Delaware Valley University
Accreditation History

First accredited: June 2022
Next review: October 2036
Maximum class size: 20

October 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 four (4) areas of noncompliance with the *Standards*.
Next Comprehensive Evaluation: October 2036. Maximum class size: 20.
Report due November 30, 2026:

- Update Personnel tab and Program Details tab in Program Management Portal.

Report due March 1, 2027 (*Standards*, 5th edition-program will respond in 6th):

- ***Standard A1.01*** (lacked evidence that when more than one institution is involved in the provision of academic and/or clinical education, responsibilities of the respective institutions for instruction and supervision of students are clearly described and documented in a manner signifying agreement by the involved institutions)
- ***Standard B4.03c*** (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 interpersonal skills)
- **Standard B4.03d** (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 medical knowledge)

No report due (program showed evidence of compliance in previously submitted documentation):

- ***Standard B3.06a*** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)

September 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.

June 2025
The commission **accepted** the report addressing 5th edition

- ***Standard A3.12b*** (provided evidence the program defines, publishes and makes readily available to enrolled and prospective students, general program information to include evidence of its effectiveness in meeting its goals)
- ***Standard A3.12i*** (provided evidence the program defines, publishes and makes readily available to enrolled and prospective students, general program information to include the most current annual student attrition information, on the table provided to the ARC-PA, no later than April first each year)
- ***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 that allow the program to identify and address any student deficiencies in a timely manner)

No further information requested.

September 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: September 2026 (Final Provisional). Maximum class size: 20.
The commission noted four areas of noncompliance with the *Standards*.
Report due November 22, 2024 (*Standards*, 5th edition):

- ***Standard A3.12b*** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students, general program information to include evidence of its effectiveness in meeting its goals)
- ***Standard A3.12i*** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students, general program information to include the most current annual student attrition information, on the table provided to the ARC-PA, no later than April first each year)
- ***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 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 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)

March 2023
The commission **accepted** the report addressing 5th edition

- ***Standard B4.01a*** (provided evidence that it planned to conduct frequent, objective and documented student assessment in the supervised clinical practice experience (SCPE) components to a) align with what is expected and taught) and
- ***Standard B4.01b*** (provided evidence of student assessment in the supervised clinical practice experience (SCPE) components b) allow the program to identify and address any student deficiencies in a timely manner).

No further information requested.

June 2022
Accreditation-Provisional; Program has not yet enrolled students but plans and resource allocation, if fully implemented as planned, demonstrate the probability to meet the ARC-PA *Standards.* Next Comprehensive Evaluation: September 2024 (Provisional Monitoring). The program is approved for up to 20 students.
Report due August 8, 2022 (*Standards*, 5th edition) -

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- ***Standard B4.01a*** (lacked evidence that it planned to conduct frequent, objective and documented student assessment in the supervised clinical practice experience (SCPE) components to a) align with what is expected and taught) and
- ***Standard B4.01b*** (lacked evidence of student assessment in the supervised clinical practice experience (SCPE) components b) allow the program to identify and address any student deficiencies in a timely manner).

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

- ***Standard D1.02b*** (lacked evidence that information in writing was published and made readily available to everyone who requests, applies or plans to enroll b) that the program is not yet accredited; corrected subsequent to the visit) and
- ***Standard D1.02c*** (lacked evidence that information in writing was published and made readily available to everyone who requests, applies or plans to enroll c) the implications of non-accreditation by the ARC-PA; corrected subsequent to the visit).