

Oklahoma State University Center for Health Sciences
Accreditation History

First accredited: March 2021

Next review: October 2035

Maximum class size: 26

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July 2026

The commission **accepted** the report addressing the observations for 5th edition

- **Standard B1.03e** (provided evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)
- **Standard B4.01a** (provided evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)
- **Standard B4.01b** (provided evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)
- **Standard B4.03a** (provided evidence 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 the program competencies required to enter clinical practice, including clinical and technical skills)

and noted zero (0) areas of noncompliance with the *Standards*.

September 2025 (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 9 areas of noncompliance with the *Standards* and 4 new observations by the commission.

Next Comprehensive Evaluation: October 2035. Maximum class size: 26.

Report due February 3, 2026 (*Standards*, 5th edition):

- **Standard A1.02a** (lacked evidence the sponsoring institution is responsible for supporting the planning by program faculty of curriculum design, course selection, and program assessment)
- **Standard A2.09d** (lacked evidence the program director is knowledgeable about and responsible for continuous programmatic review and analysis)
- **Standard B3.07a**-part 1 (lacked evidence supervised clinical practice experiences occur with preceptors who enable students to meet program defined learning outcomes for family medicine)
- **Standard C2.01b** (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to patient populations)

Report due November 1, 2026 (*Standards*, 5th edition):

- **Standard B3.07a**-part 2 (lacked evidence supervised clinical practice experiences occur with preceptors who enable students to meet program defined learning outcomes for family medicine)

Report due April 1, 2027 (*Standards*, 5th edition) modified self-study report:

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- **Standard C1.02b** (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data)
- **Standard C1.02c.i.** (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program strengths)
- **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)

Commission observation response due February 3, 2026 (*Standards*, 5th edition):

- **Standard B1.03e** (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students in syllabi or appendix to the syllabi, learning outcomes and instructional objectives, in measurable terms that can be assessed, that guide student acquisition of required competencies)
- **Standard B4.01a** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that align with what is expected and taught)
- **Standard B4.01b** (lacked evidence the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components and that allow the program to identify and address any student deficiencies in a timely manner)
- **Standard B4.03a** (lacked evidence 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 the program competencies required to enter clinical practice, including clinical and technical skills)

The program's student attrition rate was 10.9% or greater for its 2024 cohort. The program submitted the Student Attrition Required Report. The commission **reviewed and more information requested** of the report. Additional information (documentation of assessment of effectiveness of student services for the Classes of 2023 and 2024 and feedback from students unable to complete the program for the Classes of 2023 and 2024) due December 4, 2025.

June 2025

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

- Clarification of program's analysis of pre-matriculation cumulative GPAs and the conclusions drawn from it and clarification of how program's remediation analysis led to the conclusion and subsequent action plan to enhance the remediation procedure

No further information requested.

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March 2025

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

- Supervised clinical practice experience (SCPE) learning outcomes and how the rotation specific preceptor evaluation of student forms allow the program to identify and address any student deficiencies in the program's expected learning outcomes in a timely manner.

No further information requested.

The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

September 2024

The program's student attrition rate was 10.9% or greater for its 2023 cohort. The program submitted the Student Attrition Required Report. The commission **reviewed and more information requested** of the report. Additional information (clarification of program's analysis of pre-matriculation cumulative GPAs and the conclusions drawn from it and clarification of how program's remediation analysis led to the conclusion and subsequent action plan to enhance the remediation procedure) due November 4, 2024.

June 2024

The commission **reviewed and more information requested** of the report addressing 5th edition

- **Standard A3.15f** (provided evidence the program defines, publishes, consistently applies and makes readily available to students upon admission policies and procedures for allegations of student mistreatment)
- **Standard B2.11c** (provided evidence the curriculum include instruction in the normal and abnormal development across the life span area of social and behavioral sciences and its application to clinical practice)
- **Standard B2.12c** (provided evidence the curriculum include instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping develop coping mechanisms)
- **Standard B2.15a** (provided evidence the curriculum includes instruction in concepts of public health as they relate to the role of the practicing PA and disease prevention, surveillance, reporting and intervention)
- **Standard B2.15c** (provided evidence the curriculum includes instruction in concepts of public health as they relate to the role of the practicing PA and patient advocacy)
- **Standard B4.01b** (lacked evidence that the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that allow the program to identify and address any student deficiencies in a timely manner)

Additional information (Supervised clinical practice experience (SCPE) learning outcomes and how the rotation specific preceptor evaluation of student forms allow the program to identify and address any student deficiencies in the program's expected learning outcomes in a timely manner) due July 29, 2024.

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March 2024

The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

September 2023 (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: September 2025 (Final Provisional). Maximum class size: 26.

Report due February 1, 2024 (*Standards*, 5th edition):

- **Standard A3.15f** (lacked evidence the program defines, publishes, consistently applies and makes readily available to students upon admission policies and procedures for allegations of student mistreatment)
- **Standard B2.11c** (lacked evidence the curriculum include instruction in the normal and abnormal development across the life span area of social and behavioral sciences and its application to clinical practice)
- **Standard B2.12c** (lacked evidence the curriculum include instruction about basic counseling and patient education skills that is patient centered, culturally sensitive and focused on helping develop coping mechanisms)
- **Standard B2.15a** (lacked evidence the curriculum includes instruction in concepts of public health as they relate to the role of the practicing PA and disease prevention, surveillance, reporting and intervention)
- **Standard B2.15c** (lacked evidence the curriculum includes instruction in concepts of public health as they relate to the role of the practicing PA and patient advocacy)
- **Standard B4.01b** (lacked evidence that the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that allow the program to identify and address any student deficiencies in a timely manner)

No report due (commission expects program to submit all reports and documents as required by the ARC-PA with the initial submission):

- **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)
- **Standard E1.03** (lacked evidence program submits reports or documents as required by the ARC-PA)

March 2023

The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

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September 2021

The commission **accepted the report** addressing 5th edition

- **Standard D1.05** (provided evidence the program has sufficient behavioral health clinical sites for the maximum class size of 26 students). No further information requested.

March 2021

Accreditation-Provisional; Next Comprehensive Evaluation: TBD (Provisional Monitoring). The program is approved for up to 26 students in the first class of students, 26 in the second class and 26 in the third class.

Report due April 23, 2021 (*Standards*, 5th edition) -

- **Standard D1.05** (lacked evidence the program has sufficient behavioral health clinical sites for the maximum class size of 26 students).

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

- **Standard A3.12f** (lacked evidence at the time of the site visit the program defines and makes readily available to prospective students estimates of all costs [tuition, fees, etc.]; corrected subsequent to the visit).