Notre Dame of Maryland University
Accreditation History

First accredited: June 2023
Next review: January 2028
Maximum class size: 35

October 2026
The program's PANCE pass rate percentage was 85% or less for its 2025 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

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

- ***Standard A1.07*** (provided evidence the sponsoring institution provides the program with the human resources, including sufficient faculty, administrative and technical staff, necessary to operate the educational program, comply with the Standards, and fulfill obligations to matriculating and enrolled students)
- ***Standard A2.03*** (provided evidence principal faculty is sufficient in number to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program)
- ***Standard A2.09d*** (provided evidence the program director is knowledgeable about and responsible for continuous programmatic review and analysis)
- ***Standard A2.12*** (provided evidence the medical director is an active participant in the program and support the development of the program competencies to meet current practice standards as they relate to the PA role.
- ***Standard A2.18b*** (provided evidence administrative support for the program is sufficient in number to manage the administrative responsibilities consistent with the organizational complexity and total enrollment of the program)

No further information requested.

January 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 10 areas of noncompliance with the *Standards*. The program received a Warning Letter regarding institutional support for providing the program with sufficient human resources and the implementation and documentation of the program's ongoing self-assessment process.
Next Comprehensive Evaluation: January 2028 (Final Provisional). Maximum class size: 35.
Report due June 9, 2026 (*Standards*, 5th edition):

- ***Standard A1.07*** (lacked evidence the sponsoring institution provides the program with the human resources, including sufficient faculty, administrative and technical staff, necessary to operate the educational program, comply with the Standards, and fulfill obligations to matriculating and enrolled students)
- ***Standard A2.03*** (lacked evidence principal faculty is sufficient in number to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program)
- ***Standard A2.09d*** (lacked evidence the program director is knowledgeable about and responsible for continuous programmatic review and analysis)
- ***Standard A2.12*** (lacked evidence the medical director is an active participant in the program and support the development of the program competencies to meet current practice standards as they relate to the PA role.

- ***Standard A2.18b*** (lacked evidence administrative support for the program is sufficient in number to manage the administrative responsibilities consistent with the organizational complexity and total enrollment of the program)

No report due (the program will submit a self-study report with its final provisional application to address the following) :

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

<u>March 2024</u>

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

- ***Standard A1.09*** (provided evidence the sponsoring institution provides the program with access to instructional and reference materials needed to operate the educational program and support evidence-based practice)
- ***Standard A3.17b*** (provided evidence student academic records kept by the sponsoring institution or program, in a paper or electronic format, are readily accessible to authorized program personnel and includes documentation that the student has met institution and program health screening and immunization requirements)
- ***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 B4.01a*** (provided evidence 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 to align with what is expected and taught)
- ***Standard B4.01b*** (provided evidence 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 to allow the program to identify and address any student deficiencies in a timely manner)

No further information requested.

<u>June 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

Notre Dame of Maryland University
Accreditation History

First accredited: June 2023
Next review: January 2028
Maximum class size: 35

Comprehensive Evaluation: March 2026 (Provisional Monitoring). The program is approved for a maximum class size of 35.
Report due October 1, 2023 (*Standards*, 5th edition):

- ***Standard A1.09*** (lacked evidence the sponsoring institution provides the program with access to instructional and reference materials needed to operate the educational program and support evidence-based practice)
- ***Standard A3.17b*** (lacked evidence student academic records kept by the sponsoring institution or program, in a paper or electronic format, are readily accessible to authorized program personnel and includes documentation that the student has met institution and program health screening and immunization requirements)
- ***Standard B3.03b*** (lacked 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 B4.01a*** (lacked evidence 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 to align with what is expected and taught)
- ***Standard B4.01b*** (lacked evidence 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 to allow the program to identify and address any student deficiencies in a timely manner)

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 A1.07*** (lacked evidence the sponsoring institution provides the program with the human resources, including sufficient faculty, administrative and technical staff, necessary to operate the educational program, comply with the Standards, and fulfill obligations to matriculating and enrolled students)
- ***Standard E1.03*** (lacked evidence the program submits reports or documents as required by the ARC-PA).