Clarkson University
Accreditation History

First accredited: September 2011
Next review: January 2035
Maximum class size: 30

October 2026

Program Change: Increase in maximum entering class size. The commission **accepted** the report providing evidence of

- Sufficient classroom space, sufficient principal faculty to meet the needs of the enrolling and matriculating students, and sufficient SCPEs to meet the maximum proposed cohort size.

and **approved** the proposed increase in maximum entering class size to 45 students effective January 2027.

April 2026

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

- ***Standard A1.02b*** (provided evidence the sponsoring institution is responsible for hiring faculty and staff)
- ***Standard A1.07*** (provided evidence the sponsoring institution provides the program with the human resources, including sufficient faculty, administrative and technical staff, necessary to operate the educational program, comply with the Standards, and fulfill obligations to matriculating and enrolled students)

No further information required.

Program Change: Increase in maximum entering class size. The commission **reviewed and requested more information of the program's proposed change.** Additional information (Evidence of sufficient classroom space, sufficient principal faculty to meet the needs of the enrolling and matriculating students, and sufficient SCPEs to meet the maximum proposed cohort size) due April 30, 2026.

September 2025

The commission reviewed the report addressing the observations for 5th edition

- ***Standard A1.02b*** (lacked evidence the sponsoring institution is responsible for hiring faculty and staff)
- ***Standard A1.07*** (lacked evidence the sponsoring institution provides the program with the human resources, including sufficient faculty, administrative and technical staff, necessary to operate the educational program, comply with the Standards, and fulfill obligations to matriculating and enrolled students)

and noted 2 areas of noncompliance with the *Standards*. Report due November 21, 2025.

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

- ***Standard A2.03*** (provided evidence principal faculty is sufficient in number to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program)

March 2025

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with most ARC-PA *Standards*. The commission noted 7 areas of noncompliance with the *Standards*

and 2 new observations by the commission. The program was issued a Warning Letter regarding the program's use of another PA program's information within its self-study report.
Next Comprehensive Evaluation: March 2035. Maximum class size: 30.
Report due May 15, 2025 (*Standards*, 5th edition):

- ***Standard A2.03*** (lacked evidence principal faculty is sufficient in number to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program)

Report due September 1, 2026 (*Standards*, 5th edition) modified self-study report:

- ***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)

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

- ***Standard E1.05*** (lacked evidence program demonstrates active recruitment to permanently fill vacated or interim positions and provides quarterly updates to the ARC-PA on progress filling vacated or interim positions)

Observation response due May 15, 2025 (*Standards*, 5th edition):

- ***Standard A1.02b*** (lacked evidence the sponsoring institution is responsible for hiring faculty and staff)
- ***Standard A1.07*** (lacked evidence the sponsoring institution provides the program with the human resources, including sufficient faculty, administrative and technical staff, necessary to operate the educational program, comply with the Standards, and fulfill obligations to matriculating and enrolled students)

<u>August 2023</u>
Accreditation-Administrative Probation removed. The Annual Accreditation Fee was received in full in August 2023. Administrative-Probation removed post receipt of fee.

<u>July 2023</u>
Accreditation-Administrative Probation. The Annual Accreditation Fee was due July 1, 2023.

<u>June 2021</u>
The commission **acknowledged the report** providing evidence of

- Update regarding changes in response to COVID-19. No further information requested.

March 2021
The commission **acknowledged the report** providing evidence of
- Changes in response to COVID-19. No further information requested.

September 2020
The commission **acknowledged the report** providing evidence of
- Update regarding changes in response to COVID-19. No further information requested.

June 2020
The commission **acknowledged the report** providing evidence of
- The proposed plan in response to COVID-19. No further information requested.

May 2016
The program was notified of a change in the accreditation process (time extended between regularly scheduled validation reviews from seven to ten years). Program's next validation review changed from March 2022 to March 2025 due to this change.

September 2015
The commission **accepted the report** addressing 4th edition
- ***Standard A2.18*** (provided evidence there is at least a 1.0 FTE position, dedicated exclusively to the program, to provide administrative support for the program),
- ***Standard A3.21*** (provided evidence that student health records are confidential) and
- ***Standard C2.01c*** (provided evidence of a self-study report that documents faculty evaluation of the curricular and administrative aspects of the program).

The commission **accepted the report**
- Corrected SCPEs in the Portal. No further information requested.

Program Change: Change in graduation requirements (move to a trimester calendar), effective January 2016. The commission **acknowledged the proposed change**. No further information requested.

March 2015
Accreditation-Continued; Next Comprehensive Evaluation: March 2022. Maximum entering class size: 30, effective January 4, 2016.
Report due April 15, 2015 (*Standards*, 4th edition) -
- ***Standard A2.18*** (lacked evidence there is at least a 1.0 FTE position, dedicated exclusively to the program, to provide administrative support for the program),
- ***Standard A3.21*** (lacked evidence that student health records are confidential) and
- ***Standard C2.01c*** (lacked evidence of a self-study report that documents faculty evaluation of the curricular and administrative aspects of the program).

- Correct supervised clinical practice experiences (SCPEs) in Program Management Portal.

March 2012
The commission **accepted the report** providing evidence of

- The faculty list. No further information requested.

The commission **accepted the report** addressing 4th edition

- ***Standard A2.14*** (provided evidence there are sufficient instructional faculty to provide students with the necessary attention, instruction and supervised clinical practice experiences to acquire the knowledge and competence required for entry into the profession),
- ***Standard A3.15a*** (provided evidence the program defines, publishes and makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),
- ***Standard B1.09*** (provided evidence for each didactic and clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies),
- ***Standards B3.03b and d*** (provided evidence supervised clinical practice experience provide sufficient patient exposure with patients seeking b) women's health and d) behavioral and mental health conditions to allow each student to meet program expectations) and
- ***Standard D1.03*** (provided evidence the program informs, in writing, everyone who requests information, applies, or plans to enroll that the program is not yet accredited and conveys the implications of non-accreditation to applicants).

Additional information (list of principal and instructional [didactic only] faculty) requested.

September 2011
Accreditation-Provisional; Next Comprehensive Evaluation: March 2015. Maximum Student Capacity: 60.
Report due December 31, 2011 (*Standards*, 4th edition) -

- ***Standard A2.14*** (lacked evidence there are sufficient instructional faculty to provide students with the necessary attention, instruction and supervised clinical practice experiences to acquire the knowledge and competence required for entry into the profession),
- ***Standard A3.15a*** (lacked evidence the program defines, publishes and makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),
- ***Standard B1.09*** (lacked evidence for each didactic and clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies),
- ***Standards B3.03b and d*** (lacked evidence supervised clinical practice experience provide sufficient patient exposure with patients seeking b) women's health and d)

behavioral and mental health conditions to allow each student to meet program expectations) and

- ***Standard D1.03*** (lacked evidence the program informs, in writing, everyone who requests information, applies, or plans to enroll that the program is not yet accredited and conveys the implications of non-accreditation to applicants).