Total" Row. After deleting, the columns will update to reflect the total number of placements in active sites with agreements.

Save the spread sheet as "SCPE for Application to the ARC *insert program name*" OR "SCPE for Change Request to the ARC *insert program name*" OR "SCPE for Report to the ARC *insert program name.*"

Keep a copy of the file for your records. Submit the e-copy in the appropriate appendix or as directed in the application, form or letter from the ARC-PA.

There is NO way to upload the SCPE data from program files directly into the portal SCPE tab, due to virus and security issues. Program personnel will have to enter the data. Once data is entered into the portal it may be downloaded and printed or saved to your computer in various formats.

Appendix 11b for Final 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 all 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* expected 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 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 4d 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 all 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 4d 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 Final Provisional Visit Application

Student Evaluation TEMPLATE

Program: Enter name of program

Indicate which method(s) of evaluation are used during the didactic **and** *supervised clinical practice experience* components of the program **and** the method(s) used as part of the *summative evaluation*.

Course or rotation 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	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
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Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Course or rotation 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
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
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Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
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Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Course or rotation 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
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Enter method	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Comments: Click here to enter text

Place the following document(s) for **Appendix 14** in this folder:

Self-Study Document using ARC-PA provided application and appendices
  A.   Timeline for Data Gathering and Analysis **TEMPLATE**
  B.   Administrative Aspects of the Program and Institutional Resources
  C.   Effectiveness of the Didactic Curriculum
  D.   Effectiveness of the Clinical Curriculum
  E.   Preparation of Graduates to Achieve Program Defined Competencies
  F.   PANCE Performance
  G.   Sufficiency and Effectiveness of Program Faculty and Staff
  H.   Success in Meeting the Program's Goals

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: App14F PANCE Perform Name. **Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.**

The SSR 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 Appendix 14 folder.

SELF-STUDY REPORT©

For Final Provisional Visit

To be submitted with application in Appendix 14

December 2023

This document is to be used by accredited PA programs with a status of accreditation-provisional scheduled for a Final Provisional Visit.

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 constitutes the content of the Self-Study Report (**SSR, Appendix 14**).

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.

DATA

In addition to the data required in the SSR, the program may provide additional data but only enough to support pertinent conclusions in the analysis. All source data should be available to the site visitors.

When incorporating relevant data from other areas (focus groups, PANCE system/task scores, faculty evaluation of their courses, etc.) provide an aggregate summary of the data being referenced. Follow the instructions for naming and saving the document in the appropriate folder.

When incorporating relevant data from other appendices, e.g., PANCE pass rates or student feedback, provide specific reference to the other appendices, including SSR appendix, data file name, appropriate table or graph and/or page number.

When qualitative data is cited (e.g. comments from a survey), provide a summary of the data and explain the method for analyzing it, e.g. number or percent of comments and/or trends over time. Report response rates.

Where data collection tools employ scales, state the scale used and provide definitions for each of the available scores. Report response rates.

Where called for, explicitly state benchmarks and explain the rationale for choosing that particular level of benchmark.

In general, use terminology from the *Standards*, upon which the SSR requirements are based, referring to the Glossary as needed.

ANALYSIS

It is important that the program pay close attention to the ARC-PA's definition of analysis as noted in the Glossary of the *Standards*: 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.

THE FOUR KEY ELEMENTS OF ANALYSIS

1. The first element is the regular and ongoing collection of data. For ease of use and interpretation, the collected quantitative and qualitative data must be clearly displayed in tables and charts.
2. The second element is the analysis of data. This includes discussing and interpreting the correlations and trends relating the data to the expectations or issues of the program. This is to be demonstrated by succinctly written narratives which highlight the correlations/ relationships and trends.
3. The third element is application of results and the development of conclusions based on study of the data. These must be succinctly stated, showing the link between analysis and conclusions. This includes identification of strengths as well as areas in need of improvement.
4. The fourth element is the development of an action plan to operationalize the conclusions. Actions plans, too, must be succinctly stated and should logically result from the conclusions drawn from critical analysis of data.

ARC-PA EXPECTATIONS

Programs are asked to "**Provide Narrative** about the analysis based on data collected and displayed." The ARC-PA expects that the program will use the data it has collected and placed in the tables and templates (as provided by the ARC-PA or as provided by the program), to discuss and interpret the correlations and trends relating the data to the expectations or identified issues or concerns of the program. It expects the program to apply the results and draw conclusions based on and related to the data and relationships of the data to the program expectations, issues or concerns. This includes identification of strengths (outcomes of analysis described in the SSR that indicate the program is meeting or exceeding its benchmarks or goals) as well as areas in need of improvement.

In general, programs are expected to explicitly state the links between the data, analysis, conclusions and actions in the analysis and actions narratives.

TECHNICAL **D**IRECTIONS FOR **C**OMPLETING THE **S**ELF-**S**TUDY **R**EPORT **(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.

The SSR and appendices are "protected." Tables, or graphs **MAY NOT** be added to text boxes. You may add as an appendix if needed in your response. 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: App14F PANCE Perform Name. **Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 20 characters, including spaces.** The SSR 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 **Appendix 14** folder.

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

NOTE ABOUT **A**PPENDICES TO THE **A**PPLICATION
Throughout this document, references are made to required content and data for required appendices to the SSR. 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 respond to all required narratives in the appendices.

THE **P**ORTAL
The ARC-PA will review the program's Program Management Portal data in conjunction with its review of the application. The program is expected to have all data, in all tabs and sub tabs, accurate and up to date.

APPLICATION OF RECORD: The application submitted by the program to the ARC- PA office is considered the program's <u>application of record</u>. 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 are to be sent with the program's response to observations.

SELF-STUDY REPORT[©]

For Final Provisional Visit

Insert program name and location (city, state):

Click here to enter text.

STANDARDS SECTION C: EVALUATION

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 a narrative overview describing the program's established, formal, continuous self-assessment process utilized throughout the academic year and in all phases of the program (C1.01a-g).

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 addressing the program's process of data collection and analysis provided in each of the **Appendices 14B through 14H.**

The program may reference information provided in Appendices 14B through 14H addressing the program's process of data collection and analysis but should not repeat the narrative here.

Click here to enter text.

Complete ARC-PA Timeline for Data Gathering and Analysis TEMPLATE for placement in **Appendix 14A.** (To support the process described in response to C1.01 above)

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.

Described in response to C1.01 a-g and verified by review of the submitted self-study report and discussion with site visitors at the time of the site visit.

Self-Study Report

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.

Complete **ARC-PA Student Attrition TEMPLATE**.

Complete the table for the three most recent graduating classes and the classes currently enrolled. This data will be used in analysis documented in several appendices of the self-study report. Use the **Comment** section to explain program nuances.

Note: Students who *remediated* represent students who did not leave the program. They are not to be included in this attrition table as a separate category. *Remediation* may or may not involve *deceleration* within the program. If students who *remediated* also *decelerated*, they may be listed as a *decelerated* student. *Remediation* of students is addressed elsewhere in the application.

- Class of: insert year class cohort will complete the program.
- Entering class size is the number of students newly enrolled for each admission cycle.
- If student took leave of absence, indicate in the comments when/if the student returned.
- *Deceleration* is defined as the loss of a student from the entering cohort, who remains matriculated in the physician assistant program. If a student decelerated, indicate in the comments when the student returned.
- Total attrition in this table reflects the number of students from the entering class who did not complete the program with the rest of the cohort, either due to leave of absence, *deceleration*, dismissal or withdrawal.   Do not list any one student in more than one category. For example, if a student took a leave of absence and *decelerated*, select the option that best describes that student's situation. Use comments for description if necessary.
- Number joining class cohort who began with different cohort reflects those who began with a previous cohort and either *decelerated* or took a leave of absence and returned to join a different class.
- Graduates or anticipated graduates is the total of the entering class size minus attrition plus the number joining from another cohort.

ARC-PA Student Attrition TEMPLATE

	Graduated Classes			Current Classes		
	Class of Year	**Class of** Year	**Class of** Year	**Class of** Year	**Class of** Year	**Class of** Year
Maximum entering class size (as approved by ARC-PA)	#	#	#	#	#	#
Entering class size	#	#	#	#	#	#
Number who took leave of absence	#	#	#	#	#	#
Number who decelerated	#	#	#	#	#	#
Number of withdrawals	#	#	#	#	#	#
Number of dismissals	#	#	#	#	#	#
Total attrition	#	#	#	#	#	#
Number joining class cohort who began with different cohort	#	#	#	#	#	#
Graduates	#	#	#	#	#	#
Anticipated graduates	#	#	#	#	#	#

Comments:

Click here to enter text.

Appendix 14B: Administrative Aspects of the Program and Institutional Resources
This appendix requires the program to submit data and *analysis* to assess the *sufficiency* and *effectiveness* of administrative aspects of the program (policies, procedures, admissions processes and outcomes) and institutional resources (financial, human, physical, technology, student services, etc.)

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14B.**

Appendix 14C: Effectiveness of the Didactic Curriculum
This appendix requires the program to submit data and *analysis* related to student evaluation of didactic courses and instructors, the number of final grades of C or below for didactic courses, and student attrition and *remediation* in didactic courses.

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14C.**

Appendix 14D: Effectiveness of the Clinical Curriculum
This appendix requires the program to submit data and analysis related to student evaluation of *rotations* and *preceptors*, the number of final grades of C or below for *rotations*, and student attrition and *remediation* in *rotations*.

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14D.**

Appendix 14E: Preparation of Graduates to Achieve Program Defined Competencies
This appendix requires the program to submit data and *analysis* related to student attrition, *summative evaluation* performance, student exit/graduate feedback and faculty evaluation of the curriculum to assess its ability to prepare students to achieve program defined *competencies.*

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14E.**

Appendix 14F: PANCE Performance
This appendix requires the program to submit data and *analysis* related to program evaluation of PANCE outcomes (overall PANCE pass rate and PANCE content/task areas) and:
- Admissions criteria
- Effectiveness of the didactic curriculum
- Effectiveness of the clinical curriculum
- Breadth and depth of the curriculum
- Student summative evaluation
- Remediation efforts and outcomes
- Student progress criteria and attrition
- Feedback from students who were unsuccessful on PANCE

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14F.**

Appendix 14G: Sufficiency and Effectiveness of Program Faculty and Staff
This appendix requires the program to submit data and analysis related to *sufficiency* and *effectiveness* of *program faculty*, s*ufficiency* and *effectiveness* of *administrative support staff* and faculty and staff changes.

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14G.**

Appendix 14H: Success in Meeting the Program's Goals

This appendix requires the program to submit data and *analysis* related to the *effectiveness* in meeting its goals.

Provide a tabular or graphic display of data with narrative as requested for **Appendix 14H.**

**Required Appendices for Self-Study Report for
Final Provisional Visit Application**

The appendix is to be saved with the inclusion of an abbreviation of the program's name at the end of the document name. For example: App14 SSR ABC Univ**. Important Note – Abbreviate as necessary; the title may not exceed 20 characters, including spaces.**

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.

Include the following appendices with the Self-Study Report:

APPENDIX	CONTENT
Appendix 14A	Timeline for Data Gathering and Analysis **TEMPLATE**
Appendix 14B	Administrative Aspects of the Program and Institutional Resources
Appendix 14C	Effectiveness of the Didactic Curriculum
Appendix 14D	Effectiveness of the Clinical Curriculum
Appendix 14E	Preparation of Graduates to Achieve Program Defined Competencies
Appendix 14F	PANCE Performance
Appendix 14G	Sufficiency and Effectiveness of Program Faculty and Staff
Appendix 14H	Success in Meeting the Program's Goals

Saving and Submission of Self-Study Report with Appendices

The program must save the SSR and each lettered appendix 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 **DO NOT save the documents as a PDF**.

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

SSR Appendix 14A

Timeline for Data Gathering and Analysis TEMPLATE
(To support the process described in response to C1.01 and the process described within each of the SSR appendices)

Complete the table below representing the program's 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.) is responsible for study of the data.

Save this document in a folder labeled **App14**. 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 any 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)
Appendix 14B Administrative Aspects of the Program and Institutional Resources	*Sufficiency of institutional resources* (human, technology, physical)				
	Student Exit Survey Faculty Annual Program Evaluation	Annual – August Annual- November	Program Coordinator Program Director	Annual Program Retreat February Annual Program Retreat February	Program Faculty

Relevant Appendix	Data Source	Timing of Data Collection	Responsible Party(ies)	Timing of Data Analysis	Responsible Party(ies)
Appendix 14B Administrative Aspects of the Program and Institutional Resources	*Sufficiency of institutional resources*: (human, technology, 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
	Sufficiency of institutional support resources: (financial, faculty development, clinical site development, curriculum design and course selection, program assessment, and program *diversity, equity* and *inclusion*)				
	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 administrative aspects of the program: Admissions process and outcomes				
	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 administrative aspects of the programs: Program policies/procedures				
	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
Appendix 14C Effectiveness of the Didactic Curriculum	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
	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
	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 *remediation* 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
Appendix 14D Effectiveness of the Clinical Curriculum	Student evaluation of *rotations* 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 *preceptors* 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
	Number of *rotation* 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 Defined Competencies	Exiting Student/Graduate Feedback	Click here to enter text	Click here to enter text	Click here to enter text	Click here to enter text
	Faculty evaluation of the curriculum: (List sources of data used by faculty to evaluate 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
Appendix 14G Sufficiency and Effectiveness of Program Faculty and Staff	*Sufficiency* of *program faculty*				
	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 *administrative 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
	Effectiveness of *program faculty*				
	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 *administrative 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 14H Success in meeting program goals	Success in meeting program *goals*				
	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 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.

SSR Appendix 14B

Evaluation of Administrative Aspects of the Program and Institutional Resources

This appendix requires the program to submit data and analysis to assess the *sufficiency* and *effectiveness* of administrative aspects of the program and institutional resources.

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA

Describe how the program collects data regarding the *sufficiency* of institutional resources.

Click here to enter text.

Describe how the program collects data regarding the *effectiveness* of administrative aspects of the program.

Click here to enter text.

Provide tabular or graphic displays of data collected by the program (both quantitative and qualitative) assessing institutional resources over the past three years. This data should indicate the *sufficiency* of institutional resources provided to the program.

Provide tabular or graphic displays of data collected by the program (both quantitative and qualitative) assessing administrative aspects of the program over the past three years. This data should indicate the effectiveness of administrative aspects of the program.

When creating your data display(s) data must (at a minimum) support pertinent conclusions documented in the *analysis* narrative below and as related to the A section of the *Standards*:

- Institutional resources in support of the program
  - Financial resources
  - Human resources
  - Physical resources
  - Technology resources and support
  - Safety and security, and *student services* (defined in the glossary as: academic advising, tutoring, career services, financial aid, student health, computing and library resources and access)
  - Support for faculty development, clinical site development, curriculum design and course selection, program assessment, and program *diversity, equity,* and *inclusion*
- Program administrative aspects
  - Policies/procedures
  - Admissions processes and outcomes

When creating your data display(s) please keep in mind:
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis* (do not append raw data).
- Qualitative data themes used in the analysis must be reported and summarized in the narrative or displayed in a table that directly supports the relevant *analysis* (do not append raw data).

- Data is to be presented in a way that allows for appreciation of trends over time.
- Programs may reference data and or analysis in other parts of the SSR. Reference to data must be specific including the SSR appendix, data file name, appropriate table or graph and/or page number.

Save the documents in a folder labeled **App14B**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.
For example, App 14B AdminAspects UABC or App 14B InstitutResource 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.

ANALYSIS AND CONCLUSIONS

In relation to the data identified in this appendix, address the following:

Provide Narrative describing the program's approach to analysis of the quantitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.

If the program did not collect quantitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the program's approach to analysis of the qualitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.
If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the *analysis* of all data collected and displayed. Include resulting conclusion(s) and application of the *analysis* to the program.

Click here to enter text.

Strengths: Use the table below to list the strengths of the program identified as a result of the data analysis and conclusions documented in this appendix. If none, then leave this section blank.

Strengths
Click here to enter text
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Comments: Click here to enter text

Areas in need of improvement: As a result of the data analysis and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program's process of ongoing self-assessment**. If none**, then leave this section blank.

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
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 to enter text	Click here to enter text.	Click here to enter text	Click here to enter text	Click here to enter text
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Comments: Click here to enter text

SSR Appendix 14C

Effectiveness of the Didactic Curriculum

This appendix requires the program to submit data and analysis related to *effectiveness* of the didactic curriculum to include student evaluation of didactic courses and instructors, the number of final didactic course grades at C or below, and student attrition* and *remediation* in didactic courses.

*For this appendix the program will reference **Student Attrition** data provided in **Appendix 14, SSR**.

Narrative addressing the program's approach to data collection and analysis should parallel or be consistent with the program's narrative provided for C1.01.

DATA

Student Evaluation Data: Provide a tabular or graphic display of student didactic course evaluation data collected by the program (both qualitative and quantitative) for the **three** most recent graduating classes as well as the classes currently enrolled. (If the most recent cohort has completed less than three months of the program, do not include that cohort.)

Provide a tabular or graphic display of student evaluation data collected by the program (both qualitative and quantitative) for the program director*, medical director, principal faculty* and each *instructional faculty* instructing a didactic course in the curriculum for the **three** most recent graduating classes as well as the classes currently enrolled. (If the most recent cohort has completed less than three months of the program, do not include that cohort.)

This data must indicate the students' perceptions about the *effectiveness* of the didactic courses, and faculty as the instructor(s) for each course. Data must be provided for every didactic course **and** every didactic course instructor as distinct, separate data.

When creating your data display(s) please keep in mind:
- Didactic courses must be listed by course name and number
- Summary data must be included for **all** didactic courses
- Faculty must not be identified by name but must be identified by terms found in the glossary (PD, MD, PF, IF) along with an anonymous identifier (e.g.: PF-1, PF-2, IF-1, IF-2).
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis.* (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant *analysis* (do not append raw data).
- Data must be presented in a way that allows comparison across courses for faculty who may have taught multiple courses and allows appreciation of trends over time. Programs may reference data and or analysis in other parts of the SSR. Reference to data must be specific including the SSR appendix, data file name, appropriate table or graph and/or page number.

Save the documents in a folder labeled **App14C**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.
For example, App 14C StudCourseEval UABC or App 14C StudInstructEval 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.

Number of Final Didactic Course Grades of C or Below: Provide Narrative describing how the program tracks failure rates in individual courses <u>and</u> how it uses that data as part of its ongoing *analysis* and self-assessment process.

Click here to enter text.

Complete ARC-PA **Number of Final Didactic Course Grades of C or Below TEMPLATE** with included narrative following the example as shown below.
- Include <u>all didactic courses,</u> sequentially as they occur in the program.
- Enter class cohorts by year of graduation. List the number of grades C or below for the **three** most recent graduating classes as well as the classes currently enrolled.
- Within each course box by class year, list the number of students receiving grades of C, the number receiving Ds, the number receiving Fs. Do not separate grades by + or -, e.g., C+ or C- is still considered a C grade.

SAMPLE Course Number and Title	SAMPLE Class Cohort by year					
	Graduated			Currently Enrolled		
	YYY1	YYY2	YYY3	YYY4	YYY5	
	Total Number of Students					
	40	42	45	46	40	
	Number of Final Didactic Course Grades of C or Below					
PA 500 Anatomy	0	0	0	3C	0	
PA 501 Physical Diagnosis	0	1C	0	0	1C 1D	
PA 550 Pharmacology II	3F 1C	0	1F	1F	n/a	

SAMPLE Comments: n/a = class of YYY5 has not completed 550 Pharmacology II yet.

Number of Final Didactic Course Grades of C or Below TEMPLATE

Course Number and Title	Class Cohort by year					
	Graduated			Currently Enrolled		
	Year	Year	Year	Year	Year	Year
	Total Number of Students					
	#	#	#	#	#	#
	Number of Final Didactic Course Grades of C or Below					
Click here to enter text.	#	#	#	#	#	#
Click here to enter text.	#	#	#	#	#	#
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Course Number and Title	Class Cohort by year					
	Graduated			Currently Enrolled		
	Year	Year	Year	Year	Year	Year
	Total Number of Students					
	#	#	#	#	#	#
	Number of Final Didactic Course Grades of C or Below					
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Course Number and Title	Class Cohort by year					
	Graduated			**Currently Enrolled**		
	Year	Year	Year	Year	Year	Year
	Total Number of Students					
	#	#	#	#	#	#
	Number of Final Didactic Course Grades of C or Below					
Click here to enter text.	#	#	#	#	#	#
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Comments: Click here to enter text.

<u>STUDENT REMEDIATION DATA</u>

Remediation is defined by the ARC-PA as *the program defined and applied process for addressing deficiencies in a student's knowledge and skills, such that the correction of these deficiencies is measurable and can be documented.*

How many students have repeated didactic courses in the **three** most recent graduating classes as well as the classes currently enrolled? Click here to enter number.

For how many students in the **three** most recent graduating classes as well as the classes currently enrolled has the program identified deficiencies in knowledge and skills during the didactic curriculum, such that the correction of these deficiencies (*remediation*) was necessary for the student to continue in the program (**not including** those who repeated a didactic course)? Click here to enter number.

IF any students repeated or *remediated* didactic courses as indicated in the above two questions, **include** remediation data (e.g. aspects of program *remediated* or repeated) and outcomes (e.g., progress in the program, graduation rates, *PANCE* pass rates) analysis in the analysis narrative below.

<u>ANALYSIS AND CONCLUSIONS</u>

In relation to the data identified in this appendix (student evaluation of didactic courses and instructors, the number of final grades of C or below for didactic courses, and student attrition and *remediation* in didactic courses)**:**

Provide Narrative describing the program's approach to analysis of the quantitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.

Click here to enter text.

Provide Narrative describing the program's approach to analysis of the qualitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.
If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the *analysis* of all data collected and displayed. Include resulting conclusion(s) and application of the *analysis* to the program.

Click here to enter text.

Strengths: Use the table below to list the strengths of the program identified as a result of the data analysis and conclusions documented in this appendix. If none, then leave this section blank.

Strengths
Click here to enter text
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Strengths
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Comments: Click here to enter text.

Areas in need of improvement: As a result of the data *analysis* and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program's process of ongoing self-assessment**.** If none, then leave this section blank.

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
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Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
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Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date

Comments: Click here to enter text.

Effectiveness of the Clinical Curriculum

This appendix requires the program to submit data and analysis related to *effectiveness* of the clinical curriculum to include student evaluation of clinical *rotations* and *preceptors*, the number of final clinical *rotation* grades of C or below, and student attrition* and *remediation* in clinical *rotations.*

*For this appendix the program will reference **Student Attrition** data provided in **Appendix 14, SSR**.

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA

Student Evaluation Data: Provide a tabular or graphic display of student clinical *rotation* evaluation data collected by the program (both quantitative and qualitative), aggregating and displaying data by medical discipline of the *rotation* for the **three** most recent graduating classes as well as the classes currently enrolled.

Provide a tabular or graphic display of student *preceptor* evaluation data collected by the program (both quantitative and qualitative), aggregating and displaying data by medical discipline of the *preceptor*, for the **three** most recent graduating classes as well as the classes currently enrolled.

This data must indicate the students' perceptions about the *effectiveness* of the *rotations* **and** *preceptors*. Data must be provided for every clinical *rotation* by type (medical discipline). Provide data for clinical *rotations* **and** *preceptors* as aggregate per type of *rotation* (by medical discipline). Identify data for any individual *rotation* or *preceptor* who fell below the program benchmark as distinct data. Data must be clearly labeled to identify the *rotation* data **separate from** *preceptor* data.

When creating your data display(s) please keep in mind:
- *Rotations* must be listed by type (medical discipline)
- Data must be included for all clinical *rotations*
- *Preceptor* data must be aggregated by medical specialty/discipline
- Individual *preceptors* who fell below the program benchmark must not be identified by name but must be identified with an anonymous identifier
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis.* (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant *analysis* (do not append raw data).
- Data must be presented in a way that allows comparison among *rotation* evaluations and allows appreciation of trends over time. Programs may reference data and or analysis in other parts of the SSR. Reference to data must be specific including the SSR appendix, data file name, appropriate table or graph and/or page number.

Save the documents in a folder labeled **App14D**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.

For example, App 14D StudRotEval UABC or App 14D StudPreceptEval 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.

Number of Final Clinical *Rotation* Grades of C or Below: Provide Narrative describing how the program tracks failure rates in individual *rotations* <u>and</u> how it uses that data as part of its ongoing *analysis* and self-assessment process.

> Click here to enter text.

Complete ARC-PA **Number of Final Clinical *Rotation* Grades of C or Below TEMPLATE** with included narrative following the example as shown below.

- Include all *rotations*.
- Enter class cohorts by year of graduation. List grades of C or below for the **three** most recent graduating classes as well as the classes currently enrolled.
- For each *rotation*, by class year, list the number of students receiving grades of C, the number receiving Ds, the number receiving Fs. Do not separate grades by + or -, e.g., C+ or C- is still considered a C grade.

SAMPLE Rotation Type	SAMPLE Class Cohort by year					
	Graduated			Currently Enrolled		
	YYY1	YYY2	YYY3	YYY4	YYY5	
	Total Number of Students					
	40	42	45	46	40	
	Number of Students receiving grades of "C" or below					
Internal Medicine	0	0	0	2C 1F	0	
General Surgery	0	0	1D	0	1F	
Primary Care Clerkship	0	0	0	1C	n/a	

SAMPLE Comments: n/a = class of YYY5 has not completed Primary Care Clerkship yet.

Number of Final Clinical *Rotation* Grades of C or Below TEMPLATE

Rotation Type	Class Cohort by year					
	Graduated			Currently Enrolled		
	Year	Year	Year	Year	Year	Year
	Total Number of Students					
	#	#	#	#	#	#
	Number of Students receiving grades of "C" or below					
Click here to enter text.	#	#	#	#	#	#
Click here to enter text.	#	#	#	#	#	#
Click here to enter text.	#	#	#	#	#	#

Rotation Type	Class Cohort by year					
	Graduated			Currently Enrolled		
	Year	Year	Year	Year	Year	Year
	Total Number of Students					
	#	#	#	#	#	#
	Number of Students receiving grades of "C" or below					
Click here to enter text.	#	#	#	#	#	#
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Comments: Click here to enter text.

STUDENT REMEDIATION DATA

Remediation is defined by the ARC-PA as *the program defined and applied process for addressing deficiencies in a student's knowledge and skills, such that the correction of these deficiencies is measurable and can be documented.*

How many students have repeated *rotations* in the **three** most recent graduating classes as well as the classes currently enrolled? Click here to enter number.

For how many students in the **three** most recent graduating classes as well as the classes currently enrolled has the program identified deficiencies in knowledge and skills during *rotations,* such that the correction of these deficiencies (*remediation*) was necessary for the student to continue in the program (**not including** those who repeated a rotation)? Click here to enter number.

IF any students repeated or *remediated rotations* as indicated in the above two questions, **include** remediation data (e.g. aspects of program *remediated* or repeated) and outcomes (e.g., progress in the program, graduation rates, *PANCE* pass rates) analysis in the analysis narrative below.

ANALYSIS AND CONCLUSIONS

In relation to the data identified in this appendix, student evaluation of *rotations* and *preceptors,* the number of final grades of C or below for *rotations*, and student attrition and *remediation* of *rotations*:

Provide Narrative describing the program's approach to analysis of the quantitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.

> Click here to enter text.

Provide Narrative describing the program's approach to analysis of the qualitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.
If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

> Click here to enter text.

Provide Narrative describing the *analysis* of all data collected and displayed. Include resulting conclusion(s) and application of the *analysis* to the program.

> Click here to enter text.

Strengths: As a result of the data *analysis* and conclusions identified in this appendix, list the strengths of the program as identified by the program's process of ongoing self-assessment. If none, then leave this section blank.

Strengths
Click here to enter text
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Strengths
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Comments: Click here to enter text.

Areas in need of improvement: As a result of the data *analysis* and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program's process of ongoing self-assessment**.** If none, then leave this section blank.

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
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Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date

Comments: Click here to enter text.

Preparation of Graduates to Achieve Program Defined Competencies

This appendix requires the program to submit data and *analysis* related to student attrition*, *summative evaluation* performance, exiting student/graduate feedback and faculty evaluation of the curriculum to assess its ability to prepare students to achieve the program's defined *competencies**.*

*For this appendix the program will reference **Student Attrition** data provided in **Appendix 14, SSR**.
**While the commission recognizes programs may assess student *competencies* with additional data and analysis, the self-study report will focus on the areas listed above.

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA
Summative Evaluation Performance:
Provide a tabular or graphic display of data collected by the program on the *summative evaluation* outcomes for the **three** most recent graduating classes. **The data is to be used to support the narrative on *analysis* of the program's ability to prepare graduates to achieve its defined *competencies*.** Do not include student names in the data, if individual student outcomes are listed, use anonymous identifiers.

Provide Narrative describing the program's expected outcomes of students' performance on the summative evaluation.

Click here to enter text.

Exiting Students/Graduate Feedback:
Use the **ARC-PA Exiting Student/Graduate Feedback TEMPLATE** below to provide composite data from exiting students **OR** recent graduates (choose one if both are collected) about their perception of how well the program prepared them for entry into the profession and suggestions they may have for program improvement.

Indicate in this narrative how the data (both quantitative and/or qualitative) is collected and presented. For example, if the program uses a Likert scale survey, provide the scale and state how scores in the **TEMPLATE** were calculated.

Click here to enter text.

Provide data for the three most recent graduating classes. List cohort classes by the year the class completed the program.

List areas evaluated by the program in the left column. If qualitative data is collected, it must be reported and summarized in the narrative or displayed in an appended document.

ARC-PA Exiting Student/Graduate Feedback TEMPLATE

Area Evaluated	Class of Year	Class of Year	Class of Year
Click here to enter text.	Score	Score	Score
Click here to enter text.	Score	Score	Score
Click here to enter text.	Score	Score	Score
Click here to enter text.	Score	Score	Score
Click here to enter text.	Score	Score	Score
Click here to enter text.	Score	Score	Score
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Click here to enter text.	Score	Score	Score
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Click here to enter text.	Score	Score	Score
Click here to enter text.	Score	Score	Score
Click here to enter text.	Score	Score	Score
Click here to enter text.	Score	Score	Score

Comments: Click here to enter text.

Faculty Evaluation of the Curriculum:

Provide Narrative describing how the program obtains and uses faculty evaluation of the curriculum to evaluate student achievement of program defined *competencies*.

Click here to enter text.

Provide a summary of the curricular evaluation data used to support the narrative on *analysis* of student achievement of program defined *competencies* in a separate document. If the data is already provided in another appendix, reference that data in the *analysis* narrative. Reference to data must be specific including the SSR appendix, data file name, appropriate table or graph and/or page number.

When creating your data display(s) please keep in mind:
- If reported, individual students or faculty must not be identified by name but must be identified with an anonymous identifier
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis.* (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant *analysis* (do not append raw data).

Save the documents in a folder labeled **App14E**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.
For example, App 14E1 SummPerf UABC, App 14E2 GradEval UABC and App 14E3 FacEval UABC.
Important Note – Abbreviate as necessary; the title of any document or folder in the application may not exceed 20 characters, including spaces.

The program provided its *competencies* in **Appendix 09.**

ANALYSIS AND CONCLUSIONS
In relation to the data identified in this appendix, student attrition (as an outcome of formative assessment of student achievement of program defined *competencies*), *summative evaluation* performance, exiting student/graduate feedback and faculty evaluation of the curriculum:

Provide Narrative describing the program's approach to *analysis* of the quantitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.
If the program did not collect quantitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the program's approach to *analysis* of the qualitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.
If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the *analysis* of all data collected and displayed within this appendix reflecting the program's *analysis* of its ability to prepare graduates to achieve program defined *competencies*.

Include resulting conclusion(s) and application of the *analysis* to the program.

Click here to enter text.

Strengths: As a result of the data *analysis* and conclusions identified in this appendix, list the strengths of the program as identified by the program's process of ongoing self-assessment. If none, then leave this section blank.

Strengths
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Strengths
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Comments: Click here to enter text.

Areas in need of improvement: As a result of the data *analysis* and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program's process of ongoing self-assessment**.** If none, then leave this section blank.

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
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Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
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Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date

Comments: Click here to enter text.

SSR Appendix 14F

PANCE Performance

This appendix requires the program to submit data and *analysis* related to graduate *PANCE* performance.

Narrative addressing the program's approach to data collection and analysis should parallel or be consistent with the program's narrative provided for C1.01.

DATA
PANCE **Performance:** Include in this appendix a copy of the:
- most current annual *NCCPA* **PANCE Exam Performance Summary Report Last 5 Years**, and
- the **PANCE Content and Task Area performance** for the most current cohort.

Provide Narrative describing the program's <u>expected outcomes</u> of students' performance on the *PANCE*.

Click here to enter text.

Provide tabular or graphic displays of the data collected by the program and used to support the narrative on *analysis* of its *PANCE* outcomes for the **three** most recent graduating classes. If the data is already provided in another appendix, reference that data in the analysis narrative. Reference to data must be specific including the SSR appendix, data file name, appropriate table or graph and/or page number.

When creating your data display(s) please keep in mind:
- If reported, individual students must not be identified by name but must be identified with an anonymous identifier.
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis.* (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant *analysis* (do not append raw data).

Save the documents in a folder labeled **App14F**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.
For example, App 14F PANCE 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.

***ANALYSIS* AND CONCLUSIONS**
In relation to the *PANCE* data:
Data *analysis* in relation to *PANCE* outcomes may include but is not limited to the following areas as applicable to the program. If an area was already analyzed in relation to PANCE performance in another appendix, please refer to that appendix and do not repeat the same analysis in this appendix.

- Admissions criteria

- Effectiveness of the didactic curriculum
- Effectiveness of the clinical curriculum
- Breadth and depth of the curriculum
- Student summative evaluation
- Remediation efforts and outcomes
- Student progress criteria and attrition
- Feedback from students who were unsuccessful on PANCE

Provide Narrative describing the program's approach to *analysis* of the quantitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.

Click here to enter text.

Provide Narrative describing the program's approach to *analysis* of the qualitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.
If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the *analysis* of the data collected and displayed within this appendix reflecting the program's *analysis* of its PANCE outcomes as directed above.

Include resulting conclusion(s) and application of the *analysis* to the program.

Click here to enter text.

Strengths: As a result of the data *analysis* and conclusions identified in this appendix, list the strengths of the program as identified by the program's process of ongoing self-assessment. If none, then leave this section blank.

Strengths
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Comments: Click here to enter text.

Areas in need of improvement: As a result of the data *analysis* and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program's process of ongoing self-assessment**.** If none, then leave this section blank.

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date

Comments: Click here to enter text.

Appendix 14G

Sufficiency and Effectiveness of Program Faculty and Staff
This appendix requires the program to submit data and analysis related to *sufficiency* and *effectiveness* of *program faculty*, s*ufficiency* and *effectiveness* of *administrative support staff* and faculty and staff changes.

*The ARC-PA defines *program faculty* as the program director*, medical director, principal faculty* and *instructional faculty.*

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA
Provide Narrative describing the factors used to determine **the number** of *principal* and *instructional faculty* needed to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program. **Describe** how the program collects data related to those factors to determine *sufficiency* **of** *program faculty* in meeting the program's needs.

> Click here to enter text.

Provide Narrative describing the factors used to determine *effectiveness* of *program faculty* and *instructional faculty* in meeting the academic needs of enrolled students and managing the administrative responsibilities of the program. **Describe** how the program collects data related to those factors to determine *effectiveness* **of** *program faculty* in meeting the program's needs.

> Click here to enter text.

Provide Narrative describing the factors used to determine the **number** of *administrative support staff* needed to manage the administrative responsibilities of the program, to be consistent with organizational complexity and manage total enrollment. **Describe** how the program collects data related to those factors to determine *sufficiency* **of** *administrative support staff* in meeting the program's needs.

> Click here to enter text.

Provide Narrative describing the factors used to determine *effectiveness* of *administrative support staff* in managing administrative responsibilities consistent with the organizational complexity and total enrollment of the program. **Describe** how the program collects data regarding the *effectiveness* **of** *administrative support staff* in meeting the program's needs.

> Click here to enter text.

Program Faculty **Data: Provide** a tabular or graphic display of data collected by the program (both quantitative and qualitative) to determine *sufficiency and effectiveness* of *program faculty and instructional faculty* for the previous **three** academic years as well as currently.

Administrative Support Staff **Data: Provide** a tabular or graphic display of data collected by the program (both quantitative and qualitative) to determine *sufficiency and effectiveness* of *administrative support staff* for the previous **three** academic years as well as currently.

When creating your data display(s) please keep in mind:

- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis.* (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant analysis (do not append raw data).
- Data should be presented in a way that allows comparison across cohorts and appreciation of trends over time. Programs may reference data and or analysis in other parts of the SSR. Reference to data must be specific including the SSR appendix, data file name, appropriate table or graph and/or page number.

Save the documents in a folder labeled **App14G**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.
For example, App 14G FacEffect UABC or App 14G StaffSuff 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.

Complete **ARC-PA Faculty and Staff Changes TEMPLATE** with included narrative below.

List all **current** faculty and staff <u>and</u> those who were employed by the program **over the previous three years.** (For example, if you are completing this application in AY2022 (fall 2021-spring/summer 2022), begin the list as of AY 2019 (fall 2018 – spring/summer 2019).

Indicate faculty and staff changes (*principal faculty**, program director, *medical director* and program *administrative support staff* who left or were hired or took on a new role) <u>over the past three academic years.</u>

If all positions have been filled by the same individuals for the past three academic years, enter THERE HAVE BEEN NO CHANGES in the Comment section at the end of the table and fill in the table with all the current program faculty and staff.

(*Note that *principal faculty* are those faculty working at least 50% FTE with primary academic responsibility assigned to the PA program who report to the program director. Two FTE principal faculty positions must be filled by currently NCCPA certified PA faculty.)

If there has been more than one change to any position, for example, if the person holding the program director position has changed more than once in the past three-year period, add another such position in the lower part of the table where you may enter additional faculty.

ARC-PA Faculty and Staff Changes TEMPLATE

Position	% FTE	Person in position	Date hired (mm/yyyy)	Date left position/program (mm/yyyy)	Reason for the Change (Reason left the program or were hired or N/A)
Faculty					

Position	% FTE	Person in position	Date hired (mm/yyyy)	Date left position/program (mm/yyyy)	Reason for the Change (Reason left the program or were hired or N/A)
Current program director	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Program Director	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Current medical director	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Medical director	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Principal faculty PA-C	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Principal faculty PA-C	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Principal faculty PA-C	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Principal faculty PA-C	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Principal faculty PA-C	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Principal faculty PA-C	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Principal faculty PA-C	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Non-PA-C principal faculty	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Non-PA-C principal faculty	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Non-PA-C principal faculty	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Non-PA-C principal faculty	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Non-PA-C principal faculty	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Program Administrative Staff					
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text

Position	% FTE	Person in position	Date hired (mm/yyyy)	Date left position/program (mm/yyyy)	Reason for the Change (Reason left the program or were hired or N/A)
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Other Principal Faculty and Staff					
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text
Click here to enter text	xx.xx	Click here to enter text	mm/yyyy	mm/yyyy	Click here to enter text

Comment: Click here to enter text.

ANALYSIS **AND** **CONCLUSIONS**

In relation to the data identified in this appendix, *sufficiency of principal and instructional faculty* and *effectiveness* of *program faculty and instructional faculty*, s*ufficiency* and *effectiveness* of *administrative support staff* and *program faculty* and *staff* changes:

Provide Narrative describing the program's approach to *analysis* of the quantitative data collected and displayed, including the benchmarks/thresholds (with rationale) used. Include the attrition rate for any position that has changed over the last three years (current year and past two) and describe how the program determined each rate.
If the program did not collect quantitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the program's approach to *analysis* of the qualitative data collected and displayed, including the benchmarks/thresholds (with rationale) used.
If the program did not collect qualitative data related to this appendix, please type N/A in the narrative box.

Click here to enter text.

Provide Narrative describing the *analysis* of data collected and displayed within this appendix reflecting the program's *analysis* of *sufficiency* of *principal* and *instructional faculty* and *effectiveness* of *program faculty* and *instructional faculty* and *sufficiency* and *effectiveness* of staff. Include resulting conclusion(s) and application of the *analysis* to the program.

Click here to enter text.

Strengths: As a result of the data *analysis* and conclusions identified in this appendix, list the strengths of the program as identified by the program's process of ongoing self-assessment. If none, then leave this section blank.

Strengths
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Comments: Click here to enter text.

Areas in need of improvement: As a result of the data *analysis* and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program's process of ongoing self-assessment**.** If none, then leave this section blank.

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
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Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date

Comments: Click here to enter text.

SSR Appendix 14H

Success in Meeting the Program's Goals

This appendix requires the program to submit data and *analysis* related to the *effectiveness* in meeting its *goals*.

The *goals* of the program were **provided** in **Appendix 04** if not available on the web**.**

Narrative addressing the program's approach to data collection and analysis should parallel and be consistent with the program's narrative provided for C1.01.

DATA

The program must provide information in the template below for all of its published **goals**. Space has been provided for six program *goals*, but if the program has more than six *goals* use an additional template. **Reference other appendices of the SSR as needed.**

Provide a tabular or graphic display of data collected by the program for **EACH OF ITS *GOALS*** for the past three academic years. If already provided in another appendix, reference that data in the analysis narrative. Reference to data must be specific including the SSR appendix, data file name, appropriate table or graph and/or page number.

When creating your data display(s) please keep in mind:
- Quantitative data must be reported in aggregate and displayed in tables or graphs that directly support the *analysis.* (Do not provide raw data).
- Qualitative data theme summaries must be reported in aggregate and displayed in a table(s) that directly supports the relevant analysis (do not append raw data).
- Data should be presented in a way that allows comparison across years and appreciation of trends over time.
- Reference other appendices of the SSR as needed.

Save the documents in a folder labeled **App14H**. Name the files consistent with the narrative and include an abbreviation of the program's name at the end of the document name.
For example, App 14H GradEmploy 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.

ANALYSIS AND CONCLUSIONS

In relation to the data on program *effectiveness* in meeting its *goals,* **for each *goal*:**

Provide Narrative describing the program's approach to *analysis* of the quantitative data collected and displayed, including the benchmarks/thresholds (with rationale) used. (If applicable).

Provide Narrative describing the program's approach to *analysis* of the qualitative data collected and displayed, including the benchmarks/thresholds (with rationale) used. (If applicable).

Provide Narrative describing the *analysis* of data collected and displayed reflecting the program's *analysis* of its success in meeting the goal. Include resulting conclusion(s) and application of the *analysis* to the program.

If analysis has been documented in another appendix of the SSR, provide reference to that appendix in the narrative box below.

Goal 1: Provide Narrative describing how the program determines effectiveness in meeting Goal #1. Be specific in identification of the data sources utilized. Reference other appendices of the SSR as needed.

> Click here to enter text.

Goal 2: Provide Narrative describing how the program determines effectiveness in meeting Goal #2. Be specific in identification of the data sources utilized. Reference other appendices of the SSR as needed.

> Click here to enter text.

Goal 3: Provide Narrative describing how the program determines effectiveness in meeting Goal #3. Be specific in identification of the data sources utilized. Reference other appendices of the SSR as needed.

> Click here to enter text.

Goal 4: Provide Narrative describing how the program determines effectiveness in meeting Goal #4. Be specific in identification of the data sources utilized. Reference other appendices of the SSR as needed.

> Click here to enter text.

Goal 5: Provide Narrative describing how the program determines effectiveness in meeting Goal #5. Be specific in identification of the data sources utilized. Reference other appendices of the SSR as needed.

> Click here to enter text.

Goal 6: Provide Narrative describing how the program determines effectiveness in meeting Goal #6. Be specific in identification of the data sources utilized. Reference other appendices of the SSR as needed.

> Click here to enter text.

Strengths: As a result of the data *analysis* and conclusions identified in this appendix, list the strengths of the program as identified by the program's process of ongoing self-assessment. If none, then leave this section blank.

Strengths
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Strengths
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Comments: Click here to enter text.

Areas in need of improvement: As a result of the data analysis and conclusions identified in this appendix, list the areas in need of improvement and plans for addressing these areas as identified by the program's process of ongoing self-assessment**.** If none, then leave this section blank.

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
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Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date

Area Needing Improvement	Plans for Improvement	Expected Outcome	Person(s) Responsible	Completion timeline (mm/yyyy)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Date

Comments: Click here to enter text.

Place the following program-created document(s) for **Appendix 15** in this folder:

Forms used by the program for the initial and ongoing evaluation of clinical sites and *preceptors* to address standard 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 4d 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 4d 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 and appendices to the syllabi as applicable that are used for **ALL** courses/rotations in the curriculum that must include at a minimum:
- course name,
- course description,
- faculty instructor of record,
- course goal/rationale,
- *learning outcomes* and *instructional objectives*, 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, they are part of the application of record. The commission will use the syllabi to verify compliance with the related standards.

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 for **Appendix 18** in this folder:

Document(s) concerning institutional regional accreditation status of probation, if applicable

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 4d 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 18 Inst Accreditation Status Name is to be saved in the Appendix 18 folder.