Macon & Joan Brock Virginia Health Sciences at Old Dominion University
(formerly Eastern Virginia Medical School)
Accreditation History

First accredited: October 1998
Next review: July 2036
Maximum class size: 80

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 **accepted the report**. No further information requested.

July 2026

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards*. The commission noted 4 areas of noncompliance with the *Standards*.
Next Comprehensive Evaluation: July 2036. Maximum class size: 80.
Report due September 7, 2026:

- Update NCCPA PANCE Exam Performance Summary Report (All Test Takers) on website

Report due October 5, 2026 (*Standards*, 5th edition-program will respond in 6th):

- ***Standard A3.12f*** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students general program information to include estimates of all costs (tuition, fees, etc.) related to the program)
- ***Standard B2.11d*** (lacked evidence the curriculum includes instruction in the patient response to illness or injury area of social and behavioral sciences and its application to clinical)
- ***Standard B4.03a*** (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including clinical and technical skills)

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 program submits reports or documents as required by the ARC-PA)

March 2025

Program Change: Change in Program Sponsorship. The commission **accepted** the report providing evidence of

- Clarification of the number of students enrolled and provide documentation of sufficient clinical sites for the maximum class size.

and **acknowledged the program's proposed change.**
No further information requested.

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

- Revised and resubmitted attrition report.

No further information requested.

June 2024

Program Change: Change in Program Sponsorship. The commission **reviewed and more information requested of the program's proposed change.** Additional information (clarification

of the number of students enrolled and documentation of sufficient clinical sites for the maximum class size) due by August 19, 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 and resubmitted attrition report) due September 20, 2024.

June 2022
Program Change: Increase maximum entering class size to 92 students. The commission **did not approve the program's proposed change**. The program can reapply.

September 2020
Program Change: Change in class size (80 to 84, effective January 6, 2021; to 88, effective January 4, 2022 and to 92, effective January 3, 2023). The commission **did not approve** the proposed change in class size. The proposal lacked specificity to understand the rationale for the proposed change.

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

- The proposed plan in response to COVID-19. No further information requested.

March 2020
The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

March 2019
The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

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

- Compliance with preceptors for SCPEs in pediatrics and behavioral and mental health. No further information requested.

The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

September 2017
The commission **accepted the report** providing evidence of

- Compliance with preceptors for SCPEs in pediatrics and behavioral and mental health. No further information requested.

July 2017
The program received an alert through the Program Management Portal that the number of students exceeded the maximum entering class size. The program submitted the required Exceeding Class Size report. The commission **accepted the report**. No further information requested.

July 2016
The commission **acknowledged the report** providing evidence of

- Portal updates (class size, SCPEs and PANCE) and an explanation of the class size discrepancy. No further information requested.

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

- ***Standards B3.07d and f*** (provided evidence of supervised clinical practice experiences with preceptors practicing in d) pediatrics and f) behavioral and mental health).

Additional information (evidence of compliance with preceptors for SCPEs in pediatrics and behavioral and mental health) due June 30, 2017 and 2018.

March 2016
Accreditation-Continued; Next Comprehensive Evaluation: March 2026. Maximum class size: 80. Report due April 21, 2016 (*Standards*, 4th edition) -

- ***Standards B3.07d and f*** (lacked evidence of supervised clinical practice experiences with preceptors practicing in d) pediatrics and f) behavioral and mental health).
- Class size discrepancy, update supervised clinical practice experiences [SCPEs} and PANCE pass rate data in the Program Management Portal.

September 2011
Program Change: Change in maximum student capacity (150 to 240), effective January 1, 2012. The commission **acknowledged the proposed change**. No further information requested.

September 2009
The commission **accepted the report** addressing 3rd edition

- ***Standard A3.13c*** (provided evidence student files include documentation of remediation). No further information requested.

March 2009

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Accreditation-Continued; Next Comprehensive Evaluation: March 2016. Maximum Student Capacity: 115.
Report due January 8, 2010 ((*Standards*, 3rd edition) -

- ***Standard A3.13c*** (lacked evidence student files include documentation of remediation).

March 2007
The commission **accepted the report** providing evidence of

- Psychiatry syllabus and PANCE data. No further information is requested at this time.

September 2006
The commission **acknowledged the report** providing evidence of

- PANCE analysis and clinical objectives. Additional information (psychiatry syllabus and PANCE data for 2006 graduates) due January 12, 2007.

March 2006
The commission **acknowledged the report** addressing 2nd edition

- ***Standard A1.5d*** (provided evidence the sponsoring institution assumes primary responsibility for appointment of faculty)**,**
- ***Standard C2.2g*** (provided evidence in the self-study report of critical analysis of evaluation of the most recent five-year aggregate student performance on the national certifying examination),
- ***Standard C5.2*** (provided evidence objective evaluation methods are equitable and include content related to the objectives and competencies described in the curriculum for supervised clinical education components),
- ***Standard C5.5*** (provided evidence a summative evaluation of each student is completed and documented prior to program completion to assure that students meet defined program objectives for the knowledge, skills, and attitudes that demonstrate suitability for practice),
- ***Standard C6.1*** (provided evidence the program defines and maintains a process to routinely evaluate sites for the students' clinical practice experiences) and
- ***Standard C6.3*** (provided evidence the program ensures and documents that each clinical site provides the student access to the physical facilities, patient populations, and supervision necessary to fulfill the rotation objectives).

Additional information (PANCE results and analysis and clinical objectives) due July 14, 2006.

March 2005
Accreditation-Continued; Next Comprehensive Evaluation: March 2009. Maximum Student Capacity: 108.
Report due January 13, 2006 (*Standards*, 2nd edition) -

- ***Standard A1.5d*** (lacked evidence the sponsoring institution assumes primary responsibility for appointment of faculty)**,**

- ***Standard C2.2g*** (lacked evidence in the self-study report of critical analysis of evaluation of the most recent five-year aggregate student performance on the national certifying examination),
- ***Standard C5.2*** (lacked evidence objective evaluation methods are equitable and include content related to the objectives and competencies described in the curriculum for supervised clinical education components),
- ***Standard C5.5*** (lacked evidence a summative evaluation of each student is completed and documented prior to program completion to assure that students meet defined program objectives for the knowledge, skills, and attitudes that demonstrate suitability for practice),
- ***Standard C6.1*** (lacked evidence the program defines and maintains a process to routinely evaluate sites for the students' clinical practice experiences) and
- ***Standard C6.3*** (lacked evidence the program ensures and documents that each clinical site provides the student access to the physical facilities, patient populations, and supervision necessary to fulfill the rotation objectives).

<u>September 2004</u>
Program Change: Change in maximum student capacity (105 to 150), effective January 3, 2005. The commission **acknowledged the proposed change**. No further information requested.

<u>September 2002</u>
The commission **accepted the report** providing evidence of

- Learning objectives. No further information requested.

<u>September-December 2001</u>
The commission **acknowledged the report** addressing 1st/2nd edition

- ***Standards I C 2/C5.5*** (provided evidence of a plan to conduct summary evaluation of students' knowledge and technical skills prior to graduation),
- ***Standards I E 3/C4.1a*** (provided evidence the self-study report documents the program's process of self-evaluation) and
- ***Standards II B 2 b/B1.4*** (provided evidence learning objectives for the supervised clinical education component are adequate to guide student learning).

Additional information (learning objectives) due August 1, 2002.

<u>March 2001</u>
Accreditation-Continued; Next Comprehensive Evaluation: March 2005. Maximum Student Capacity: 105.
Report due August 1, 2001 (*Standards*, 1st/2nd edition) -
NOTE: The review was conducted as the ARC-PA was transitioning from the 1st to 2nd edition of the *Standards*. The citations listing reflects the 1st edition of the *Standards* and the corresponding standard in the 2nd edition.

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Accreditation History

- ***Standards I C 2/C5.5*** (lacked evidence of a plan to conduct summary evaluation of students' knowledge and technical skills prior to graduation),
- ***Standards I E 3/C4.1a*** (lacked evidence the self-study report documents the program's process of self-evaluation) and
- ***Standards II B 2 b/B1.4*** (lacked evidence learning objectives for the supervised clinical education component are adequate to guide student learning).

NOTE: The ARC-PA commission action information available begins in March 2001. Information from initial accreditation in 1998 by CAAHEP is not available.