Mercy University
Accreditation History

First accredited: March 1999
Next review: October 2027
Maximum class size: 65

October 2026
The number of students in the Program Management Portal exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **reviewed and requested more information of the report**. Additional information (How the institution and program will ensure sufficient financial, physical, human, and SCPE resources to accommodate the additional students in the current first-year class; whether the affected cohorts will overlap during the clinical phase; and how the program will prevent recurrence of enrollment exceeding the ARC-PA approved maximum entering class size) due October 15, 2026

September 2025
The commission **accepted the report** providing evidence of

- Revised Student Attrition Required 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 (revised Student Attrition Required Report) due December 1, 2024.

March 2024
The program's PANCE pass rate percentage was 85% or less for its 2022 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

September 2022
The program's PANCE pass rate percentage was 85% or less for its 2021 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

September 2021
The program's PANCE pass rate percentage was 85% or less for its 2020 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

September 2020
The commission **acknowledged the report** providing evidence of

- Updated 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.

March 2020
The commission **accepted the report** addressing 4th edition

- ***Standard B3.03a*** (provided evidence of defined learning outcomes expected of students for supervised clinical practice experiences with patients seeking medical care across the life span) and
- ***Standard C3.01*** (provided evidence that the planned student evaluations in the supervised clinical education components parallel the program's required learning outcomes). No further information requested.

June 2019
Accreditation Continued; Next Comprehensive Evaluation: June 2027. Maximum Class Size: 65. Report due December 11, 2019 (*Standards*, 4th edition) -

- ***Standard B3.03a*** (lacked evidence of defined learning outcomes expected of students for supervised clinical practice experiences with patients seeking medical care across the life span) and
- ***Standard C3.01*** (lacked evidence that the planned student evaluations in the supervised clinical education components parallel the program's required learning outcomes).

June 2018
The commission **accepted the report** providing evidence of

- Syllabus describing expectations/objectives and how determined that student has met expectations. No further information requested.

March 2018
The commission **accepted the report** addressing 4th edition

- ***Standard A2.16*** (provided evidence all instructional faculty serving as supervised clinical practice experience preceptors hold a valid license),
- ***Standards A3.19c and f*** (provided evidence that student files include documentation c) of student performance while enrolled and f) that the student has met requirements for program completion),
- ***Standard B1.08*** (provided evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams),
- ***Standard B3.02*** (provided evidence supervised clinical practice experiences [SCPEs] with preventive, emergent, acute and chronic patient encounters enable students to meet program expectations and acquire the competencies needed for clinical PA practice),
- ***Standards B3.03a-d*** (provided evidence that SCPEs enable each student to meet program expectations and acquire competencies needed for entry into clinical practice with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions),
- ***Standards B3.07a*** (provided evidence of SCPEs with preceptors practicing in family medicine) and

- ***Standard C3.01*** (provided evidence of student evaluations for both didactic and supervised clinical education components paralleling what was expected, taught and assessed).

Additional information (syllabus describing expectations/objectives and how determined that student has met expectations) due March 26, 2018**.**

The commission accepted the report addressing 4th edition

- ***Standards A3.14a-b*** (provided evidence the program defines, publishes and makes readily available to enrolled and prospective students a) the program's ARC-PA accreditation status and b) the program's success in achieving its goals). No further information requested.

<u>September 2017</u>

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

- The website update. No further information requested.

<u>July 2017</u>

Adverse Action-Accreditation-Probation. A focused probation site visit will in advance of the June 2019 commission meeting. Maximum student capacity: 65. The program did not appeal the commission's decision.

Reports due September 1, 2017 (*Standards*, 4th edition) -

- ***Standards A3.14a-b*** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students a) the program's ARC-PA accreditation status and b) the program's success in achieving its goals) and
- Update PANCE Pass Rate Summary Report on program website.

Due December 1, 2017 (*Standards*, 4th edition) -

- ***Standard A2.16*** (lacked evidence all instructional faculty serving as supervised clinical practice experience preceptors hold a valid license),
- ***Standards A3.19c and f*** (lacked evidence that student files include documentation c) of student performance while enrolled and f) that the student has met requirements for program completion),
- ***Standard B1.08*** (lacked evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams),
- ***Standard B3.02*** (lacked evidence supervised clinical practice experiences [SCPEs] with preventive, emergent, acute and chronic patient encounters enable students to meet program expectations and acquire the competencies needed for clinical PA practice),
- ***Standards B3.03a-d*** (lacked evidence that SCPEs enable each student to meet program expectations and acquire competencies needed for entry into clinical practice with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions),
- ***Standards B3.07a*** (lacked evidence of SCPEs with preceptors practicing in family medicine) and

- ***Standard C3.01*** (lacked evidence of student evaluations for both didactic and supervised clinical education components paralleling what was expected, taught and assessed).

Due January 18, 2019 (*Standards*, 4th edition) -

- ***Standards C2.01b-e***, modified Self-Study Report (lacked evidence of a self-study report that documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).

March 2013

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

- Clarification on SCPEs in women's health. No further information requested.

September 2012

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

- Budget and lab space and update on faculty and clinical sites.

Additional information (clarification on supervised clinical practice experiences [SCPEs] in women's health) by December 31, 2012.

September 2011

Program Change**:** Change in maximum student capacity (135 to 195), effective June 2014. The commission **acknowledged the proposed change**. Report due July 1, 2012 (information on budget and lab space and update on faculty and clinical sites).

The commission **accepted the report** addressing 3rd/4th edition

NOTE: The review was conducted as the ARC-PA was transitioning from the 3rd to 4th edition of the *Standards*. The citations listing reflects the 3rd edition of the *Standards* and the corresponding standard in the 4th edition.

- ***Standards B7.03a-c/B3.03a-c*** (provided evidence the program documents every student has supervised clinical practice experiences with patients seeking a) medical care across the life span, b) prenatal care and women's health care and c) surgical management),
- ***Standards C1.01e/C1.01*** (provided evidence the program collects and analyzes graduate evaluations of curriculum and program effectiveness) and
- ***Standards C2.01b1, b2, b5/C2.01b*** (provided evidence the self-study report documents b1) student attrition, deceleration and remediation, b2) faculty attrition and b5) graduate evaluations of curriculum and program effectiveness). No further information requested.

September 2010

Accreditation Continued; Next Comprehensive Evaluation: September 2014. Maximum Student Capacity: 135.

Report due July 1, 2011 (*Standards*, 3rd/4th edition) -

NOTE: The review was conducted as the ARC-PA was transitioning from the 3rd to 4th edition of the *Standards*. The citations listing reflects the 3rd edition of the *Standards* and the corresponding standard in the 4th edition.

- ***Standards B7.03a-c/B3.03a-c*** (lacked evidence the program documents every student has supervised clinical practice experiences with patients seeking a) medical care across the life span, b) prenatal care and women's health care and c) surgical management),
- ***Standards C1.01e/C1.01*** (lacked evidence the program collects and analyzes graduate evaluations of curriculum and program effectiveness) and
- ***Standards C2.01b1, b2, b5/C2.01b*** (lacked evidence the self-study report documents b1) student attrition, deceleration and remediation, b2) faculty attrition and b5) graduate evaluations of curriculum and program effectiveness).

Program Change: Change in maximum student capacity (90 to 135). The commission **acknowledged the proposed change**. No further information requested.

March 2005
The commission **acknowledged the report** addressing 2nd edition

- ***Standard A2.5*** (provided evidence core program faculty includes two faculty positions for individuals currently certified as PAs). No further information requested.

September 2004
Accreditation-Continued; Next Comprehensive Evaluation: September 2009. Maximum Student Capacity: 90.
Report due January 14, 2005 (*Standards*, 2nd edition) -

- ***Standard A2.5*** (lacked evidence core program faculty includes two faculty positions for individuals currently certified as PAs).

September 2003
The commission **accepted the report** providing evidence of

- Clinical experiences. No further information requested.

Personnel Change: New medical director appointed. No further information requested.

Informational Item: New York State Education Department approved degree change from Master of Professional Studies to Master of Science, effective with the graduating class of August 2003.

March 2003
The commission **accepted the report** providing evidence of

- Forms or documentation used by the program to assure that students have clinical experience in psychiatry/behavioral medicine and geriatrics; an explanation of how it

plans to respond to accreditation citations in its next self-study report; copies of pertinent pages of the student handbook; and a copy of the new health form.

Additional information (clinical experience in psychiatry and geriatrics) due July 15, 2003.

September 2002

The commission **accepted the report** addressing 2nd edition

- ***Standard A2.5*** (provided evidence core program faculty includes two faculty positions for individuals currently certified as PAs),
- ***Standard B6.2*** (provided evidence the program has documented that every student has adequate clinical experiences in prenatal care and gynecology, and psychiatry/behavioral medicine),
- ***Standard C4.1f*** (provided evidence the self-study report includes the program's response to the last accreditation citations),
- ***Standard C5.1*** (provided evidence the written criteria for successful progression to and completion of each segment of the curriculum includes all requirements),
- ***Standard D1.5*** (provided evidence student health records are confidential) and
- ***Standard D3.1*** (provided evidence PA students are clearly identified as such to distinguish them from physicians, medical students, and other health profession students and graduates).

Additional information (forms or documentation used by the program to assure that students have clinical experience in psychiatry/behavioral medicine and geriatrics; an explanation of how it plans to respond to accreditation citations in its next self-study report; copies of pertinent pages of the student handbook; and a copy of the new health form) due January 15, 2003.

September/December 2001

Accreditation-Continued; Next Comprehensive Evaluation: September 2004. Maximum Student Capacity: 75.

Report due August 1, 2002 (*Standards*, 2nd edition) -

- ***Standard A2.5*** (lacked evidence core program faculty includes two faculty positions for individuals currently certified as PAs),
- ***Standard B6.2*** (lacked evidence the program has documented that every student has adequate clinical experiences in prenatal care and gynecology, and psychiatry/behavioral medicine),
- ***Standard C4.1f*** (lacked evidence the self-study report includes the program's response to the last accreditation citations),
- ***Standard C5.1*** (lacked evidence the written criteria for successful progression to and completion of each segment of the curriculum includes all requirements),
- ***Standard D1.5*** (lacked evidence student health records are confidential) and
- ***Standard D3.1*** (lacked evidence PA students are clearly identified as such to distinguish them from physicians, medical students, and other health profession students and graduates).

Mercy University
Accreditation History

March 2000

The commission **accepted the report** addressing 1st edition

- ***Standard* I E** (provided evidence of a plan in place for a self-study process),
- ***Standard* II B 2 b** (provided evidence every course has learning objectives to guide student learning) and
- ***Standard II B 2 c*** (provided evidence of written examinations for every course). No further information requested.

March 1999

Accreditation-Provisional; Next Comprehensive Evaluation: September 2001. Maximum Student Capacity: 75.

Report due for review at March 2000 meeting (*Standards*, 1st edition) -

- ***Standard* I E** (lacked evidence of a plan in place for a self-study process),
- ***Standard* II B 2 b** (lacked evidence every course has learning objectives to guide student learning) and
- ***Standard II B 2 c*** (lacked evidence of written examinations for every course).