Northeast College of Health Sciences
Accreditation History

First accredited: April 2026
Next review: January 2029
Maximum class size: 40

October 2026

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

- ***Standard B4.01b*** (lacked evidence the program conducts *frequent*, objective, and documented evaluations of student performance to ensure students meet the program's *learning outcomes* 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)

Additional information (Revised preceptor evaluation instruments for all required and elective SCPEs) due October 29, 2026.

No additional information required for 5th edition:

- ***Standard A1.01c*** (provided evidence that when more than one institution is involved in the provision of academic and/or clinical education, terms are clearly described and documented in a manner signifying agreement by the involved institutions and signed affiliation agreement(s) include the terms of participation for the PA program students)
- ***Standard A3.14e*** (provided evidence the program *publishes*, consistently applies, and makes *readily available* to enrolled and *prospective students* policies and procedures for withdrawal)
- ***Standard A3.14f*** (provided evidence the program *publishes*, consistently applies, and makes *readily available* to enrolled and *prospective students* policies and procedures for dismissal)
- ***Standard A3.14h*** (provided evidence the program *publishes*, consistently applies, and makes *readily available* to enrolled and *prospective students* policies and procedures for student appeals)
- ***Standard B1.03g*** (provided evidence that for each didactic and clinical course (including required and *elective rotation*s), the program defines and *publishes* for students the outline of topics to be covered that align with learning outcomes and instructional objectives in syllabi or an appendix to the syllabi)
- ***Standard B4.01a*** (provided evidence the program conducts *frequent*, objective, and documented evaluations of student performance to ensure students meet the program's *learning outcomes* for both didactic and *supervised clinical practice experience* components and that align with what is expected and taught)
- ***Standard D1.01b*** (provided evidence that based on the qualifications outlined in the Standards, the program has a *medical director* hired by the institution and working on a permanent basis at least 15 months prior to the first day of the scheduled site visit)

April 2026

Accreditation-Provisional; Program has not yet enrolled students but plans and resource allocation, if fully implemented as planned, demonstrated the probability to meet the ARC-PA *Standards.* The commission noted 8 areas of noncompliance with the *Standards* and 3 new commission observations.
Next Comprehensive Evaluation: TBD (Provisional Monitoring). Maximum class size: 40.
Report due July 31, 2026 (*Standards*, 6th edition):

- ***Standard A1.01c*** (lacked evidence that when more than one institution is involved in the provision of academic and/or clinical education, terms are clearly described and documented in a manner signifying agreement by the involved institutions and signed affiliation agreement(s) include the terms of participation for the PA program students)

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- ***Standard B4.01a*** (lacked evidence the program conducts *frequent*, objective, and documented evaluations of student performance to ensure students meet the program's *learning outcomes* 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 to ensure students meet the program's *learning outcomes* 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)
- ***Standard D1.01b*** (lacked evidence that based on the qualifications outlined in the Standards, the program has a *medical director* hired by the institution and working on a permanent basis at least 15 months prior to the first day of the scheduled site visit)

Commission observation response due July 31, 2026 (*Standards*, 6th edition):

- ***Standard A1.01d*** (lacked evidence that when more than one institution is involved in the provision of academic and/or clinical education, terms are clearly described and documented in a manner signifying agreement by the involved institutions and signed affiliation agreement(s) are signed by an authorized individual(s) of each participating entity)
- ***Standard B1.03e*** (lacked evidence that for each didactic and clinical course (including required and *elective rotation*s), the program defines and *publishes* for students the course *learning outcomes* in measurable terms that are assessed and guide student acquisition of required *competencies* in syllabi or an appendix to the syllabi)
- ***Standard B1.03f*** (lacked evidence that for each didactic and clinical course (including required and *elective rotation*s), the program defines and *publishes* for students the *instructional objectives* in measurable terms that guide student learning in syllabi or an appendix to the syllabi)