Elizabethtown College
Accreditation History

First accredited: March 2022
Next review: October 2036
Maximum class size: 30

<u>October 2026 (following Final Provisional review)</u>
Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards* after completion of the provisional review process. The commission noted twelve (12) areas of noncompliance with the *Standards* and one (1) new observations by the commission.
Next Comprehensive Evaluation: October 2036. Maximum class size: 30.
Report due November 1, 2026:

- Update SCPE data in Program Management Portal.

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

- ***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 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 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)

Report due April 5, 2028 (*Standards*, 5th edition-program will respond in 6th) 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 (program meets 6th edition *Standards*):

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

Commission observation response due February 1, 2027 (*Standards*, 6th edition):

- ***Standard A2.01a*** (lacked evidence all *program faculty*, including didactic and clinical *instructional faculty* meet program-defined academic and experiential qualifications to teach in their assigned instructional areas)

<u>September 2025</u>
The commission **accepted the report** providing evidence of

- Updated Student Attrition Required Report for the 2023 cohort.

No further information requested.

<u>June 2025</u>
The commission **accepted** the report addressing 5th edition

- ***Standard A1.01*** (provided 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. Signed affiliation agreement(s) must define the responsibilities of each party related to the educational program for students, must specify whose policies govern, and must document student access to educational resources and clinical experiences. While one agreement between the sponsoring institution and each clinical entity to cover multiple professional disciplines is acceptable, these agreements are expected to include specific notations acknowledging the terms of participation between the PA program and each clinical entity. Agreements are expected to be signed by an authorized individual(s) of each participating entity.)
- ***Standard A1.02k*** (provided evidence the sponsoring institution is responsible for defining, publishing, making readily available and consistently applying to students, its policies and procedures for refunds of tuition and fees)
- ***Standard A1.11a*** (provided evidence the sponsoring institution, in a manner consistent with its own mission and applicable laws, demonstrates a commitment to student, faculty and staff diversity, equity, and inclusion by supporting the program in having a documented action plan for diversity, equity and inclusion)

No further information requested.

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

- Update Budget tab in Program Management Portal
- Update success of program in achieving goals on website.

No further information requested.

<u>March 2025</u>
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 additional information requested of the report**.
Additional information (revised and resubmitted attrition report) due April 23, 2025.

Elizabethtown College
Accreditation History

First accredited: March 2022
Next review: October 2036
Maximum class size: 30

<u>September 2024 (following Provisional Monitoring review)</u>
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: 30.
The commission noted six areas of noncompliance with the *Standards*.
Report due November 1, 2026:

- Update Budget tab in Program Management Portal
- Update success of program in achieving goals on website.

Report due December 15, 2024 (*Standards*, 5th edition):

- ***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. Signed affiliation agreement(s) must define the responsibilities of each party related to the educational program for students, must specify whose policies govern, and must document student access to educational resources and clinical experiences. While one agreement between the sponsoring institution and each clinical entity to cover multiple professional disciplines is acceptable, these agreements are expected to include specific notations acknowledging the terms of participation between the PA program and each clinical entity. Agreements are expected to be signed by an authorized individual(s) of each participating entity.)
- ***Standard A1.02k*** (lacked evidence the sponsoring institution is responsible for defining, publishing, making readily available and consistently applying to students, its policies and procedures for refunds of tuition and fees)
- ***Standard A1.11a*** (lacked evidence the sponsoring institution, in a manner consistent with its own mission and applicable laws, demonstrates a commitment to student, faculty and staff diversity, equity, and inclusion by supporting the program in having a documented action plan for diversity, equity and inclusion)

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

- ***Standard C1.02b*** (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data)
- ***Standard C1.02cii*** (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 C1.03*** (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 and follows the guidelines provided by the ARC-PA)

<u>March 2024</u>
The commission **accepted the report** providing evidence of

- Updated preceptor list, updated preceptor files, program's completed initial evaluations demonstrating preceptors will enable to meet program learning outcomes in women's health, to

include prenatal and gynecologic care, and documentation of how many students per cohort the preceptor has agreed to

No further information requested.

June 2023

The commission **reviewed and additional information requested** of the report providing evidence of

- documentation demonstrating the program has sufficient preceptors who will enable students to meet program defined learning outcomes in women's health, to include gynecologic and prenatal care

Additional information (updated preceptor list, updated preceptor files, program's completed initial evaluations demonstrating preceptors will enable to meet program learning outcomes in women's health, to include prenatal and gynecologic care, and documentation of how many students per cohort the preceptor has agreed to) due October 1, 2023.

March 2023

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

- ***Standard B3.03b*** (provided evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes across the life span, to include infants, children, adolescents, adults, and the elderly)
- ***Standard B3.06a*** (provided evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)
- ***Standard B4.01a, b*** (provided evidence student assessment in the supervised clinical practice experience components a) aligns with what is expected and taught and b) allows the program to identify and address any student deficiencies timely)

Additional information (documentation demonstrating the program has sufficient preceptors who will enable students to meet program defined learning outcomes in women's health, to include gynecologic and prenatal care) due March 31, 2023.

September 2022

The commission **did not accept** the report addressing 5th edition

- ***Standard B3.03b*** (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes b) across the life span, to include infants, children, adolescents, adults, and the elderly)
- ***Standard B3.06a*** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)
- ***Standard B4.01a, b*** (lacked evidence student assessment in the supervised clinical practice experience components a) aligns with what is expected and taught and b) allows the program to identify and address any student deficiencies timely)

Additional information (all requested information in response to each citation) due September 30, 2022.

March 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

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First accredited: March 2022
Next review: October 2036
Maximum class size: 30

Comprehensive Evaluation: September 2024 (Provisional Monitoring). The program is approved for up to 30 students.
Report due June 30, 2022 (*Standards*, 5th edition) -

- ***Standard B3.03b*** (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes b) across the life span, to include infants, children, adolescents, adults, and the elderly)
- ***Standard B3.06a*** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)
- ***Standard B4.01a, b*** (lacked evidence student assessment in the supervised clinical practice experience components a) aligns with what is expected and taught and b) allows the program to identify and address any student deficiencies timely)

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

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