Howard University
Accreditation History

First accredited: March 2023
Next review: April 2028
Maximum class size: 20

October 2026
The commission **accepted** the report addressing the observation for 5th edition

- ***Standard C1.02a*** (provided evidence the program implements its ongoing self-assessment process by conducting data collection)

and noted 0 areas of noncompliance with the *Standards*.

April 2026 (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. The commission noted 8 areas of noncompliance with the *Standards* and 1 new observation by the commission.
Next Comprehensive Evaluation: April 2028 (Final Provisional). Maximum class size: 20.
Report due December 7, 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 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)

No report due (program will submit a self-study report with final provisional application):

- ***Standard C1.02b*** (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data)
- ***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 July 13, 2026 (*Standards*, 5th edition):

- ***Standard C1.02a*** (lacked evidence the program implements its ongoing self-assessment process by conducting data collection)

March 2024

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

- ***Standard A3.13a*** (provided evidence program defines, publishes, consistently applies and makes readily available to prospective students, policies and procedures to include admission and enrollment practices that favor specified individuals or groups)
- ***Standard B1.03e*** (provided evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes learning outcomes and instructional objectives, in measurable terms that can be assessed, and that guide student acquisition of required competencies)
- ***Standard B2.02a*** (provided evidence curriculum includes instruction in anatomy)
- ***Standard B3.03c*** (provided evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes for women's health (to include prenatal and gynecologic care)
- ***Standard C2.01c*** (provided evidence 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 that students are able to fulfill program learning outcomes with access to supervision)

No further information requested.

<u>March 2023</u>
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: March 2026 (Provisional Monitoring). The program is approved for a maximum class size of 20.
Report due October 1, 2023 (*Standards*, 5th edition):

- ***Standard A3.13a*** (lacked evidence program defines, publishes, consistently applies and makes readily available to prospective students, policies and procedures to include admission and enrollment practices that favor specified individuals or groups)
- ***Standard B1.03e*** (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes learning outcomes and instructional objectives, in measurable terms that can be assessed, and that guide student acquisition of required competencies)
- ***Standard B2.02a*** (lacked evidence curriculum includes instruction in anatomy)
- ***Standard B3.03c*** (lacked evidence supervised clinical practice experiences enable all students to meet the program's learning outcomes for women's health (to include prenatal and gynecologic care)
- ***Standard C2.01c*** (lacked evidence 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 that students are able to fulfill program learning outcomes with access to supervision)

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

- ***Standard B1.01b*** (lacked evidence curriculum is consistent with program competencies; clarified subsequent to the visit)

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- ***Standard B2.08c*** (lacked evidence curriculum includes instruction in: pre-, intra-, and post-operative care; clarified subsequent to the visit)
- ***Standard B4.01a*** (lacked evidence evaluation of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components aligns with what is expected and taught; clarified subsequent to the visit)
- ***Standard C2.01a*** (lacked evidence program defines and maintains effective processes and document 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 physical facilities; clarified subsequent to the visit)
- ***Standard D1.04e*** (lacked evidence program has a course syllabus for each course and rotation that includes learning outcomes and instructional objectives; clarified subsequent to the visit)
- ***Standard D1.04g*** (lacked evidence program has a course syllabus for each course and rotation that includes the methods of student assessment/evaluation; clarified subsequent to the visit)
- ***Standard E1.03*** (lacked evidence the program submits reports or documents as required by the ARC-PA; corrected subsequent to the visit)