West Coast University – Richardson, TX
Accreditation History

First accredited: June 2021
Next review: April 2036
Maximum class size: 50

April 2026 (following Final Provisional review)
Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards* after completion of the provisional review process. The commission noted 3 areas of noncompliance with the *Standards*.
Next Comprehensive Evaluation: April 2036. Maximum class size: 50.
Report due October 30, 2026 (*Standards*, 5th edition) modified self-study report:

- ***Standard C1.02c.ii.*** (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program areas in need of improvement)
- ***Standard C1.02c.iii.*** (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify action plans)
- ***Standard C1.03*** (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)

January 2026
The program's PANCE pass rate percentage was 85% or less for its 2024 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

March 2025
The program's PANCE pass rate percentage was 85% or less for its 2024 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

March 2024 (following Provisional Monitoring review)
Accreditation-Provisional; Program demonstrates continued progress in complying with the *Standards* as it prepares for the graduation of the first class of students. Next Comprehensive Evaluation: March 2026 (Final Provisional). Maximum class size: 50.

June 2023
The commission accepted the findings of the virtual site visit. No further information requested.

March 2023
The commission **Accepted** the report providing evidence of

- expected learning outcomes for each required rotation, document(s) to verify the program has a means to determine that each student has met the program's expected learning outcomes on SCPES by aligning evaluations with what is expected, and description of how the program revised its process to allow it to identify and address any student deficiencies in a timely manner

No further information requested.

September 2022
The commission **Reviewed and more information requested** of the report providing evidence of

- expected learning outcomes for each required rotation, description of how the program aligns student assessments with the outcomes, and evaluation tool(s) to verify the program has a means to determine that each student has met the program's expected learning outcomes on SCPES by aligning evaluations with what is expected

Additional information (expected learning outcomes for each required rotation, document(s) to verify the program has a means to determine that each student has met the program's expected learning outcomes on SCPES by aligning evaluations with what is expected, and description of how the program revised its process to allow it to identify and address any student deficiencies in a timely manner) due September 20, 2022.

Accreditation-Administrative Probation removed. The Annual Accreditation Fee was received in full in September 2022. Administrative-Probation removed post receipt of fee.

<u>July 2022</u>
Accreditation-Administrative Probation. The Annual Accreditation Fee was due July 1, 2022.

<u>March 2022</u>
The commission **Reviewed and more information requested** of the report addressing 5th edition

- ***Standard B2.12a*** (provided evidence the program curriculum includes instruction in basic counseling and patient education skills focused on helping patients adhere to treatment plans) and
- ***Standards B4.01a-b*** (lacked evidence the program will conduct student evaluations in the supervised clinical practice experience components with a) clear parallels between what is expected, taught and assessed and b) that allow the program to address student deficiencies in a timely manner).

Additional information (expected learning outcomes for each required rotation, description of how the program aligns student assessments with the outcomes, and evaluation tool(s) to verify the program has a means to determine that each student has met the program's expected learning outcomes on SCPES by aligning evaluations with what is expected) due May 9, 2022.

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

- Changes in response to COVID-19. No further information requested.

<u>June 2021</u>
Accreditation-Provisional; Next Comprehensive Evaluation: TBD (Provisional Monitoring). The program is approved for a maximum class size of 50.
Report due December 15, 2021 (*Standards*, 5th edition) -

- ***Standard B2.12a*** (lacked evidence the program curriculum includes instruction in basic counseling and patient education skills focused on helping patients adhere to treatment plans) and
- ***Standards B4.01a-b*** (lacked evidence the program will conduct student evaluations in the supervised clinical practice experience components with a) clear parallels between what is expected, taught and assessed and b) that allow the program to address student deficiencies in a timely manner).

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No report due (*Standards*, 5th edition) -

- ***Standard A3.17a*** (lacked evidence at the time of the site visit that student academic records would include documentation that the student has met published admission criteria; corrected subsequent to the visit) and
- ***Standard E1.03*** (lacked evidence the program submits reports or documents as required by the ARC-PA; corrected subsequent to the visit).