University of Texas Southwestern School of Health Professions
Accreditation History

First accredited: November 1973
Next review: January 2033
Maximum class size: 60

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.

The program's graduation rate was 85% for the class of 2025. The program submitted the Student Graduation Rate Required Report. The commission **reviewed and requested more information of the report**. Additional information (Revised didactic remediation policy, description of how the program identifies the specific deficiency requiring remediation, clarification as to whether competency-based reassessment will apply to all didactic remediation or only selected courses, and the timeline for implementation of the revised didactic remediation process and how the program will evaluate its effectiveness) due October 9, 2026.

June 2025
The commission accepted the report providing evidence of

- Revised and resubmitted Student Attrition Required Report

No further information requested.

March 2025
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 August 15, 2024 report. Additional information (revised and resubmitted Student Attrition Required Report) due January 29, 2025.

March 2024
The commission **accepted** the report addressing 5th edition

- ***Standard B3.03c*** (provided evidence supervised clinical practice experiences must enable all students to meet the program's learning outcomes for women's health [to include prenatal and gynecologic care]),
- ***Standard B3.03d*** (provided evidence supervised clinical practice experiences must enable all students to meet the program's learning outcomes for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care)
- ***Standard B4.01b*** (provided evidence that 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 that allow the program to identify and address any student deficiencies in a timely manner)

No further information requested.

September 2023
The commission **acknowledged the report** providing evidence of

- Updates to the program's website. No further information requested.

No further information requested.

March 2023
Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards*. Next Comprehensive Evaluation: March 2033. Maximum class size: 60.
Report due May 15, 2023:

- Update NCCPA PANCE Pass Rate Summary Report on website

Report due October 1, 2023 (*Standards*, 5th edition):

- ***Standard B3.03c*** (lacked evidence supervised clinical practice experiences must enable all students to meet the program's learning outcomes for women's health [to include prenatal and gynecologic care]),
- ***Standard B3.03d*** (lacked evidence supervised clinical practice experiences must enable all students to meet the program's learning outcomes for conditions requiring surgical management, including pre-operative, intra-operative, post-operative care)
- ***Standard B4.01b*** (lacked evidence that 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 that allow the program to identify and address any student deficiencies in a timely manner)

March 2021
The commission **acknowledged the report** providing evidence of

- Update regarding changes in response to COVID-19. No further information requested.

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

- Updated documentation regarding 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.

May 2016
The program was notified of a change in the accreditation process (time extended between regularly scheduled validation reviews from seven to ten years). Program's next validation review changed from March 2020 to March 2023 due to this change.

September 2014
Program Change: Change in class size (36 to 42 in 2015, 42 to 48 in 2016, 48 to 54 in 2017, and 54 to 60 in 2018). The commission **approved the proposed change**. No further information requested.

September 2013
The commission **accepted the report** addressing 4th edition

- ***Standard A3.19b*** (provided evidence that student files include documentation that the student has met institution and program health screeing and immunization requirements),
- ***Standard B3.02*** (provided evidence of defined expectations for students in supervised clinical practice experiences [SCPEs] with preventive, emergent, acute and chronic patient encounters),
- ***Standards B3.03a-d*** (provided evidence of SCPEs providing sufficient patient exposure with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions),
- ***Standard B3.07c*** (provided evidence of supervised clinical practice experiences [SCPEs] with preceptors practicing in general surgery) and
- ***Standard C4.01*** (provided evidence the program defines, maintains and documents effective processes for the initial and ongoing evaluation of all sites and preceptors used for SCPEs to ensure that sites and preceptors meet program defined expectations for learning outcomes and performance evaluation measures). No further information requested.

March 2013
Accreditation-Continued; Next Comprehensive Evaluation: March 2020. Maximum class size: 36.
Report due July 1, 2013 (*Standards*, 4th edition) -

- ***Standard A3.19b*** (lacked evidence that student files include documentation that the student has met institution and program health screeing and immunization requirements),
- ***Standard B3.02*** (lacked evidence of defined expectations for students in supervised clinical practice experiences [SCPEs] with preventive, emergent, acute and chronic patient encounters),
- ***Standards B3.03a-d*** (lacked evidence of SCPEs providing sufficient patient exposure with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions),
- ***Standard B3.07c*** (lacked evidence of supervised clinical practice experiences [SCPEs] with preceptors practicing in general surgery) and
- ***Standard C4.01*** (lacked evidence the program defines, maintains and documents effective processes for the initial and ongoing evaluation of all sites and preceptors used for SCPEs to ensure that sites and preceptors meet program defined expectations for learning outcomes and performance evaluation measures).

March 2012
Program Change: Change in program length (31 to 30 months), effective November 2012. The commission **acknowledged the proposed change**. No further information requested.

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

- The program director's role, clinical sites and course information. No further information requested.

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

- ***Standard A2.10*** (provided evidence the program director is knowledgeable about the accreditation process and responsible for the organization, administration, continuous review and analysis, planning, and development of the program),
- ***Standard A2.11*** (provided evidence the program director supervises the medical director, faculty, and staff in all activities that directly relate to the PA program),
- ***Standard B1.4*** (provided evidence for each didactic course, the program provides a clearly written course syllabus that includes measurable instructional objectives and expected student competencies),
- ***Standard B6.2d*** (provided evidence the program documents that every student has clinical experiences in prenatal care and gynecology),
- ***Standard B6.3*** (provided evidence clinical experiences are provided in long-term care settings) and
- ***Standard C3.1*** (provided evidence results of ongoing program evaluation are reflected in the curriculum and other dimensions of the program).

Additional information (clarification of program director's role, clinical student grid and pharmacology course information) due January 12, 2007.

March 2006

Accreditation-Continued; Next Comprehensive Evaluation: March 2012. Maximum Student Capacity: 108.

Report due July 14, 2006 (*Standards*, 2nd edition) -

- ***Standard A2.10*** (lacked evidence the program director is knowledgeable about the accreditation process and responsible for the organization, administration, continuous review and analysis, planning, and development of the program),
- ***Standard A2.11*** (lacked evidence the program director supervises the medical director, faculty, and staff in all activities that directly relate to the PA program),
- ***Standard B1.4*** (lacked evidence for each didactic course, the program provides a clearly written course syllabus that includes measurable instructional objectives and expected student competencies),
- ***Standard B6.2d*** (lacked evidence the program documents that every student has clinical experiences in prenatal care and gynecology),
- ***Standard B6.3*** (lacked evidence clinical experiences are provided in long-term care settings) and
- ***Standard C3.1*** (lacked evidence results of ongoing program evaluation are reflected in the curriculum and other dimensions of the program).

March 2000

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

- ***Standard I C 1*** (provided evidence the program defines an advanced placement policy). No further information requested.

March 1999

Accreditation-Continued; Next Comprehensive Evaluation: March 2006.

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Report due (*Standards*, 1st edition) -

- ***Standard I C 1*** (lacked evidence the program defines an advanced placement policy).

NOTE: The ARC-PA commission action information available begins in March 1999. Information from initial accreditation in 1973 by the American Medical Association Council on Medical Education and subsequent accrediting organizations is not available.