

**US Army Medical Center of Excellence (Interservice PA Program)  
Accreditation History**

First accredited: April 1996  
Next review: September 2025  
Maximum class size: 80  
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June 2023

Program Change: Change in fiscal support. The commission **acknowledged the proposed change**. No further information requested.

September 2021

Accreditation-Administrative Probation removed. The Annual Accreditation Fee was received in full in September 2021. Administrative-Probation removed post receipt of fee.

August 2021

Accreditation-Administrative Probation. The Annual Accreditation Fee was due July 1, 2021.

June 2021

The commission **accepted the quarterly report** addressing 4<sup>th</sup> edition

- **Standard A1.09** (provided evidence the sponsoring institution provides the program with the physical facilities to operate the educational program to fulfill obligations to matriculating and enrolled students). No further information requested.

March 2021

The commission **accepted the quarterly report** addressing 4<sup>th</sup> edition

- **Standard A1.09** (provided evidence the sponsoring institution provides the program with the physical facilities to operate the educational program to fulfill obligations to matriculating and enrolled students). No further information requested.

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

- Updated PANCE performance summary report on program website and updated web URL. No further information requested.

September 2020

The commission **did not approve the request** addressing 5<sup>th</sup> edition

- **Standard B3.02** (exception to allow clinical training to occur at a clinical site with preceptors that are located outside of the United States). No further information requested.

The commission **accepted the quarterly report** addressing 4<sup>th</sup> edition

- **Standard A1.09** (provided evidence the sponsoring institution provides the program with the physical facilities to operate the educational program to fulfill obligations to matriculating and enrolled students). No further information requested.

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

- Updated accreditation status on program website. No further information requested.

March 2020

The commission **did not accept the reports** addressing 4<sup>th</sup> edition

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- **Standard A1.09** (lacked evidence the sponsoring institution provides the program with the physical facilities to operate the educational program to fulfill obligations to matriculating and enrolled students).

Report due April 20, 2020

- Update accreditation status on program website.

Report due May 18, 2020 (and then quarterly) (*Standards*, 4<sup>th</sup> edition) -

- **Standard A1.09** (lacked evidence the sponsoring institution provides the program with the physical facilities to operate the educational program to fulfill obligations to matriculating and enrolled students).

March 2016

The commission **accepted the report** addressing 4<sup>th</sup> edition

- **Standard B1.09** (provided evidence for each clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies) and
- **Standard C3.04** (provided 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 is prepared to enter clinical practice). No further information requested.

September 2015

Accreditation-Continued; Next Comprehensive Evaluation: September 2025. Maximum class size: 80.

Report due February 5, 2016 (*Standards*, 4<sup>th</sup> edition) -

- **Standard B1.09** (lacked evidence for each clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies) and
- **Standard C3.04** (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 is prepared to enter clinical practice).

No report due (commission expects program to submit all reports and documents as required by the ARC-PA with the initial submission):

- **Standard A3.21** (lacked evidence student health records are confidential and not accessible to or reviewed by program, principal or instructional faculty or staff except for immunization and tuberculosis screening results which may be maintained and released with written permission from the student)

Program Change: Change in degree (program unable to grant master's degree; affiliated with the University of Nebraska Medical Center to grant the degree). The commission **approved the master's curriculum**. No further information requested.

March 2014

Accreditation-Administrative Probation. The Annual Report was due December 31, 2013. Administrative-Probation removed post receipt of annual report on January 7, 2014.

March 2010

The commission **approved the report** addressing 3<sup>rd</sup> edition

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- **Standard A2.14** (provided evidence each individual sharing the position of medical director has defined roles and responsibilities),
- **Standard B7.02** (provided evidence the program assures that all sites used for students during supervised clinical practice meet the program's prescribed expectations for student learning and performance evaluation measures, regardless of location) and
- **Standard C3.06** (provided evidence the program documents a summative evaluation of each student toward the end of the program to assure that students are prepared to enter clinical practice). No further information requested.

September 2009

Continuing Accreditation; Next Comprehensive Evaluation: September 2015. Maximum Student Capacity: 466.

Report due December 31, 2009 (*Standards*, 3<sup>rd</sup> edition) -

- **Standard A2.14** (lacked evidence each individual sharing the position of medical director has defined roles and responsibilities),
- **Standard B7.02** (lacked evidence the program assures that all sites used for students during supervised clinical practice meet the program's prescribed expectations for student learning and performance evaluation measures, regardless of location) and
- **Standard C3.06** (lacked evidence the program documents a summative evaluation of each student toward the end of the program to assure that students are prepared to enter clinical practice).

September 2008

Program Change: Change in maximum student capacity (360 to 466), effective January 2009. The commission **acknowledged the proposed change**. No further information requested.

March 2005

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

- Student placements in long-term care settings. No further information requested.

September 2004

The commission **acknowledged the report** addressing 2<sup>nd</sup> edition

- **Standard B6.3** (provided evidence clinical experiences are provided in long-term care settings) and
- **Standards C2.2e-f** (provided evidence the self-study includes critical analysis of e) timely surveys of graduates evaluating curriculum and program effectiveness and f) surveys of employers on such matters as employment settings, scope of practice, graduate competence, and suggestions for curriculum improvement).

Additional information (update on student placements in long-term care settings) due January 14, 2005.

September 2003

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Accreditation-Continued; Next Comprehensive Evaluation: September 2009. Maximum Student Capacity: 360.

Report due July 15, 2004 (*Standards*, 2<sup>nd</sup> edition) -

- **Standard B6.3** (lacked evidence clinical experiences are provided in long-term care settings) and
- **Standards C2.2e-f** (lacked evidence the self-study includes critical analysis of e) timely surveys of graduates evaluating curriculum and program effectiveness and f) surveys of employers on such matters as employment settings, scope of practice, graduate competence, and suggestions for curriculum improvement).

September 2002

Program Change: Change in degree awarded (baccalaureate to master's), effective January 2003. The commission **acknowledged the program change**. No further information requested.

September 1998

Accreditation-Continued; Next Comprehensive Evaluation: September 2003. The commission noted zero areas of noncompliance with the *Standards*.

NOTE: The ARC-PA commission action information available begins in September 1998. Information from initial accreditation in 1996 by CAAHEP is not available.