

Norwalk Hospital/Yale Physician Assistant Surgical Residency Accreditation History

First accredited: September 2022
Next review: September 2032
Maximum class size per cohort: 12
Number of cohorts per year: 1
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September 2025

Accreditation-Clinical Postgraduate Program; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards* after completion of the provisional review process. Next Comprehensive Evaluation: September 2032. The program is approved for up to 12 students, 1 cohort per year.

Report due March 1, 2026 (NP & PA Residency Program Standards, 1st edition):

- **Standard 4.6** (lacked evidence program assures that learning and clinical experiences are of sufficient quantity, quality, and variety for each trainee to achieve competency in the clinical practice specialty area and to achieve the role-specific competencies and program outcomes)

June 2023

The commission **Accepted** the report addressing 3rd edition

- **Standard C1.01a** (provided evidence of defined ongoing self-assessment process that is designed to document program effectiveness and foster program improvement addressing a) administrative aspects of the program and institutional resources)
- **Standard C2.01** (provided evidence of defined, implemented, and maintained effective processes for the initial and ongoing evaluation of all sites and preceptors used for PA trainees' clinical practice experiences)
- **Standard C2.02** (provided evidence program assures and documents that each clinical site provides the PA trainees access to the physical facilities, patient populations, and clinical supervision necessary to fulfill the program's learning outcomes)

No further information requested.

September 2022

Accreditation-Clinical Postgraduate Program; Next Comprehensive Evaluation: September 2024. The program is approved for up to twelve (12) students per cohort with 1 entering cohorts per year.

Report due April 14, 2023 (*Standards*, 3rd edition) -

- **Standard C1.01a** (lacked evidence of defined ongoing self-assessment process that is designed to document program effectiveness and foster program improvement addressing a) administrative aspects of the program and institutional resources)
- **Standard C2.01** (lacked evidence of defined, implemented, and maintained effective processes for the initial and ongoing evaluation of all sites and preceptors used for PA trainees' clinical practice experiences)
- **Standard C2.02** (lacked evidence program assures and documents that each clinical site provides the PA trainees access to the physical facilities, patient populations, and clinical supervision necessary to fulfill the program's learning outcomes)

No report due

- **Standard A4.09d** (lacked evidence of defined, published, and readily available to prospective and enrolled PA trainees d) policies regarding advanced placement; corrected subsequent to the visit)
- **Standard A4.09n** (lacked evidence of defined, published, and readily available to prospective and enrolled PA trainees n) policies addressing reduction in size or closure of a clinical

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postgraduate PA program, and how PA trainee would be assisted in completing their education in such instances; corrected subsequent to the visit)