



**Accreditation Review Commission on Education for the
Physician Assistant, Inc.
Application for Accreditation[®]
Revised 08.2025**

For Accreditation *Standards* for PA Education[®], 6th Edition as of 09.2025

SAMPLE ONLY, NOT FOR ACTUAL APPLICATION

Type of Review:

Choose an item.

Program Name:

Click here to enter text.

Institution Name:

Click here to enter text.

Site Visit Dates:

Click here to enter text.

ARC-PA
3325 Paddocks Parkway
Suite 345
Suwanee, Georgia 30024

www.arc-pa.org

INSTRUCTIONS: Programs must **carefully read and follow all application instructions** in their entirety.

In the application, when inserting hyperlinks that require passwords for access, provide login information in the narrative box. The “**Provide Narrative**” sections are to be answered with brief and succinct answers.

Certain sections of the application are **color-coded** to highlight specific requirements that apply to particular program/review types. It is essential that applicants pay close attention to these color indicators and respond accordingly.

Red — Requirement for Added Appendix

The red font color indicates **mandatory appendices** that must be attached to the application. Any file uploads based on ARC-PA templates must retain the template name, followed by an abbreviation of the program’s name (e.g., “C1.01Data U of America.xlsx”). Any file uploads created by the program need to have a title that describes the file content and include an abbreviation of the program’s name at the end of the document name (e.g., “DidacticCurr U of America.docx”). The templates provided by the ARC-PA are to be saved in the format in which they were created.

Purple — Initial Provisional Applications

Purple instructions apply specifically to **initial provisional applications** — those being submitted by new programs for its first accreditation review.

Green — Programs with Distant Campuses

Programs that operate **geographically distant campuses** need to pay attention to instructions in green that address requirement(s) specific to distant campus compliance.

Failure to address color-coded sections as directed may result in an **incomplete submission** and could delay the review process. Programs are responsible for ensuring that all applicable sections are fully and accurately completed before submission to the ARC-PA.

Introduction

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 program management portal, 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's accreditation history.

The program management portal (the portal) and the program website must be kept current and compliant with the *Standards* at all times. The commission will review the program management portal and the program website in conjunction with this application. Failure to maintain the program website or portal may result in reconsideration of the program's accreditation status.

Please note that the term "student(s)" as used in this application refers to those individuals enrolled in the PA program. *Italics* are used to reflect terms defined in the glossary of the *Standards*.

When completing the application, programs are encouraged to utilize the Compliance Manual to ensure that responses are thorough. The glossary provides a full definition of terms throughout the Standards. The application does not require the program to address each standard. That does not mean, however, that the program is not responsible for continuing to demonstrate compliance with all standards. Programs may be asked about any standard during their validation visit or at any time as part of the comprehensive review of the program.

Application of Record

The application submitted by the program 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. If, during the visit, site visitors suggest submitting additional information or materials to the ARC-PA office, these materials should be included with the program's response to observations.

Application for Accreditation for the Standards, 6th Edition

Section A. Administration

A1. Institution

A1.01 When more than one institution is involved in the provision of academic and/or clinical education, terms are clearly described and documented in a manner signifying agreement by the involved institutions. Signed affiliation agreement(s):

- a) define the rights and responsibilities of each party related to the educational program for students
- b) specify whose policies govern the student, including if certain program policies will be superseded by those at the clinical site
- c) include the terms of participation for the PA program students
- d) are signed by an authorized individual(s) of each participating entity

[Check here to confirm](#) that current affiliation agreements are attached to all active clinical sites in the portal.

Append any affiliation agreements for non-clinical sites as an attachment and name file appropriately (e.g., A1.01 U of America.docx).

Initial Provisional applicant programs: Upload a template copy of the program's affiliation agreement. Ensure that at the time of the site visit, the program has sufficient signed and fully executed affiliation agreements for its maximum student cohort size.

Provide, if needed, an explanation regarding any of the affiliation agreements (optional):

Click here to enter text.

A1.02a The sponsoring institution is responsible for:

- a) complying with ARC-PA accreditation *Standards* and policies

Describe the steps the sponsoring institution has taken to inform itself about the *Standards* and demonstrate responsibility for the institution's and program's compliance with the *Standards* and policies.

Click here to enter text.

A1.02b The sponsoring institution is responsible for:

- b) supporting the *program faculty* in effective program self-assessment

Describe the support that the sponsoring institution provides to ensure effective program self-assessment. Include the factors that the sponsoring institution considers in determining whether the program self-assessment is an effective process.

Click here to enter text.

A1.02c The sponsoring institution is responsible for:

- c) ensuring effective leadership by the program director

Describe how the sponsoring institution ensures the effectiveness of the program director's leadership.

Click here to enter text.

Append a blank copy of the institution's evaluation of the program director's leadership of the program. Name file appropriately (e.g, A1.02c U of America.docx)

A1.02d The sponsoring institution is responsible for:

- d) supporting the *program faculty* in curriculum design

Describe how the sponsoring institution supports the program faculty in the **initial (new applicant programs) or ongoing (accredited programs) curriculum design**. Include the resources provided by the sponsoring institution that support effective curriculum design.

Click here to enter text.

A1.02e The sponsoring institution is responsible for:

- e) documenting security and personal safety measures for PA students, faculty, and staff in all locations where instruction occurs

Describe how the sponsoring institution documents the security and personal safety measures for **PA students, faculty, and staff for the main campus**.

Click here to enter text.

Programs with distant campuses only - Describe how the sponsoring institution documents the security and personal safety measures for **PA students, faculty, and staff for each distant campus**.

Click here to enter text.

Describe how the sponsoring institution documents the security and personal safety measures for **PA students, faculty, and staff for SCPE sites**.

Click here to enter text.

Describe how the sponsoring institution documents the security and personal safety measures for **PA students, faculty, and staff for any other location where instruction occurs (if applicable)**.

Click here to enter text.

A1.02f The sponsoring institution is responsible for:

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

Provide the URL link(s) to the program's policies and procedures for processing **faculty and staff** grievances and allegations of harassment. If the policies are located at a different URL than the procedures, provide both URL links. If grievances are handled separately from harassment, provide information for both. If faculty and staff are handled separately, provide information for both.

If a public-facing URL is not available, **append the policies and procedures as an appendix and name file appropriately (e.g., A1.02f U of America.docx)** and **describe** below how they are published and made readily available to faculty and staff.

Describe how the sponsoring institution ensures consistent application of the policies and procedures.

A1.02g The sponsoring institution is responsible for:

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

Provide the URL link(s) to the program's policies and procedures for processing **student** allegations of harassment and mistreatment. If the policies are located at a different URL than the procedures, provide both URL links. If mistreatment is handled separately from harassment, provide information for both.

If a public-facing URL is not available, **append the policies and procedures and name the file appropriately (e.g., A1.02g U of America.docx)** and **describe** below how they are published and made readily available to students.

Describe how the sponsoring institution ensures the consistent application of the policies and procedures.

A1.02h The sponsoring institution is responsible for:

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

Provide the URL link(s) to the program's policies and procedures for refunding **tuition and fees**.

If a public-facing URL is not available, **append the policies and procedures and name the file appropriately (e.g., A1.02h U of America.docx)** and **describe** below how they are published and made readily available to students.

Describe how the sponsoring institution ensures the consistent application of the policies and procedures.

Click here to enter text.

A1.03a The sponsoring institution provides resources in support of the program director and *principal faculty*, as applicable to their program role, for:

- a) full payment for their relevant professional and board certification(s) and licensure

Describe the institutional resources provided to ensure full payment of relevant certifications and licenses for each principal faculty member and the program director. Include how the sponsoring institution determines which are relevant to the faculty member's role.

Click here to enter text.

A1.03b The sponsoring institution provides resources in support of the program director and principal faculty, as applicable to their program role, for:

- b) *sufficient* release time and financial resources for professional development specific to their PA program faculty role

Describe how much funding and release time are available for the program director and each principal faculty member to obtain professional development specific to their PA program role. Describe how the sponsoring institution determines the sufficiency of these resources.

Click here to enter text.

A1.03c The sponsoring institution provides resources in support of the program director and principal faculty, as applicable to their program role, for:

- c) *sufficient* release time and financial resources for continuing medical education (CME)

Describe how much funding and release time are available for the program director and each principal faculty to obtain the continuing medical education (CME) needed to maintain licenses and certification. Describe how the sponsoring institution determines the sufficiency of these resources.

Click here to enter text.

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

Which of the following academic support services are available to PA students? **Mark all that apply:**

- Academic advising Tutoring Career Services Medical library

Describe the academic support services available from the sponsoring institution for PA students. List any services that are available to other students at the institution that are not available to PA students, and explain why they are not available.

Click here to enter text.

Which of the following student services are available to PA students? **Mark all that apply:**

Student health Disability services Financial aid services

Describe the student services available from the sponsoring institution for PA students. List any services that are available to other students at the institution that are not available to PA students, and explain why they are not available.

Click here to enter text.

A1.05 The sponsoring institution provides PA students and faculty at geographically *distant campus* locations with access to services and resources that help students achieve their academic and career goals that are *comparable* to those available to PA students and faculty on the main campus.

Check here if this standard is not applicable because the program does not have a distant campus.

For programs with one or more distant campuses: Describe the services and resources available to faculty and students to help students achieve their academic and career goals on the main campus. Explain how comparable resources are available to students and faculty on the distant campus.

Click here to enter text.

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

Describe the program's budget, including how the institution and program determine that the program has sufficient financial resources.

Click here to enter text.

Append the completed A1.06 template of the program's 4-year budget (2 previous years, current year, projections for next year). Before uploading, rename the file by replacing the word "template" with an abbreviation of the program's name (e.g., "A1.06 Budget_U of TX.xlsx").

A1.07 The sponsoring institution provides the program with the human resources necessary to operate the educational program, comply with the Standards, and fulfill obligations to matriculating and enrolled students, including *sufficient*:

a) *program faculty*

Indicate the current number of principal faculty as follows:

1. Total principal faculty (by Full-Time Equivalent – FTE): FTE
2. Total number of individual faculty (headcount): individuals

3. Number of vacant faculty positions (if any): positions: FTE

Enter the number of FTE principal faculty the program has determined is needed to be sufficient.

FTE

Describe how the sponsoring institution provides sufficient program faculty needed to operate the program, comply with the Standards, and fulfill obligations to matriculating and enrolled students. If the program does not currently have this required number of faculty FTE filled and working, include a description of what the sponsoring institution is doing to address sufficiency.

[Click here to enter text.](#)

For programs with distant campuses, describe how faculty FTEs are allocated across all locations. **Indicate which positions are dedicated to a specific campus and which are shared among campuses.**

[Click here to enter text.](#)

A1.07 The sponsoring institution provides the program with the human resources necessary to operate the educational program, comply with the Standards, and fulfill obligations to matriculating and enrolled students, including sufficient:

b) administrative staff

Indicate the current number of administration staff as follows:

1. Total administrative staff (by Full-Time Equivalent – FTE): FTE
2. Total number of individual staff (headcount): individuals
3. Number of vacant staff positions (if any): positions: FTE

Enter the number of FTE administrative staff members the program has determined are needed to be sufficient.

FTE

Describe how the required number of administrative staff FTE was determined to be sufficient to operate the program, comply with the Standards, and fulfill obligations to matriculating and enrolled students. If the program does not currently have this required number of administrative staff FTE filled and working, include a description of what the sponsoring institution is doing to address sufficiency.

[Click here to enter text.](#)

For programs with distant campuses, describe how administrative staff FTEs are allocated across all locations. **Indicate which positions are dedicated to a specific campus and which are shared among campuses.**

[Click here to enter text.](#)

A1.08 The sponsoring institution provides 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.

[Check here to confirm](#) that the facilities list on the Details tab of the portal is up to date.

Describe the physical facilities utilized by the program, including how the institution and program determine that they are sufficient. If any space is shared with other programs, explain how space allocation or reservation works. **If the program has any distant campuses, include information on the similarities and differences between the main campus and the distant campus(es).**

Click here to enter text.

Initial Provisional applicant programs provide a URL weblink to a video of the program facilities. If any facilities are currently under construction or renovation, include the institution's plan and timeline to ensure that construction is completed prior to matriculation of the first class.

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

Describe the **instructional materials** provided by the sponsoring institution that are needed to operate the PA program and to support evidence-based practice. Discuss any instructional materials that are needed but not provided by the institution.

Click here to enter text.

Describe the **reference materials** provided by the sponsoring institution that are needed to operate the PA program and to support evidence-based practice. Discuss any reference materials that are needed but not provided by the institution.

Click here to enter text.

A1.10a The sponsoring institution:

- a) secures clinical sites and *preceptors sufficient* in number to allow all students to meet the program's *learning outcomes for supervised clinical practice experiences*

[Check here to confirm](#) that all active clinical sites listed in the portal are up to date.

Describe how the sponsoring institution secures sufficient sites and preceptors to enable each student to attend the required SCPEs and meet the learning outcomes. Include how the institution defines and monitors the sufficiency of sites and preceptors.

Click here to enter text.

A1.10b The sponsoring institution:

- b) ensures that clinical sites and *preceptors* located outside of the *United States* are only used for *elective rotations*.

Check this box if the program does not use any clinical sites or preceptors outside of the United States.

If the program utilizes rotation sites outside of the United States, describe how the sponsoring institution ensures that clinical sites and preceptors located outside of the United States are only used for elective rotations.

Click here to enter text.

A1.11* The sponsoring institution, in a manner consistent with its own mission and applicable laws, demonstrates a commitment to student, faculty, and staff *diversity, equity, and inclusion* by:

- a) supporting the program in having a documented PA program action plan for *diversity, equity, and inclusion*
- b) supporting the program in implementing *diversity, equity, and inclusion*-focused recruitment strategies
- c) supporting the program in implementing *diversity, equity, and inclusion*-focused retention strategies
- d) making available resources which promote *diversity, equity, and inclusion*

*July 2025 – Enforcement of Standard A1.11 is on hold effective 9/1/25.

A1.12 The sponsoring institution provides the program with effective technical support.

Describe the technical support provided by the sponsoring institution. Explain how the effectiveness of the technical support is measured and monitored.

Click here to enter text.

For programs with distant campuses, describe how technical support services are provided to faculty, staff, and students at all locations. Explain how the effectiveness of technical support is measured and monitored at each campus.

Click here to enter text.

A2. Personnel

A2.01a All *program faculty*, including didactic and clinical *instructional faculty*:

- a) meet program-defined academic and experiential qualifications to teach in their assigned instructional areas

Describe the academic qualifications for didactic instructional faculty. The program may choose to separate these by job type, special role, or other characteristic if it chooses.

Click here to enter text.

Describe the experiential qualifications for didactic instructional faculty. The program may choose to separate these by job type, special role, or other characteristic if it chooses.

Click here to enter text.

Describe the academic qualifications for clinical instructional faculty. The program may choose to separate these by type of clinician or other characteristics if it chooses.

Click here to enter text.

Describe the experiential qualifications for clinical instructional faculty. The program may choose to separate these by type of clinician or other characteristics if it chooses.

Click here to enter text.

Describe the academic qualifications for principal faculty. The program may choose to separate these by job type, special role, or other characteristic if it chooses.

Click here to enter text.

Describe the experiential qualifications for principal faculty. The program may choose to separate these by job type, special role, or other characteristic if it chooses.

Click here to enter text.

Describe the academic qualifications for the program director.

Click here to enter text.

Describe the experiential qualifications for the program director.

Click here to enter text.

Describe the academic qualifications for the medical director(s).

Click here to enter text.

Describe the experiential qualifications for the medical director(s).

Click here to enter text.

Describe how the program's vetting process ensures that these academic and experiential qualifications are consistently met (before hire and throughout employment).

Click here to enter text.

A2.01b All *program faculty*, including didactic and clinical *instructional faculty*:
b) are evaluated for *effectiveness* in their assigned instructional areas

Describe how the **didactic instructional faculty** are evaluated to ensure ongoing effectiveness in their assigned instructional areas.

Click here to enter text.

Describe how the **clinical instructional faculty** are evaluated to ensure ongoing effectiveness in their assigned instructional areas.

Click here to enter text.

Describe how the **principal faculty** are evaluated to ensure ongoing effectiveness in their assigned instructional areas.

Click here to enter text.

Describe how the **program director** is evaluated to ensure ongoing effectiveness in their assigned instructional areas. If this is the same as another group, please indicate that rather than repeating the narrative.

Click here to enter text.

Describe how the **medical director(s)** is/are evaluated to ensure ongoing effectiveness in their assigned instructional areas. If this is the same as another group, please indicate that rather than repeating the narrative.

Click here to enter text.

A2.02 The program has *program faculty* members, including a program director, *principal faculty*, *medical director*, and *instructional faculty*.

Check this box to confirm that the Program Portal list of *program faculty* members in the personnel tab is correct. Note that any didactic instructional faculty with 0.1 FTE or more must be listed in the Program Portal.

A2.03 The program has at least three (3.0) FTE *principal faculty* members, of which at least two (2.0) FTE *principal faculty* members are PAs who are currently NCCPA certified or emeritus.

Check this box to confirm that the portal personnel records include the date of hire and FTE for all personnel. For PA-C or PA-C emeritus principal faculty members, ensure that the NCCPA certification number and expiration date are correct.

Check this box to confirm that the most current CV for each principal faculty member is uploaded in the portal personnel record.

A2.04 The *principal faculty* and the program director hold academic appointments and privileges *comparable* to other faculty with similar academic responsibilities within the institution.

Check this box if the PA principal faculty and program director hold the same academic appointments and have the same privileges as all faculty at the institution.

Describe the evidence that the program utilizes to demonstrate that the PA principal faculty and program director hold the same academic appointments and have the same privileges. If needed, include any academic appointments or privileges that are available to some faculty members in the institution but not to the PA program director or principal faculty members.

[Click here to enter text.](#)

A2.05 *Program faculty* maintain responsibility for the following:

- a) developing, reviewing, and revising as necessary the program's mission statement, *goals*, and *competencies*
- b) selecting applicants for admission to the PA program
- c) providing student instruction
- d) evaluating student performance
- e) academic counseling of students
- f) assuring the availability of remedial instruction
- g) designing, implementing, coordinating, and evaluating the curriculum
- h) evaluating the program

Append the completed A205 Personnel Responsibilities Template. Before uploading, rename the file by replacing the word "template" with an abbreviation of the program's name (e.g., "A2.05 Personnel U of America.xlsx").

A2.06 The program director had at least three years of full-time higher education experience at the time of appointment.

Check this box to verify that the program director's most current CV is uploaded to the portal personnel record.

A2.07 The program director is hired by the institution at 1.0 FTE and is assigned to the program on a 12-month, full-time basis, and at least 50% of that time is devoted to administrative responsibilities for the program.

Append the program director's job description and name the file appropriately (e.g., A2.07 PD JD U of America.docx)

A2.08 The program director is a PA who holds current or emeritus *NCCPA* certification status.

No response required. Reviewers will refer to the program director’s CV.

A2.09 The program director provides program leadership through effective:

a) program organization

Append evidence of evaluations of the program director’s leadership related to each of these substandards and name the file appropriately (e.g., A2.09 PD Eval U of America.docx). Limit the upload to only those pieces related to this specific standard.

Describe the program director’s leadership related to program organization. Include how program organization is assessed and the most recent results.

Click here to enter text.

b) program administration

Describe the program director’s leadership related to program administration. Include how program administration is assessed and the most recent results.

Click here to enter text.

c) fiscal management of the program

Describe the program director’s leadership related to the fiscal management of the program. Include how fiscal management is assessed and the most recent results.

Click here to enter text.

d) continuous programmatic review and analysis

Describe the program director’s leadership related to the continuous review and analysis of the program. Include how it is assessed and the most recent results.

Click here to enter text.

e) communication

Describe the program director’s leadership related to communication. Include how communication is assessed and the most recent results.

Click here to enter text.

f) adherence to the Standards and ARC-PA policies

Describe the program director’s leadership related to adherence to the Standards and ARC-PA policies. Include how it is assessed and the most recent results.

Click here to enter text.

A2.10 The program director supervises all individuals in the roles of *medical director, principal* and *instructional faculty*, and staff in activities that directly relate to the PA program.

Append a diagram or description of the organizational structure of the PA program, to include, at a minimum, the program director, medical director, principal faculty, instructional faculty and administrative support staff. Name the file appropriately (e.g., A2.10 Org Chart U of America.docx).

Describe the process and mechanism used by the program director to supervise and evaluate the medical director, principal, instructional faculty, and staff.

Click here to enter text.

A2.11 The *medical director* is:

- a) currently or previously licensed PA or osteopathic or allopathic physician
- b) currently or previously board-certified

Check this box to verify that the medical director's most current CV is uploaded to the portal personnel record.

A2.12 The *medical director* is an advocate for the PA program through *active* participation in the program and support of the development and review of the program curriculum and *competencies* to meet current practice standards as they relate to the PA role.

Append the medical director's job description and name the file appropriately (e.g., A2.12 U of America.docx).

Describe how the medical director is an advocate for the program through active participation and support of the development and review of the program curriculum.

Click here to enter text.

Describe how the medical director provides active participation in the review and revision of program competencies to meet current practice standards.

Click here to enter text.

A2.13 The program does not rely primarily on resident physicians for didactic instruction.

Check this box if the program does not utilize any resident physicians for didactic instruction.

If the program utilizes resident physicians for didactic instruction, list all of the didactic instructional faculty by course, instructor name, content, and hours taught. Indicate which are resident physicians. Provide a calculation of the percentage of total didactic instruction provided by the resident physicians. Separate the list by campus if the program has any distant campuses.

Click here to enter text.

A2.14 All instructional faculty actively serving as supervised clinical practice experience preceptors hold a valid, unrestricted, and unencumbered license to practice.

Append the completed A2 Preceptor License Cert Template, including all instructional faculty actively serving as supervised clinical practice experience preceptors. Before uploading, rename the file by replacing the word “template” with an abbreviation of the program’s name (e.g., “A2.14 Preceptor U of America.xlsx”). For initial provisional programs, the upload is expected to contain a list of the preceptors that the program has verified, with the understanding that this list may not include all preceptors by name for the sites that the program has established.

A2.15 The majority of the SCPE experiences for any individual student must occur with PAs and Physicians.

Describe how the program ensures that 50% or more of SCPE experiences for any individual student occur with PAs and physicians.

[Click here to enter text.](#)

A2.16 The supervised clinical practice experience (SCPE) instructional faculty consist of any of the following:

a) PAs who hold or have held NCCPA certification

Check here to confirm that the response to A2.14 included certification information for all PA active SCPE instructional faculty in the completed template “A2 Preceptor License Cert TEMPLATE.”

b) physicians who hold or have held board certification

Check here to confirm that the response to A2.14 included certification information for all PHYSICIAN active SCPE instructional faculty in the completed template “A2 Preceptor License Cert TEMPLATE.”

c) advanced practice nurses who hold or have held board certification

Check here to confirm that the response to A2.14 included certification information for all ADVANCED PRACTICE NURSE active SCPE instructional faculty in the completed template “A2 Preceptor License Cert TEMPLATE.”

d) no more than 10% other clinicians who are vetted by the program as qualified

Check here to confirm that the response to A2.14 included certification information for all active SCPE instructional faculty in the completed template “A2 Preceptor License Cert TEMPLATE.”

Check here if the program does not utilize any preceptors in the category, “d. other clinicians”.

Describe, related to substandard (d), the program’s vetting process for “other clinicians” that determines whether the preceptor is qualified. Include the expected qualifications for each preceptor

or type of preceptor. Describe how the program ensures that no more than 10% of the active preceptors for the current clinical cohort are in this category.

Click here to enter text.

A2.17 In each location to which a student is assigned for didactic instruction or *supervised clinical practice experiences*, the program:

- a) informs the student of the name and contact information of the principal or *instructional faculty* member designated to assess and supervise the student's progress in achieving the course *learning outcomes*

Describe how the program informs students of the name and contact information of the faculty member designated to assess and supervise the student's progress in achieving the course learning outcomes. Include information specific to didactic courses and clinical courses.

Click here to enter text.

- b) orients all *instructional faculty* to specific course *learning outcomes* and their assessments

Describe how the program orients all instructional faculty to the specific course learning outcomes and their assessments for each didactic and clinical course.

Click here to enter text.

A2.18 *Administrative support* for the program is at least 1.0 FTE dedicated exclusively to the PA program at each campus.

Check here to confirm that the portal personnel tab includes the administrative staff designated for each campus.

A3. Operations

A3.01 Program policies are *published, readily available*, and consistently applied to all students, *principal faculty*, staff, and the program director regardless of their location.

Describe how the program ensures that all program policies are published and readily available.

Click here to enter text.

Describe how the program ensures that all program policies are consistently applied to all students, *principal faculty*, staff, and the program director, regardless of their location.

Click here to enter text.

A3.02 The program *publishes, makes readily available*, and consistently applies a policy that PA students are not required to work for the program.

Provide a direct hyperlink to the published policy.

If it is not available online, append a copy of the policy and name the file appropriately (e.g., A3.02 U of America.docx).

Describe, if applicable, how the policy is made readily available if not available online.

A3.03 The program *publishes*, makes *readily available*, and consistently applies a policy that PA students do not substitute for or function as:

a) *instructional faculty*

Provide a direct hyperlink to the published policy.

If it is not available online, append a copy of the policy and name the file appropriately (e.g., A3.03a U of America.docx).

Describe, if applicable, how the policy is made readily available if not available online.

b) clinical or administrative staff

Provide a direct hyperlink to the published policy.

If it is not available online, append a copy of the policy and name the file appropriately (e.g., A3.03b U of America.docx).

Describe, if applicable, how the policy is made readily available if not available online.

A3.04 The program *publishes*, makes *readily available*, and consistently applies a policy that requires PA students to be clearly identified in the clinical setting to distinguish them from other health profession students and practitioners.

Provide a direct hyperlink to the published policy.

If it is not available online, append a copy of the policy and name the file appropriately (e.g., A3.04 U of America.docx).

Describe, if applicable, how the policy is made readily available if not available online.

Click here to enter text.

A3.05 The program *publishes*, makes *readily available*, and consistently applies policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk. Those policies:

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

Provide a direct hyperlink to the published policy. Explain how the program ensures the policies are published before any educational activities with potential exposures.

If it is not available online, append a copy of the policy and name the file appropriately (e.g., A3.05 U of America.docx).

Describe, if applicable, how the policy is made readily available if not available online.

Click here to enter text.

A3.06 The program *publishes*, makes *readily available*, and consistently applies policies that preclude the program director, *medical director*, and *principal faculty* from participating as healthcare providers for students in the program, except in emergency situations.

Provide a direct hyperlink to the published policy.

If it is not available online, append a copy of the policy and name the file appropriately (e.g., A3.06 U of America.docx).

Describe, if applicable, how the policy is made readily available if not available online.

Click here to enter text.

A3.07 The program *publishes*, makes *readily available*, and consistently applies written procedures that ensure *timely* access and *timely* referral of students to services addressing personal issues that may impact their progress in the PA program.

Provide a direct hyperlink to the published procedure(s). If the procedures are different for any distant campuses, provide hyperlinks by campus.

If it is not available online, append a copy of the policy and name the file appropriately (e.g., A3.07 U of America.docx).

Describe, if applicable, how the policy is made readily available if not available online.

Click here to enter text.

A3.08 The program *publishes*, makes *readily available* to current and *prospective students*, and consistently applies a policy stating that PA students are not required to provide or solicit clinical sites or *preceptors*.

Provide a direct hyperlink to the published policy.

For initial provisional programs that do not yet have public-facing websites, append a copy of the policy and name the file appropriately (e.g., A3.08 U of America.docx).

Describe, if applicable, how the policy will be made readily available once the program gains accreditation.

Click here to enter text.

A3.09 The program *publishes*, makes *readily available* to current and *prospective students*, and consistently applies policies based on current CDC health professionals' recommendations and applicable state or country mandates for:

- a) minimum immunization and health screening of students

Provide a direct hyperlink to the published policy, then describe how the policy is based on CDC recommendations. List and describe the relevant state/country mandates that apply to this standard.

For initial provisional programs that do not yet have public-facing websites, append a copy of the policy and name the file appropriately (e.g., A3.09 U of America.docx).

Describe, if applicable, how the policy will be made readily available once the program gains accreditation.

Click here to enter text.

- b) international travel (for programs offering international curricular components)

Provide a direct hyperlink to the published policy if the program offers international curricular components. If not, write N/A.

For initial provisional programs that do not yet have public-facing websites, append a copy of the policy and name the file appropriately (e.g., A3.08 U of America.docx).

Describe, if applicable, how the policy will be made readily available once the program gains accreditation.

Click here to enter text.

Describe how the program ensures that the program policies required by Standards A3.02–A3.09 are consistently applied.

Click here to enter text.

A3.10 The sponsoring institution and program’s announcements and advertising *accurately* reflect the program offered.

Provide a URL hyperlink to the program’s website.

Describe how the sponsoring institution and program ensure that all announcements and advertising accurately reflect the program offered.

Click here to enter text.

A3.11 The program *publishes* and makes *readily available* to enrolled and *prospective students* current program information, including:

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

Provide a direct hyperlink to the published program information on the program’s ARC-PA accreditation status.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

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

Provide a direct hyperlink to the published program information on the program’s most current evidence of its effectiveness in meeting its goals.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

- c) the current annual “NCCPA PANCE Exam Performance Summary Report Last 5 Years” listing pass rates at each *distant campus* individually provided by the NCCPA through its program portal, when complete or no later than April first (4/1) of each year

Provide a direct hyperlink to the published program information on the program’s most current PANCE Exam Performance Summary Report Last 5 Years.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

Click here to enter text.

d) all required curricular components and the delivery method

Provide a direct hyperlink to the published program information on the program's required curricular components.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

Click here to enter text.

e) academic credit offered by the program

Provide a direct hyperlink to the published program information on the program's academic credit.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

Click here to enter text.

f) estimates of the total cost of enrollment

Provide a direct hyperlink to the published program information on the program's total cost of enrollment.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

g) program-defined *competencies* for entry level practice

Provide a direct hyperlink to the published program information on the program's competencies.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

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

Check here if the program has any distant campuses.

Provide a direct hyperlink to the published program information on the program's services and resources available at the main and any *distant campuses*. If the program has no distant campuses, write N/A.

i) current annual student graduation rate information, on the table provided by the ARC-PA, no later than April 1st (4/1) of each year

Enter the date of the most recent cohort graduation.

Provide a direct hyperlink to the published program information on the program's current annual student graduation rate information by campus.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

A3.12 The program *publishes*, consistently applies, and makes *readily available* to enrolled and *prospective students* any admission and enrollment practices that address:

a) favored or preferred characteristics, individuals, or groups (if applicable)

Provide a direct hyperlink to the published program admission information on favored or preferred characteristics, individuals, or groups (if applicable).

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

b) prior education

Provide a direct hyperlink to the published program admission information on prior education.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

c) awarding or granting *advanced placement*

Provide a direct hyperlink to the published program admission information on advanced placement.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

d) required work experience

Provide a direct hyperlink to the published program admission information on required work experience.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

Click here to enter text.

e) required *technical standards* for enrollment.

Provide a direct hyperlink to the published program information on the program’s technical standards.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

A3.13 The program makes student admission decisions in accordance with clearly defined and *published* practices of the institution and program.

Provide a direct hyperlink to the program’s admissions website.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

Describe how the program makes admission decisions in accordance with clearly defined and published practices of the institution and the program.

Append copies of forms used to screen and select applicants for acceptance to the program and name the file(s) appropriately (e.g., A3.13 U of America.docx).

A3.14 The program *publishes*, consistently applies, and makes *readily available* to enrolled and prospective students:

a) any required academic standards to maintain enrollment and progress in the curriculum

Provide a direct hyperlink to the published program information on any required academic standards to maintain enrollment and progress in the curriculum.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

b) requirements and deadlines for completion of the program

Provide a direct hyperlink to the published program requirements and deadlines for completion of the program.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

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c) policies and procedures for *remediation*

Provide a direct hyperlink to the published program policies and procedures for remediation. For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

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d) policies and procedures for *deceleration*

Provide a direct hyperlink to the published program policies and procedures for deceleration. For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

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e) policies and procedures for withdrawal

Provide a direct hyperlink to the published program policies and procedures for withdrawal. For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

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f) policies and procedures for dismissal

Provide a direct hyperlink to the published program policies and procedures for dismissal. For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

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g) policies and procedures for student grievances

Provide a direct hyperlink to the published program policies and procedures for student grievances. For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

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h) policies and procedures for student appeals

Provide a direct hyperlink to the published program policies and procedures for student appeals. For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

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i) policy for student employment while enrolled in the program

Provide a direct hyperlink to the published program policy for student employment while enrolled in the program.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

j) policy for student travel to required *rotation* sites

Provide a direct hyperlink to the published program policy for student travel to required rotation sites.

For initial provisional programs that do not yet have public-facing websites, describe how this information will be made readily available once the program gains accreditation.

Describe how the program ensures the consistent application of the policies and requirements outlined in Standard A3.14 (a–j).

A3.15 Programs granting *advanced placement* document within each student’s file that those students receiving *advanced placement* have:

a) met program-defined criteria for such placement

Describe how the program documents in each applicable student file that the student has met program-defined criteria for advanced placement. If the program does not grant advanced placement, write N/A.

b) met institution-defined criteria for such placement

Describe how the program documents in each applicable student file that the student has met institution-defined criteria for advanced placement. If the program does not grant advanced placement, write N/A.

c) demonstrated meeting the *learning outcomes* for the curricular components for which *advanced placement* is given

Describe how the program documents in each applicable student file that the student has demonstrated achievement of the learning outcomes for the curricular components for which advanced placement is granted. If the program does not grant advanced placement, write N/A.

Click here to enter text.

Append any program documentation templates or forms utilized in the advanced placement process and name the file(s) appropriately (e.g., A3.15 U of America.docx).

A3.16 Student academic records kept by the sponsoring institution or program, in a paper or electronic format, are readily accessible to authorized program personnel only and include documentation:

- a) that the student met the *published* admission criteria
- b) that the student met the institution and program health screening and immunization requirements
- c) of student performance while enrolled
- d) of *remediation* efforts and outcomes
- e) of any formal disciplinary action taken against a student
- f) that the student met the requirements for program completion

No response required. Student files will be reviewed during the site visit.

Programs applying for initial provisional accreditation, describe the plan for compliance with a-f of this standard. Include how the records will be kept, how they will be made accessible, and how they will be kept secure.

Click here to enter text.

A3.17 Unauthorized people, including PA students, do not have access to academic records or confidential information of other students or faculty.

Describe how the program ensures that unauthorized individuals, including PA students, do not have access to the academic records or confidential information of other students or faculty.

Click here to enter text.

A3.18 Student *health records* are confidential and not accessible to or reviewed by *program faculty* or staff, except for immunization and screening results, which may be maintained and released with the student's written permission.

Describe how the program ensures that student health records are confidential and not accessible to or reviewed by program faculty or staff, except for immunization and screening results. The narrative should explain how immunization and screening results are maintained and the process by which they may be released with the student's written permission.

Click here to enter text.

Append a blank copy of the student health immunization and screening form utilized by the program in the admissions process and name the file appropriately (e.g., A3.18 U of America.docx).

A3.19 Program records for the program director, *medical director*, and *principal faculty* include:

- a) a current job description that includes duties, responsibilities, and required qualifications specific to each faculty member
- b) a current curriculum vitae

Append a current job description including duties, responsibilities, and required qualifications specific to each faculty member and name the file(s) appropriately (e.g., A3.19 LastName FirstInitial U of America.docx).

Check this box to verify that the most current CV for each principal faculty member is uploaded in the portal personnel record.

A3.20 Program records include a current curriculum vitae for each *course director*.

Append a current curriculum vitae for course directors who are not the program director, medical director, or a principal faculty member, if any. Name the file(s) appropriately (e.g., A3.20 LastName FirstInitial U of America.docx).

Section B. Curriculum and Instruction

B1. Curriculum

B1.01 The curriculum:

- a) is consistent with the mission and *goals* of the program

List each component of the program mission. **Describe** how each component aligns to specific course goals and course learning outcomes.

Click here to enter text.

List each program goal. **Describe** how each goal aligns with the curriculum using course goals and course learning outcomes.

Click here to enter text.

- b) is consistent with program competencies

List each program competency. **Describe** how each program competency aligns to the curriculum using specific course goals and course learning outcomes.

Click here to enter text.

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

List and describe the courses in the curriculum where the core knowledge about **established and evolving biomedical sciences** is taught. Include relevant course goals and learning outcomes. Describe how the program teaches the application of this knowledge to patient care.

Click here to enter text.

List and describe the courses in the curriculum where the core knowledge about **established and evolving clinical sciences** is taught. Include relevant course goals and learning outcomes. Describe how the program teaches the application of this knowledge to patient care.

Click here to enter text.

d) provides the necessary breadth and depth to prepare students for the clinical practice of medicine

Describe how the program ensures that the curriculum provides the necessary breadth and depth to prepare students for the clinical practice of medicine.

Click here to enter text.

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

Describe how the program's curriculum uses course sequencing and content progression to build upon students' previously achieved knowledge and skills.

Click here to enter text.

B1.03 For each didactic and clinical course (including required and *elective rotations*), the program defines and *publishes* for students the following detailed information in syllabi or an appendix to the syllabi:

- a) course name
- b) course description
- c) faculty instructor of record
- d) course goal(s)
- e) course *learning outcomes* in measurable terms that are assessed and guide student acquisition of required *competencies*
- f) *instructional objectives* in measurable terms that guide student learning
- g) outline of topics to be covered that align with *learning outcomes* and *instructional objectives*
- h) description of the student assessment(s) and evaluation(s)
- i) plan for grading

Check here to confirm that the portal courses tab contains the most current syllabi for each didactic and clinical course.

Explain where the course syllabi are published for students.

Click here to enter text.

B1.04 The program ensures *comparable* and *equivalent* course content, instructional material access, and student experience when:

- a) didactic instruction is conducted at geographically separate locations

Check here if the program has one or more **geographically separate locations** for any didactic course.

If yes, describe how the program ensures that the course content, student experience, and access to didactic and laboratory materials when instruction is delivered at different geographic locations (e.g., **distant campuses**) is comparable and equivalent.

Click here to enter text.

- b) didactic instruction is provided by different pedagogical and instructional methods or techniques for some students

Check here if the program provides didactic instruction by different pedagogical and instructional methods or techniques for some students.

If yes, describe how the program ensures and documents the equivalency of course content, student experience, and access to instructional materials when didactic instruction is delivered by different pedagogical and instructional methods or techniques for some students.

Click here to enter text.

B2. Didactic Curriculum

Append the completed B2 Instructional Objectives Template. There are separate tabs for each B2 standard (e.g. B2.02, B2.03, B2.04, etc.) that must be completed. Before uploading, rename the file by replacing the word “template” with an abbreviation of the program’s name (e.g., “B2 Instructional Obj U of America.xlsx”). This one template contains evidence for most of the B2 standards.

B2.01 Rescinded 8/15/25

B2.02 The program curriculum includes instruction in the following areas of medical sciences and their application in clinical practice:

- a) anatomy
- b) physiology
- c) pathophysiology
- d) pharmacology and pharmacotherapeutics
- e) the genetic and molecular mechanisms of health and disease

Check this box to verify that instructional objectives for this Standard were included in the B2.02 tab of the B2 Instructional Objectives template appended to the application.

B2.03 The program curriculum includes instruction in clinical medicine covering all organ systems.

Check this box to verify that instructional objectives for this Standard were included in the B2.03 tab of the B2 Instructional Objectives template appended to the application.

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

Check this box to verify that instructional objectives for this Standard were included in the B2.04 tab of the B2 Instructional Objectives template appended to the application.

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

Check this box to verify that instructional objectives for this Standard were included in the B2.05 tab of the B2 Instructional Objectives template appended to the application.

B2.06 The curriculum includes instruction to prepare students to provide medical care to patients with consideration for:

- a) special health care needs
- b) ethnicity and race
- c) gender identity
- d) religion and spirituality
- e) sexual orientation
- f) social determinants of health

Check this box to verify that instructional objectives for this Standard were included in the B2.06 tab of the B2 Instructional Objectives template appended to the application.

B2.07 The curriculum includes instruction in:

- a) patient interviewing and eliciting a medical history across all age groups
- b) performing complete and focused physical examinations across all age groups
- c) generating differential diagnoses
- d) ordering and interpreting diagnostic studies
- e) patient management, including acute and chronic care plans
- f) patient education
- g) the referral of patients to other providers

Check this box to verify that instructional objectives for this Standard were included in the B2.07 tab of the B2 Instructional Objectives template appended to the application.

B2.08 The curriculum includes instruction in:

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

Check this box to verify that instructional objectives for this Standard were included in the B2.08 tab of the B2 Instructional Objectives template appended to the application.

B2.09 The curriculum includes instruction in technical skills based on current professional practice.

Check this box to verify that instructional objectives for this Standard were included in the B2.09 tab of the B2 Instructional Objectives template appended to the application.

B2.10 The curriculum prepares students to work collaboratively in interprofessional patient-centered teams. Instruction:

- a) includes content on the roles and responsibilities of various healthcare professionals
- b) emphasizes the team approach to patient-centered care
- c) includes the application of these principles in *interprofessional teams*

Check this box to verify that instructional objectives for this Standard were included in the B2.10 tab of the B2 Instructional Objectives template appended to the application.

Describe the activities that allow students to apply principles of interprofessional practice while working in interprofessional teams.

[Click here to enter text.](#)

B2.11 The curriculum includes instruction in the following areas of social and behavioral sciences and their application to clinical practice:

- a) death, dying, and bereavement
- b) human sexuality,
- c) the psychosocial effects of illness, stress, and injury
- d) substance use disorders
- e) identification and prevention of violence

Check this box to verify that instructional objectives for this Standard were included in the B2.11 tab of the B2 Instructional Objectives template appended to the application.

B2.12 The curriculum includes instruction about basic counseling that is:

- a) focused on helping patients adhere to treatment plans
- b) focused on helping patients modify their behaviors to more healthful patterns
- c) focused on helping patients develop coping strategies
- d) patient-centered and culturally sensitive

Check this box to verify that instructional objectives for this Standard were included in the B2.12 tab of the B2 Instructional Objectives template appended to the application.

B2.13 The curriculum includes instruction to prepare students to practice evidence-based medicine, including:

- a) framing of research questions
- b) interpretation of biostatistical methods
- c) evaluating the limits of medical research
- d) evaluating different types of sampling methods
- e) searching common databases to access medical literature

Check this box to verify that instructional objectives for this Standard were included in the B2.13 tab of the B2 Instructional Objectives template appended to the application.

B2.14 The curriculum includes instruction in:

- a) coding and billing
- b) documentation of care for purposes of reimbursement and healthcare business
- c) health care delivery systems
- d) health policy

Check this box to verify that instructional objectives for this Standard were included in the B2.14 tab of the B2 Instructional Objectives template appended to the application.

B2.15 The curriculum includes 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
- d) maintenance of population health

Check this box to verify that instructional objectives for this Standard were included in the B2.15 tab of the B2 Instructional Objectives template appended to the application.

B2.16 The curriculum includes instruction in:

- a) patient safety
- b) prevention of medical errors

- c) quality improvement
- d) risk management

Check this box to verify that instructional objectives for this Standard were included in the B2.16 tab of the B2 Instructional Objectives template appended to the application.

B2.17 The curriculum includes instruction about the PA profession, including:

- a) credentialing
- b) historical development
- c) laws and regulations regarding professional practice and conduct
- d) licensure and certification
- e) the PA relationship with physicians and other health care providers
- f) policy issues that affect practice
- g) professional organizations

Check this box to verify that instructional objectives for this Standard were included in the B2.17 tab of the B2 Instructional Objectives template appended to the application.

B2.18 The program curriculum includes instruction in the principles and practice of medical ethics.

Check this box to verify that instructional objectives for this Standard were included in the B2.18 tab of the B2 Instructional Objectives template appended to the application.

B2.19 The curriculum includes instruction in:

- a) intellectual honesty
- b) academic integrity
- c) professional conduct

Check this box to verify that instructional objectives for this Standard were included in the B2.19 tab of the B2 Instructional Objectives template appended to the application.

B2.20 The curriculum includes instruction in:

- a) maintaining *personal wellness*
- b) prevention of impairment
- c) prevention of burnout

Check this box to verify that instructional objectives for this Standard were included in the B2.20 tab of the B2 Instructional Objectives template appended to the application.

B3. Clinical Curriculum

B3.01 The program ensures clinical students may achieve all *SCPE learning outcomes* by:

a) securing a *sufficient* number of qualified *preceptors* and clinical sites

[Check here to confirm](#) that the SCPE sites tab in the portal contains the most current clinical placement information for the current clinical cohort.

Append the completed B3 Clinical Sites Template. Add extra columns as needed to demonstrate program calculations. Before uploading, rename the file by replacing the word “template” with an abbreviation of the program’s name (e.g., “B3 Clinical Sites U of America.xlsx”).

Describe how the program ensures that it maintains sufficient qualified preceptors and clinical sites for its current clinical cohort. **For initial provisional programs, describe how the program plans to ensure compliance with this standard.**

Click here to enter text.

[Check here](#) if the program has any overlap of cohorts on SCPEs.

If yes, describe how the overlap is handled to ensure sufficient qualified preceptors and clinical sites.

Click here to enter text.

b) limiting *telehealth/telemedicine* to no more than 50% of any individual SCPE, with the exception of behavioral health

[Check here](#) if any SCPE other than behavioral health has telehealth/telemedicine experiences.

If yes, describe how the program ensures that no more than 50% of any individual SCPE is provided through telehealth/telemedicine.

Click here to enter text.

c) ensuring that no more than 20% of the total SCPE experiences for any individual student are conducted via *telehealth/telemedicine* experiences

Append the program’s completed SCPE schedule for the most recently graduated clinical cohort and name the file appropriately (e.g., B3.01c U of America.xlsx). (This is not required for initial provisional programs) Clearly indicate which SCPEs included telehealth/telemedicine experiences and the total percentage of SCPE experiences that were conducted via telehealth/telemedicine for each student. The sites listed on the schedule coincide with the sites listed on the B3 Clinical Sites Template.

Describe how the program ensures that no more than 20% of the total SCPE experiences for any individual student are conducted via telehealth/telemedicine experiences. **For initial provisional programs, describe how the program plans to ensure compliance with this standard.**

Click here to enter text.

d) requiring in-person, direct patient care for all *SCPEs*, except for *telehealth/telemedicine* in behavioral health

Describe how the program ensures that all *SCPEs*, except for behavioral health, include in-person, direct patient care.

Click here to enter text.

e) allowing behavioral health *SCPEs* to consist of up to 100% *telehealth/telemedicine* experiences, provided that all *learning outcomes* are met

Check here if the program utilizes behavioral health *SCPEs* that consist entirely of telehealth/telemedicine experiences.

Describe how the program ensures that all learning outcomes are met during the 100% telehealth/telemedicine behavioral health *SCPEs*. For initial provisional programs, describe how the program plans to ensure compliance with this standard.

Click here to enter text.

B3.02 The program's process clearly documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students have access to:

a) the physical facilities needed to meet the *learning outcomes* for the specific *SCPE*

Upload the clinical site evaluation tool(s) utilized by the program, and name the file(s) appropriately (e.g., B3.02 U of America.docx).

Describe the program's process, format, and timing of documenting the initial evaluation of clinical sites and preceptors.

Click here to enter text.

Describe the program's process, format, and timing of documenting the ongoing evaluation of clinical sites and preceptors.

Click here to enter text.

Describe how the physical facilities are evaluated to ensure they are sufficient to enable students to meet the specific learning outcomes of the *SCPE*.

Click here to enter text.

b) patient populations needed to meet the *learning outcomes* of the specific *SCPE*

Describe how the patient populations are evaluated to ensure they are sufficient to enable students to meet the specific learning outcomes of the *SCPE*.

Click here to enter text.

c) supervision

Describe how the supervision is evaluated to ensure it is sufficient to enable students to meet the specific learning outcomes of the SCPE.

Click here to enter text.

B3.03 *Supervised clinical practice experiences* must enable all students to meet the program's *learning outcomes* for:

a) preventive patient encounters

List the program's learning outcomes that are specific to preventive patient encounters, sorted by SCPE course.

Click here to enter text.

b) acute patient encounters

List the program's learning outcomes that are specific to acute patient encounters, sorted by SCPE course.

Click here to enter text.

c) chronic patient encounters

List the program's learning outcomes that are specific to chronic patient encounters, sorted by SCPE course.

Click here to enter text.

Describe how the program ensures all students meet all the SCPE learning outcomes.

Click here to enter text.

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

- a) emergency department
- b) inpatient
- c) outpatient
- d) operating room

Check here to confirm that all active clinical sites listed in the portal are up to date and include the setting designations for each site.

List each clinical setting (a-d) and indicate in which SCPE(s) courses students experience each setting.

Click here to enter text.

Describe how the program ensures all students have experiences in each of these settings.

Click here to enter text.

B3.05 *Supervised clinical practice experiences* support the achievement of *learning outcomes* across the following domains:

- a) medical knowledge
- b) interpersonal skills
- c) clinical skills
- d) technical skills
- e) professional behaviors
- f) clinical reasoning and problem-solving abilities

[Check here to confirm](#) that all SCPE syllabi for courses listed in the portal are up to date and include the learning outcomes for each SCPE.

Describe how the program ensures that SCPEs support the achievement of learning outcomes across all domains.

Click here to enter text.

B3.06 *Preceptors for supervised clinical practice experiences* enable students to meet program-defined *learning outcomes* for:

- a) family medicine

List the program's SCPE learning outcomes for family medicine.

Click here to enter text.

Describe how the program ensures all preceptors enable students to meet the program-defined learning outcomes for family medicine. If any preceptor did not consistently enable students to meet expected learning outcomes, describe how the program identified the issue and what corrective actions were taken.

Click here to enter text.

- b) emergency medicine, including emergent care

List the program's SCPE learning outcomes for emergency medicine.

Click here to enter text.

List the program's SCPE learning outcomes that are specific to emergent care.

Click here to enter text.

Describe how the program ensures all preceptors enable students to meet the program-defined learning outcomes for emergency medicine and emergent care. If any preceptor did not enable students to meet program's defined learning outcomes, describe how the program identified the issue and what corrective actions were taken.

Click here to enter text.

c) internal medicine, including elderly patients

List the program's SCPE learning outcomes for internal medicine.

Click here to enter text.

List the program's SCPE learning outcomes that are specific to elderly patients.

Click here to enter text.

Describe how the program ensures all preceptors enable students to meet the program-defined learning outcomes for internal medicine, including elderly patients. If any preceptor's students did not meet expected learning outcomes, describe how the program identified the issue and what corrective actions were taken.

Click here to enter text.

d) surgery, including pre-operative, intra-operative, and post-operative care

List the program's SCPE learning outcomes for surgery.

Click here to enter text.

List the program's SCPE learning outcomes that are specific to pre-operative care.

Click here to enter text.

List the program's SCPE learning outcomes that are specific to intra-operative care.

Click here to enter text.

List the program's SCPE learning outcomes that are specific to post-operative care.

Click here to enter text.

Describe how the program ensures all preceptors enable students to meet the program-defined learning outcomes for surgery, including pre-operative, intra-operative, and post-operative care. If any preceptor's students did not meet expected learning outcomes, describe how the program identified the issue and what corrective actions were taken.

Click here to enter text.

e) pediatrics, including care for infants, children, and adolescents

List the program's SCPE learning outcomes for pediatrics.

Click here to enter text.

List the program's SCPE learning outcomes that are specific to infants.

Click here to enter text.

List the program’s SCPE learning outcomes that are specific to children.

Click here to enter text.

List the program’s SCPE learning outcomes that are specific to adolescents.

Click here to enter text.

Describe how the program ensures all preceptors enable students to meet the program-defined learning outcomes for pediatrics, including care for infants, children, and adolescents. If any preceptor’s students did not meet expected learning outcomes, describe how the program identified the issue and what corrective actions were taken.

Click here to enter text.

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

List the program’s SCPE learning outcomes for women’s health.

Click here to enter text.

List the program’s SCPE learning outcomes that are specific to prenatal care.

Click here to enter text.

List the program’s SCPE learning outcomes that are specific to gynecologic care.

Click here to enter text.

Describe how the program ensures all preceptors enable students to meet the program-defined learning outcomes for women’s health, including prenatal and gynecologic care. If any preceptor’s students did not meet expected learning outcomes, describe how the program identified the issue and what corrective actions were taken.

Click here to enter text.

g) behavioral and mental health care

List the program’s SCPE learning outcomes for behavioral and mental health care.

Click here to enter text.

Describe how the program ensures all preceptors enable students to meet the program-defined learning outcomes for behavioral and mental health care. If any preceptor’s students did not meet expected learning outcomes, describe how the program identified the issue and what corrective actions were taken.

Click here to enter text.

B4. Assessment

B4.01 The program conducts *frequent*, objective, and documented evaluations of student performance to ensure students meet the program's *learning outcomes* for both didactic and *supervised clinical practice experience* components. The evaluations:

- a) align with what is expected and taught

Describe how the program ensures that assessments in the **didactic** curriculum align with what is expected and taught.

Click here to enter text.

Describe how the program ensures that assessments in the **clinical** curriculum align with what is expected and taught.

Click here to enter text.

Append the assessment tools for each SCPE course here, excluding multiple-choice exams or quizzes. The assessment uploads may be individual files or one file per SCPE with a table of contents. Clearly title the attachments using the SCPE course title (e.g. B4.01 Pediatrics Preceptor Eval.docx).

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

Describe how the program ensures that assessments in the **didactic** curriculum identify deficiencies in a timely manner. Include an overview of how the program ensures that those deficiencies are addressed in a timely manner.

Click here to enter text.

Describe how the program ensures that assessments in the **clinical courses** identify deficiencies in a timely manner. Include an overview of how the program ensures that those deficiencies are addressed in a timely manner.

Click here to enter text.

B4.02 The program documents the equivalency of student evaluation methods and outcomes when didactic instruction is:

- a) conducted at geographically separate locations and/or

Check here if the program conducts **didactic instruction at geographically separate locations.**

If so, describe how the program documents the equivalency of student evaluation methods and outcomes based on the location of instruction. Include a description of any differences (evaluation methods and outcomes that were not equivalent) identified for the most recent graduation cohort and how they were addressed.

Click here to enter text.

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

[Check here](#) if the program provides didactic instruction by different pedagogical and instructional methods or techniques for some students.

If so, describe how the program documents the equivalency of student evaluation methods and outcomes based on pedagogical and instructional methods or techniques. Include a description of any differences (evaluation methods and outcomes that were not equivalent) identified for the most recent graduation cohort and how they were addressed.

Click here to enter text.

B4.03 The program conducts and documents a *summative evaluation* of each student within the final four months of the program to verify that each student meets all program-defined *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
- e) professional behaviors

Describe how the program competencies are assessed on the summative evaluation.

Click here to enter text.

Append the completed B4.03 Template. Before uploading, rename the file by replacing the word “template” with an abbreviation of the program’s name (e.g., “B4.03 U of America.xlsx”).

Section C. Program Self-Assessment

Programs must engage in an ongoing process of self-assessment, designed to ensure ongoing quality and improvement. This process involves systematic collection of data, analysis to draw meaningful conclusions, and the development of data-driven action plans for self-improvement.

For each C Standard, the program will document its ongoing self-assessment related to the required questions regarding the effectiveness of operating the program and preparing graduates for clinical practice (C1.01) and the sufficiency of program personnel (C1.02). For additional guidance and clarification, please refer to the Compliance Manual as a primary resource.

For each required question, the program will:

Collect Data

- Collect the required data.
- Determine if the data points met or did not meet program expectations.

Conduct and Document Critical Analysis

- Analyze changes in related data over time (trend analysis).

- Analyze how data points relate to each other to answer the required question (comparisons).
- Consider other influences or contributing factors (contextualization).

Draw Conclusions

- Identify whether the program meets its expectations or needs improvement based on the data analysis.

Develop Self-Improvement Action Plans

- Define the action plan(s) for each identified area needing improvement based on the data and analysis.
- Specify the desired outcomes.
- Identify people responsible for the action plan implementation.
- Determine how and when outcomes will be measured.

Programs are expected to maintain documentation of ongoing self-assessment. At the site visit, the program will provide evidence of its ongoing self-assessment for the previous three years. Additionally, the program must be able to discuss the analysis in detail during a site visit.

INSTRUCTIONS:

Initial Provisional Applications: Programs applying for Initial Provisional Accreditation **do not** complete the Program Self-Assessment portion of the application related to Standards C1.01 and C1.02. Since the program is not yet operational, data collection and analysis pertaining to self-assessment are not required at this stage. However, the **Program Director must attest** to an understanding of and responsibility for the data collection and analysis required for future accreditation submissions.

Program Director Attestation

I, acknowledge my understanding of the requirements of Standards C1.01 and C1.02 and accept responsibility for ensuring that appropriate data will be collected, analyzed, and used for program self-assessment and future accreditation reporting.

Provisional Monitoring Applications: Programs applying for Provisional Monitoring Accreditation **must complete questions 1–3 for Standard C1.01 and both required questions for Standard C1.02**. The **Program Director must attest** to an understanding of and responsibility for the collection and analysis of data necessary to address the remaining required questions for Standard C1.01 in future accreditation submissions.

Program Director Attestation

I, acknowledge my understanding of the requirements of Standards C1.01 and C1.02. I accept responsibility for ensuring that the program continues to collect and analyze

data addressing these standards, and for expanding the scope of analysis to include all required questions in future accreditation submissions.

Final Provisional & Continuing Applications: Programs applying for Final Provisional Accreditation or Continuing Accreditation must complete all required elements and questions for Standards C1.01 and C1.02 as outlined below.

Standard C1.01

The program documents ongoing self-assessment of its overall *effectiveness* in operating the program and preparing graduates for clinical practice by collecting data, using critical analysis to draw conclusions, and creating self-improvement action plans. At a minimum, the program's process utilizes data including:

- program-defined admissions data
- *PANCE* scores and sub-scores
- didactic *attrition*, clinical *attrition*, and overall *attrition*
- course grades, didactic and clinical (including exam scores as appropriate)
- course and instructor evaluations, including clinical sites and *preceptors*
- *summative evaluation* results
- graduate/exiting student evaluation of the program
- program-defined measures of *effectiveness* of the program director, *principal faculty*, and *medical director* in their roles outside of teaching
- *remediation*

Required Questions:

1. Are program faculty effective in operating the program (outside of teaching)?
2. Is the admissions process effective in selecting students who can successfully complete the program?
3. Is the didactic curriculum effective in preparing graduates for clinical practice?
4. Is the clinical curriculum effective in preparing graduates for clinical practice?
5. Overall, does the program successfully prepare graduates for clinical practice?

C1.01 Data:

Append the completed C101 DATA TABLES Template. Before uploading, rename the file by replacing the word "template" with an abbreviation of the program's name (e.g., "C1.01 U of America.xlsx"). When completing the template, please read the instructions on each tab in the template because the instructions are unique to each data set. Some data sets are marked "optional." If not marked as optional, data entry is required. Throughout the data tables, highlight all data below the program's benchmark in red. The program may add up to three additional tables per standard to use in its analysis. If the program adds tables, they must be added in the "Extra Data Tables" sheet/tab of the C101 DATA TABLES Template.

Programs with distant campus locations will upload the **C101 DATA TABLES MULTI Campus**. Please read the instructions in the preceding paragraph. Use the tabs designated “DC1” for the first distant campus, “DC2” for the second distant campus, and “DC3” for the third distant campus, as needed, in order to record data for the main campus and all distant campuses separately. Programs may delete any unnecessary distant campus tabs in the spreadsheet.

Question 1: Are program faculty effective in operating the program (outside of teaching)?

Data Sets:

Select at least three specific data sets, including the required Faculty Effectiveness data set as one of the three, that the program referenced and utilized in the analysis narrative below. For each data set selected, provide a brief description of the data reflected in the attached data table.

Example:
 Program Faculty Data
Description: PD evaluation below benchmark related to organization x 3 years

Admissions Data
Description:
Click here to enter text.

Attrition Data
Description:
Click here to enter text.

PANCE Data
Description:
Click here to enter text.

Course Grades
Description:
Click here to enter text.

Course Evaluations Didactic Clinical
Description:
Click here to enter text.

Instructor Evaluations

Didactic

Clinical Course / Site Evaluations

Description:

Click here to enter text.

Summative Examination

Description:

Click here to enter text.

Exit Survey

Description:

Click here to enter text.

Faculty Effectiveness (REQUIRED FOR THIS QUESTION)

Description:

Click here to enter text.

Remediation

Description:

Click here to enter text.

Other Click here to enter text.

Description:

Click here to enter text.

Analysis

The documented analysis demonstrates a clear and logical link between the data reviewed, the conclusion reached, and the action plan developed. The written narrative provides sufficient detail to allow reviewers to follow the program's reasoning.

Describe the analysis conducted. Reference the data sets identified above which led the program to its conclusion noted below and subsequent action plans (if needed).

** limit response to 1500 words.*

Click here to enter text.

Conclusion:

Select the conclusion from the list below that resulted from the data analysis conducted and described. Ensure that the selection reflects both the evidence in the data and the interpretation provided in the narrative.

The program faculty are effective in operating the program.

This is an area needing improvement. (Provide Self-Improvement Action Plan below)

Self-Improvement Action Plans:

If the program identified this as an area needing improvement, **list the corresponding action plan(s)**. For each action item, provide the following information:

1. Action Plan: A description of the plan to address the area needing improvement.
2. Expected Outcome: The anticipated result or measure of success for the action plan.
3. Responsible Party(ies): The individual(s) or role(s) accountable for implementing the action plan.
4. Outcomes: Describe how and when outcomes will be measured.

Click here to enter text.

Question 2: Is the admissions process effective in selecting students who can successfully complete the program?

Data Sets:

Select at least three specific data sets, including the attrition data set as one of the three, that the program referenced and utilized in the analysis narrative below.

For each data set, **provide a brief description of the data** reflected in the attached data table.

Example:

Attrition Data

Description: Past three years of attrition data below the program benchmark.

Admissions Data

Description:

Click here to enter text.

Attrition Data **(REQUIRED)**

Description:

Click here to enter text.

PANCE Data

Description:

Click here to enter text.

Course Grades

Description:

Click here to enter text.

- Course Evaluations Didactic Clinical

Description:

Click here to enter text.

- Instructor Evaluations Didactic Clinical

Description:

Click here to enter text.

- Summative Examination

Description:

Click or here to enter text.

- Exit Survey

Description:

Click here to enter text.

- Faculty Effectiveness

Description:

Click here to enter text.

- Remediation

Description:

Click here to enter text.

- Other Click here to enter text.

Description:

Click here to enter text.

Analysis

The documented analysis demonstrates a clear and logical link between the data reviewed, the conclusion reached, and the action plan developed. The written narrative provides sufficient detail to allow reviewers to follow the program's reasoning. **Describe the analysis conducted.** Reference the data sets identified above which led the program to its conclusion noted below and subsequent action plans (if needed).

** limit response to 1500 words*

Click here to enter text.

Conclusion:

Select the conclusion from the list below that resulted from the data analysis conducted and described.

Ensure that the selection reflects both the evidence in the data and the interpretation provided in the narrative.

- The admissions process is effective.
- This is an area needing improvement. (Provide Self-Improvement Action Plan below)

Self-Improvement Action Plans:

If the program identified this as an area needing improvement, **list the corresponding action plan(s)**. For each action item, provide the following information:

1. Action Plan: A description of the plan to address the area needing improvement.
2. Expected Outcome: The anticipated result or measure of success for the action plan.
3. Responsible Party(ies): The individual(s) or role(s) accountable for implementing the action plan.
4. Outcomes: Describe how and when outcomes will be measured.

Click here to enter text.

Question 3: Is the didactic curriculum effective in preparing graduates for clinical practice?

Data Sets:

Select at least three specific data sets, including the didactic course evaluation data set as one of the three, that the program referenced and utilized in the analysis narrative below. For each data set, **provide a brief description of the data** reflected in the attached data table.

Example:
 Course Evaluation Data
Description: Course evaluations below benchmark for Anatomy x 2 years.

Admissions Data
Description:
Click here to enter text.

Attrition Data
Description:
Click here to enter text.

PANCE Data
Description:
Click here to enter text.

Course Grades

Description:

Click here to enter text.

Course Evaluations

Didactic (REQUIRED)

Clinical

Description:

Click here to enter text.

Instructor Evaluations

Didactic

Clinical

Description:

Click here to enter text.

Summative Examination

Description:

Click here to enter text.

Exit Survey

Description:

Click here to enter text.

Faculty Effectiveness

Description:

Click here to enter text.

Remediation

Description:

Click here to enter text.

Other Click or tap here to enter text.

Description:

Click here to enter text.

Analysis

The documented analysis demonstrates a clear and logical link between the data reviewed, the conclusion reached, and the action plan developed. The written narrative provides sufficient detail to allow reviewers to follow the program's reasoning. **Describe the analysis conducted.** Reference the data sets identified above which led the program to its conclusion noted below and subsequent action plans (if needed).

** limit response to 1500 words*

Click here to enter text.

Conclusion:

Select the conclusion from the list below that resulted from the data analysis conducted and described. Ensure that the selection reflects both the evidence in the data and the interpretation provided in the narrative.

- The didactic curriculum is effective.
- This is an area needing improvement. (Provide Self-Improvement Action Plan below)

Self-Improvement Action Plans:

If the program identified this as an area needing improvement, list the corresponding action plan(s). For each action item, provide the following information:

1. Action Plan: A description of the plan to address the area needing improvement.
2. Expected Outcome: The anticipated result or measure of success for the action plan.
3. Responsible Party(ies): The individual(s) or role(s) accountable for implementing the action plan.
4. Outcomes: Describe how and when outcomes will be measured.

Click here to enter text.

Question 4: Is the clinical curriculum effective in preparing graduates for clinical practice?

Data Sets:

Select at least three specific data sets, including the clinical course evaluation data set as one of the three, that the program referenced and utilized in the analysis narrative below. For each data set, provide a brief description of the data reflected in the attached data table.

Example:

Course Evaluation Data

Description: Clinical course and site evaluations above benchmark x 3 years.

Admissions Data

Description:

Click here to enter text.

PANCE Data

Description:

Click here to enter text.

Course Grades

Description:

Click here to enter text.

- Course Evaluations Didactic Clinical Course/Clinical Site (REQUIRED)

Description:

Click here to enter text.

- Instructor Evaluations Didactic Clinical

Description:

Click here to enter text.

- Summative Examination

Description:

Click here to enter text.

- Exit Survey

Description:

Click here to enter text.

- Faculty Effectiveness

Description:

Click here to enter text.

- Remediation

Description:

Click here to enter text.

- Other

Description:

Click here to enter text.

Analysis

The documented analysis demonstrates a clear and logical link between the data reviewed, the conclusion reached, and the action plan developed. The written narrative provides sufficient detail to allow reviewers to follow the program's reasoning.

Describe the analysis conducted. Reference the data sets identified above which led the program to its conclusion noted below and subsequent action plans (if needed).

** limit response to 1500 words.*

Click here to enter text.

Conclusion:

Select the conclusion from the list below that resulted from the data analysis conducted and described.

Ensure that the selection reflects both the evidence in the data and the interpretation provided in the narrative.

- The clinical curriculum is effective.
- This is an area needing improvement. (Provide Self-Improvement Action Plan below)

Self-Improvement Action Plans:

If the program identified this as an area needing improvement, **list the corresponding action plan(s)**.

For each action item, provide the following information:

1. Action Plan: A description of the plan to address the area needing improvement.
2. Expected Outcome: The anticipated result or measure of success for the action plan.
3. Responsible Party(ies): The individual(s) or role(s) accountable for implementing the action plan.
4. Outcomes: Describe how and when outcomes will be measured.

Click here to enter text.

Question 5: Overall, does the program successfully prepare graduates for clinical practice?

Data Sets:

Select at least three specific data sets, including PANCE and Summative Exam data sets as two of the three, that the program referenced and utilized in the analysis narrative below.

For each data set, **provide a brief description of the data** reflected in the attached data table.

Example:

Summative Examination Data

Description: Downward trend noted in written exam scores x 3 years

Admissions Data

Description:

Click here to enter text.

PANCE Data (REQUIRED)

Description:

Click here to enter text.

Course Grades

Description:

Click here to enter text.

- Course Evaluations Didactic Clinical Course/Site Evaluation

Description:

Click here to enter text.

- Instructor Evaluations Didactic Clinical

Description:

Click here to enter text.

- Summative Examination (REQUIRED)

Description:

Click here to enter text.

- Exit Survey

Description:

Click here to enter text.

- Faculty Effectiveness

Description:

Click here to enter text.

- Remediation

Description:

Click here to enter text.

- Other Click or tap here to enter text.

Description:

Click here to enter text.

Analysis

The documented analysis demonstrates a clear and logical link between the data reviewed, the conclusion reached, and the action plan developed. The written narrative provides sufficient detail to allow reviewers to follow the program's reasoning. **Describe the analysis conducted.** Reference the data sets identified above which led the program to its conclusion noted below and subsequent action plans (if needed).

** limit response to 1500 words.*

Click here to enter text.

Conclusion:

Select the conclusion from the list below that resulted from the data analysis conducted and described. Ensure that the selection reflects both the evidence in the data and the interpretation provided in the narrative.

- Overall, the program is effective in preparing graduates for clinical practice.
- This is an area needing improvement. (Provide Self-Improvement Action Plan below)

Self-Improvement Action Plans:

If the program identified this as an area needing improvement, **list the corresponding action plan(s)**.

For each action item, provide the following information:

1. Action Plan: A description of the plan to address the area needing improvement.
2. Expected Outcome: The anticipated result or measure of success for the action plan.
3. Responsible Party(ies): The individual(s) or role(s) accountable for implementing the action plan.
4. Outcomes: Describe how and when outcomes will be measured.

Click here to enter text.

Standard C1.02

The program documents ongoing self-assessment of the sufficiency of program personnel by collecting data, using critical analysis to draw conclusions, and creating self-improvement action plans. These data points, at a minimum, will include:

- student, faculty, and staff evaluation of the sufficiency of personnel by type or task
- *principal faculty* and staff full-time *equivalents* (FTE) filled and vacant with *attrition* rates
- workload calculation for each *program faculty* and staff member

Required Questions:

1. Does the program have sufficient principal faculty (number, capacity, and workload) to operate the program and fulfill obligations to matriculated and enrolled students?
2. Does the program have sufficient program administrative staff (number, capacity, and workload) to operate the program and fulfill obligations to matriculated and enrolled students?

C1.02 Data:

Upload the completed C102 DATA TABLES Template. Before uploading, rename the file by replacing the word “template” with an abbreviation of the program’s name (e.g., “C102 U of America.xlsx”). When completing the template, please read the instructions on each tab in the template because the instructions are unique to each tab. Some data sets are marked “optional”. If not marked as optional, a response is required. Throughout the data tables, highlight all data below the program’s benchmark in red. The program may add up to three additional tables and data points per standard to use in its analysis. If the program adds tables, they must be added in the “Extra Data Tables” spreadsheet of the C102 DATA TABLES Template.

Of note: workload data is a new requirement in the 6th edition. Therefore, data from September 2025 onward is acceptable if the program did not collect this data previously.

Programs with distant campus locations will upload the C102 DATA TABLES MULTI Campus. Please read the instructions in the preceding paragraph. Use the tabs designated “DC1” for the first distant

campus, “DC2” for the second distant campus, and “DC3” for the third distant campus, as needed, in order to record data for the main campus and all distant campuses separately. Programs may delete any unnecessary distant campus tabs in the spreadsheet.

Question 1: Does the program have sufficient principal faculty (number, capacity, and workload) to operate the program and fulfill obligations to matriculated and enrolled students?

Data Sets

Utilize the number of FTE, attrition rates by role, actual workload calculation, and survey data to determine whether the program has sufficient personnel by role. For each data set, **provide a brief statement of the data** reflected in the attached data table.

Example:
 Workload Data
Description: Average faculty workload has increased 30% over past year.

FTE Data and Attrition (REQUIRED)
Description:
Click here to enter text.

Workload (REQUIRED)
Description:
Click here to enter text.

Sufficiency of Personnel by Task (REQUIRED)
Description:
Click here to enter text.

Other Click here to enter text.
Description:
Click or here to enter text.

Analysis

The documented analysis demonstrates a clear and logical link between the data reviewed, the conclusion reached, and the action plan developed. The written narrative provides sufficient detail to allow reviewers to follow the program’s reasoning. **Describe the analysis conducted.** Reference the data sets identified above which led the program to its conclusion noted below and subsequent action plans (if needed). The program must focus its analysis on faculty workload data, faculty perceptions,

and faculty attrition.

** limit response to 1500 words.*

Click here to enter text.

Conclusion:

Select the conclusion from the list below that resulted from the data analysis conducted and described. Ensure that the selection reflects both the evidence in the data and the interpretation provided in the narrative.

- Overall, the program has sufficient principal faculty (number, capacity, and workload) to operate the program and fulfill obligations to matriculated and enrolled students.
- This is an area needing improvement. (Provide Self-Improvement Action Plan below)

Self-Improvement Action Plans:

If the program identified this as an area needing improvement, **list the corresponding action plan(s)**. For each action item, provide the following information:

1. Action Plan: A description of the plan to address the area needing improvement.
2. Expected Outcome: The anticipated result or measure of success for the action plan.
3. Responsible Party(ies): The individual(s) or role(s) accountable for implementing the action plan.
4. Outcomes: Describe how and when outcomes will be measured.

Click here to enter text.

Question 2: Does the program have sufficient program administrative staff (number, capacity, and workload) to operate the program and fulfill obligations to matriculated and enrolled students?

Data Sets:

Utilize the number of FTE and attrition rates by role, actual workload calculation, and survey data to determine whether the program has sufficient personnel by role. For each data set, **provide a brief statement of the data** reflected in the attached data table.

Example:

Workload Data

Description: Administrative staff have worked overtime >50% of last year.

FTE Data

Description:

Click here to enter text.

Workload

Description:

Click here to enter text.

Sufficiency of Personnel by Task

Description:

Click here to enter text.

Other Click here to enter text.

Description:

Click here to enter text.

Analysis

The documented analysis demonstrates a clear and logical link between the data reviewed, the conclusion reached, and the action plan developed. The written narrative provides sufficient detail to allow reviewers to follow the program’s reasoning. **Describe the analysis conducted.** Reference the data sets identified above which led the program to its conclusion noted below and subsequent action plans (if needed). The program must focus its analysis on staff workload data, staff perceptions, and staff attrition.

** limit response to 1500 words.*

Click here to enter text.

Conclusion:

Select the conclusion from the list below that resulted from the data analysis conducted and described. Ensure that the selection reflects both the evidence in the data and the interpretation provided in the narrative.

- Overall, the program has sufficient program administrative staff (number, capacity, and workload) to operate the program and fulfill obligations to matriculated and enrolled students.
- This is an area needing improvement. (Provide Self-Improvement Action Plan below)

Self-Improvement Action Plans:

If the program identified this as an area needing improvement, **list the corresponding action plan(s)**. For each action item, provide the following information:

1. Action Plan: A description of the plan to address the area needing improvement.
2. Expected Outcome: The anticipated result or measure of success for the action plan.
3. Responsible Party(ies): The individual(s) or role(s) accountable for implementing the action plan.
4. Outcomes: Describe how and when outcomes will be measured.

Click here to enter text.

Section D. Provisional Accreditation

Check here if the program is applying for initial provisional accreditation. If so, complete the D Standard items. If not, skip this section.

D1. Provisional Accreditation Requirements

D1.01 Based on the qualifications outlined in the Standards, the program has:

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

List the program director's FTE.

Click here to enter text.

List the date of the program director's first day of work.

Click to enter a date.

List the number of months before the first day of the site visit that the program director has worked in this role.

Click or tap to enter a date.

- b) a *medical director* hired by the institution and working on a permanent basis at least 15 months prior to the first day of the scheduled site visit

List the date of the medical director's first day of work.

Click here to enter text.

List the number of months before the first day of the site visit that the medical director has worked in this role.

Click here to enter text.

- c) at least 2.0 FTE PA-C *principal faculty* hired by the institution and working on a permanent basis at least 9 months prior to the first day of the scheduled site visit

List the two PA-C principal faculty members by name and FTE. Include next to each the date of their first day of work and the number of months before the first day of the site visit that each worked in this role.

Click here to enter text.

d) a 1.0 FTE *principal faculty* (the third *principal faculty* member) hired by the institution and working on a permanent basis prior to the first day of the scheduled site visit

List the PA-C or non-PA-C principal faculty member by name and FTE that the program has designated as this third principal faculty member. Include the date of their first day of work and the number of months before the first day of the site visit that they worked in this role.

Click here to enter text.

e) at least 1.0 FTE support staff hired by the institution and working on a permanent basis at least 9 months prior to the first day of the scheduled site visit.

List the support staff members by name and FTE. Include next to each the date of their first day of work and the number of months before the first day of the site visit that each worked in this role.

Click here to enter text.

D1.02 The developing program *publishes* and makes *readily available* to *prospective students* and everyone who requests information:

a) its ARC-PA applicant status as provided to the program by the ARC-PA

Provide the URL link(s) to the program's website where its ARC-PA applicant status is published.

||

For initial provisional programs that do not yet have public-facing websites, describe how this information is made readily available to prospective students.

Click here to enter text.

b) that the program is not yet accredited

Provide the URL link(s) to the program's website where it clearly states that it is not yet accredited.

||

For initial provisional programs that do not yet have public-facing websites, describe how this information is made readily available to prospective students.

Click here to enter text.

c) the implications of non-accreditation by the ARC-PA.

Provide the URL link(s) to the program's website where it lists the implications of non-accreditation.

||

For initial provisional programs that do not yet have public-facing websites, describe how this information is made readily available to prospective students.

Click here to enter text.

Append a blinded copy of a typical or template program information email sent to prospective students that clearly states the program's accreditation status and the implications of non-accreditation by the ARC-PA. Name the file appropriately (e.g., D1.02 U of America.docx)

D1.03 The institution-approved complete curriculum is submitted with the application of record.

List the date that the institution approved the complete curriculum.

Click to enter a date.

Append a fully executed copy of the evidence of approval. Name the file appropriately (e.g., D1.03 U of America.docx)

Section E. Accreditation Maintenance

E1. Program and Sponsoring Institution Responsibilities

E1.01 The program informs 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 accrediting agency.

Check here to indicate that the program director is aware of this responsibility.

Check here to verify that the program's sponsoring institution's accrediting agency and status are correct in the Portal.

If the program recently had, or expects to have in the near future, a change in the accrediting agency or adverse accreditation action, describe the situation. Include how and when it will be (or was) resolved, if known.

Click here to enter text.

E1.02 The program agrees to and cooperates 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.

Check here to indicate that the program director is aware of this responsibility.

If this standard is currently or recently applicable to the program, describe the situation. Include how and when it will be resolved, if known.

Click here to enter text.

E1.03 The program submits reports or documents as required by the ARC-PA.

[Check here to indicate](#) that the program director is aware of this responsibility.

E1.04 The program informs 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,

[Check here to indicate](#) that the program director is aware of this responsibility.

If the program has recently had within the past 6 months, or is expected to have a change in program director, [describe](#) the situation.

b) *medical director* (or interim) within 30 days of the vacancy, and

[Check here to indicate](#) that the program director is aware of this responsibility.

If the program has recently had, or is expected to have in the near future, a change in medical director, [describe](#) the situation.

c) *principal faculty* within 30 days of the vacancy.

[Check here to indicate](#) that the program director is aware of this responsibility.

If the program has recently had, or is expected to have in the near future, a change in principal faculty, [describe](#) the situation.

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

[Check here to indicate](#) that the program director is aware of this responsibility.

[If the program recently had vacant positions, describe the situation.](#) Include how the program adhered to the quarterly update requirement, and how and when the vacancies will be resolved, if known.

E1.06 An interim program director (IPD) meets the qualifications of the program director.

[Check here to indicate](#) that the program director is aware of this responsibility.

If the program has recently had within the past 6 months, or is expected to have a change in program director or interim program director, describe the situation.

Click here to enter text.

E1.07 The appointment of the IPD position:

- a) occurs within five business days of the vacancy caused by the resignation/termination of the program director, and

Check here to indicate that the program director is aware of this responsibility.

- b) does not exceed 12 months.

Check here to indicate that the program director is aware of this responsibility.

E1.08 The program informs the ARC-PA within two business days, 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

Check here to indicate that the program director is aware of this responsibility.

If this standard is currently or recently applicable to the program, describe the situation. Include how and when it will be resolved, if known.

Click here to enter text.

- b) the medical director/interim medical director or principal faculty greater than 90 calendar days.

Check here to indicate that the program director is aware of this responsibility.

If this standard is currently or recently applicable to the program, describe the situation. Include how and when it will be resolved, if known.

Click here to enter text.

E1.09 The program receives 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*

Check here to indicate that the program director is aware of this requirement to receive approval.

If this standard is currently or recently applicable to the program, describe the situation. Include how and when it will be resolved, if known.

Click here to enter text.

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

[Check here to indicate](#) that the program director is aware of this requirement to receive approval.

If this standard is currently or recently applicable to the program, describe the situation. Include how and when it will be resolved, if known.

Click here to enter text.

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

[Check here to indicate](#) that the program director is aware of this requirement to receive approval.

If this standard is currently or recently applicable to the program, describe the situation. Include how and when it will be resolved, if known.

Click here to enter text.

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

[Check here to indicate](#) that the program director is aware of this requirement to receive approval.

If this standard is currently or recently applicable to the program, describe the situation. Include how and when it will be resolved, if known.

Click here to enter text.

e) program length, greater than one month.

[Check here to indicate](#) that the program director is aware of this requirement to receive approval.

If this standard is currently or recently applicable to the program, describe the situation. Include how and when it will be resolved, if known.

Click here to enter text.

E1.10 The program informs 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.

[Check here to indicate](#) that the program director is aware of this requirement to inform the ARC-PA no less than six (6) months before implementation of proposed changes to the degree granted at program completion.

If the program is currently or will be proposing a change to the degree granted at program completion, describe the situation. Include how and when it will be resolved, if known.

Click here to enter text.

E1.11 The program immediately informs the ARC-PA in writing, using forms and processes developed by the ARC-PA when:

- a) enrollment exceeds its *maximum approved class size*, or

Check here to indicate that the program director is aware of this requirement to inform the ARC-PA immediately.

If the program exceeded its maximum approved class size in the past 6 months, describe the situation.

Click here to enter text.

- 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*.

Check here to indicate that the program director is aware of this requirement to inform the ARC-PA immediately.

If the program experienced a substantive decrease in fiscal support meeting these criteria in the past 6 months, describe the situation.

Click here to enter text.

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

Check here to indicate that the program director is aware of this requirement to inform the ARC-PA as soon as any sponsorship transfer is considered.

If the program knows of plans to transfer program sponsorship to a different institution, describe the situation.

Click here to enter text.

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

Check here to indicate that the program director is aware of this responsibility.

Statements and Signatures for Accreditation Application

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

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

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

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

THE PROGRAM UNDERSTANDS THAT THE DECISION AS TO WHETHER IT QUALIFIES FOR ACCREDITATION AND ALL OTHER DECISIONS OF THE ARC-PA IN CONNECTION WITH THE ACCREDITATION PROCESS REST SOLELY AND EXCLUSIVELY WITH THE ARC-PA AND THAT THE DECISION OF THE ARC-PA IS FINAL.
I HAVE THE AUTHORITY TO ENTER INTO THIS AGREEMENT ON BEHALF OF THE PROGRAM.

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

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

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

I understand and agree that the Program will be subject to an adverse accreditation action which could include denial of accreditation or withdrawal of accreditation, and that future eligibility for accreditation may be denied

in the event that any of the statements or answers made in this submitted response are false or in the event that the Program violates any of the policies governing accredited programs.

Chief Administrative Officer of Program's Sponsoring Institution:

As listed in the program portal

The name that appears here is deemed an electronic signature.

Program Director:

The name that appears here is deemed an electronic signature.

SAMPLE

Appendices for Accreditation Application

Appendices noted as required must be included in the application. Appendices marked not required must also be included if the program meets the circumstances described in the instructions for that standard within the application. Carefully review the instructions provided for each standard to determine whether your program is required to submit the corresponding appendix.

Follow the sample file name provided as a guide, substituting your program name as appropriate. Abbreviate as necessary; the title may not exceed 20 characters, including spaces.

COMPLETED	STANDARD	REQUIRED	CONTENT	SAMPLE FILE NAME
<input type="checkbox"/>	A1.01	No	Affiliation agreements for non-clinical sites	A1.01 Best U.docx
<input type="checkbox"/>	A1.02c	Yes	The institution's evaluation of the program director's leadership	A1.02c Best U.docx
<input type="checkbox"/>	A1.02f	No	Policies and procedures for processing faculty and staff grievances and allegations of harassment	A1.02f Best U.docx
<input type="checkbox"/>	A1.02g	No	Policies and procedures for processing student allegations of harassment and <i>mistreatment</i>	A1.02g Best U.docx
<input type="checkbox"/>	A1.02h	No	Policies and procedures for refunds of tuition and fees	A1.02h Best U.docx
<input type="checkbox"/>	A1.06	Yes	Completed A1.06 template of the program's 4-year Budget	A1.06 Budget Best U.docx
<input type="checkbox"/>	A2.05	Yes	Completed A2.05 Personnel Responsibilities Template	A2.05 Personnel Best U.xlsx
<input type="checkbox"/>	A2.07	Yes	Current job description of the Program Director	A2.07 PD JD Best U.docx
<input type="checkbox"/>	A2.09	Yes	Program Director leadership evaluation as it relates to A2.09 standard	A2.09 PD Eval Best U.docx
<input type="checkbox"/>	A2.10	Yes	Program organizational chart	A2.10 Org Chart Best U.docx
<input type="checkbox"/>	A2.12	Yes	Current job description of the Medical Director	A2.12 MD JD Best U.docx
<input type="checkbox"/>	A2.14	Yes	Completed A2 Preceptor License Cert Template	A2.14 Preceptor Best U.docx
<input type="checkbox"/>	A3.02-A3.07	No	Copy of policy related to standard	Standard# Best U.docx
<input type="checkbox"/>	A3.13	Yes	Forms used to screen and select applicants for acceptance to the program	A3.13 Admission Rubric Best U.docx
<input type="checkbox"/>	A3.15	No	Templates of forms utilized in the advanced placement process	A3.15 Best U.docx
<input type="checkbox"/>	A3.18	Yes	Blank copy of the student health immunization and screening form	A3.18 best U.docx
<input type="checkbox"/>	A3.19	Yes	Current job description including duties, responsibilities, and required qualifications specific to each faculty member	A3.19 DoeJ BestU.docx
<input type="checkbox"/>	A3.20	No	Current CV for course directors who are not the program director, medical director, or a principal faculty member	A3.20 MooreM BestU.docx
<input type="checkbox"/>	B2	Yes	Completed B2 Instructional Objectives Template	B2 Instructional Obj Best U.xlsx
<input type="checkbox"/>	B3	Yes	Completed B3 Clinical Sites Template	B3 Clinical Sites Best U.xlsx
<input type="checkbox"/>	B3.01	Yes	SCPE schedule for the most recently graduated clinical cohort	B3.01 Best U.xlsx
<input type="checkbox"/>	B3.02	Yes	Clinical Site Evaluation Tools for initial and ongoing evaluation of sites and preceptors	B3.02 Best U.docx
<input type="checkbox"/>	B4.01	Yes	Copies of assessment tools/rubrics (excluding exams/quizzes) to evaluate students within each SCPE course	B4.01 Surgery Preceptor Eval.docx
<input type="checkbox"/>	B4.03	Yes	Completed B4.03 Template	B4.03 Best U.xlsx
<input type="checkbox"/>	C1.01	Yes	Completed C1.01 Data Table Template	C1.01 Best U.xlsx
<input type="checkbox"/>	C1.02	Yes	Completed C1.02 Data Table Template	C1.02 Best U.xlsx
<input type="checkbox"/>	D1.02	No	Information email sent to prospective students	D1.02 Best U.docx
<input type="checkbox"/>	D1.03	No	Institution approval of the program curriculum	D1.03 Best U.docx

Saving and Submission of Provisional Accreditation Application and Appendices

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

For example:

- The title of the application for the “University of America PA Program” should be saved as:
1_Application U of America.docx

- The title of the program organizational chart required for Standard A2.01 should be saved as:
A2.10 Org Chart U of America.xlsx.

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

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

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

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

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

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

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