

## DeSales University Accreditation History

First accredited: April 1997

Next review: June 2027

Maximum class size: 80

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### March 2024

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 2023

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 2021

The commission **accepted the report** addressing 5<sup>th</sup> edition

- **Standards A1.02a and d** (provided evidence the sponsoring institution a) supports the program faculty in program assessment and d) demonstrates responsibility for compliance with ARC-PA accreditation *Standards*),
- **Standard A2.09d** (provided evidence the program director demonstrates knowledge and responsibility for continuous program review and analysis) and
- **Standards C1.02a and b** modified Self-Study Report (mSSR) (provided evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment). No further information requested.

### June 2021

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

- Changes in response to COVID-19. No further information requested.

### March 2021

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

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

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

- Corrected accreditation status on the program website. No further information requested.

### September 2020

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

- **Standard C2.01b**, modified Self-Study Report (lacked evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment).

Report due June 1, 2021 (*Standards*, 5<sup>th</sup> edition) –

- **Standards A1.02a and d** (lacked evidence the sponsoring institution a) supports the program faculty in program assessment and d) demonstrates responsibility for compliance with ARC-PA accreditation *Standards*)

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- **Standard A2.09d** (lacked evidence the program director demonstrates knowledge and responsibility for continuous program review and analysis)
- **Standards C1.02a and b** modified Self-Study Report (mSSR) (lacked evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment)

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

- The updated plan 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.

### March 2020

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

- Data for all didactic courses and on student attrition.

Additional information (data for all didactic and clinical courses identified as below benchmark) due May 8, 2020.

### June 2019

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

- **Standard C2.01b**, modified Self-Study Report (provided some evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment).

Additional information (data for all didactic courses and on student attrition) due August 5, 2019.

### June 2018

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

- Clinical year syllabi that clearly defines program expectations. No further information requested.

### March 2018

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

- **Standard B1.09** (provided some evidence for each clinical course that the program defines and publishes instructional objectives that guide student acquisition of required competencies).

Additional information (clinical year syllabi that clearly defines program expectations) due April 1, 2018.

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

- Updated website and portal. No further information requested.

### July 2017

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Accreditation-Continued; Next Comprehensive Evaluation: June 2027. Maximum class size: 80. Reports due September 1, 2017

- Update PANCE Pass Rate Summary Report on website and in Program Management Portal.

Due December 15, 2017 (*Standards*, 4<sup>th</sup> edition) -

- **Standard B1.09** (lacked evidence for each clinical course that the program defines and publishes instructional objectives that guide student acquisition of required competencies).

Due March 15, 2019 (*Standards*, 4<sup>th</sup> edition) -

- **Standard C2.01b**, modified Self-Study Report (lacked evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment).

### March 2014

Program Change: Change in maximum class size (60 to 80), effective August 2014. The commission **approved the proposed change**. No further information requested.

### March 2013

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

- **Standard A3.14c** (provided evidence the program publishes and makes readily available to enrolled and prospective students the first time PANCE rates for the five most recent graduating classes),
- **Standard C2.01b** (provided evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment) and
- **Standard E1.03** (provided evidence the program submits reports or documents as required by the ARC-PA). No further information requested.

Program Change: Change in maximum class size (40 to 60), effective August 2013. The commission **approved the proposed change**. No further information requested.

### September 2012

Accreditation-Continued; Next Comprehensive Evaluation: September 2017. Maximum Student Capacity: 80.

Report due December 31, 2012 (*Standards*, 4<sup>th</sup> edition) -

- **Standard A3.14c** (lacked evidence the program publishes and makes readily available to enrolled and prospective students the first time PANCE rates for the five most recent graduating classes),
- **Standard C2.01b** (lacked evidence of a self-study report that documents results of critical analysis from the ongoing self-assessment) and
- **Standard E1.03** (lacked evidence the program submits reports or documents as required by the ARC-PA).

### March 2009

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

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- How the program documents self-assessment activities related to student evaluations of didactic courses, clinical experiences and faculty. No further information requested.

### September 2008

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

- **Standards A1.07b and c** (provided evidence the sponsoring institution assures the program has b) the human resources needed to operate the program and c) the human resources needed to process admission applications),
- **Standard A3.12** (provided evidence PA students are not used to substitute for clinical or administrative staff during clinical experiences),
- **Standard C1.01d** (provided evidence the program collects and analyzes student evaluations of individual didactic courses, clinical experiences and faculty) and
- **Standards C2.01b4-6** (provided evidence the self-study documents b4) student evaluations of individual didactic courses, clinical experiences, and faculty, b5) graduate evaluations of curriculum and program effectiveness and b6) preceptor evaluations of student performance and suggestions for curriculum improvement).

Additional information (report that addresses how program documents self-assessment activities related to student evaluations of didactic courses, clinical experiences and faculty) due January 9, 2009.

### September 2007

Accreditation-Continued; Next Comprehensive Evaluation: September 2012. Maximum Student Capacity: 80.

Report due July 11, 2008 (*Standards*, 3<sup>rd</sup> edition) -

- **Standards A1.07b and c** (lacked evidence the sponsoring institution assures the program has b) the human resources needed to operate the program and c) the human resources needed to process admission applications),
- **Standard A3.12** (lacked evidence PA students are not used to substitute for clinical or administrative staff during clinical experiences),
- **Standard C1.01d** (lacked evidence the program collects and analyzes student evaluations of individual didactic courses, clinical experiences and faculty) and
- **Standards C2.01b4-6** (lacked evidence the self-study documents b4) student evaluations of individual didactic courses, clinical experiences, and faculty, b5) graduate evaluations of curriculum and program effectiveness and b6) preceptor evaluations of student performance and suggestions for curriculum improvement).

### September 2003

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

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- **Standard A4.5** (provided evidence secure storage space has been identified for student files and records),
- **Standard A5.16** (provided evidence admission decisions are made in accordance with defined and published admission practices) and
- **Standard C5.4** (provided evidence student progress is monitored in a way that deficiencies are promptly identified as a means of providing corrective action). No further information requested.

### September 2002

Accreditation-Continued; Next Comprehensive Evaluation: September 2007. Maximum Student Capacity: 80.

Report due July 15, 2003 (*Standards*, 2<sup>nd</sup> edition) -

- **Standard A4.5** (lacked evidence secure storage space has been identified for student files and records),
- **Standard A5.16** (lacked evidence admission decisions are made in accordance with defined and published admission practices) and
- **Standard C5.4** (lacked evidence student progress is monitored in a way that deficiencies are promptly identified as a means of providing corrective action).

Personnel Change: A new medical director was appointed, effective June 1, 2002.

NOTE: The ARC-PA commission action information available begins in September 2002. Information from initial accreditation in 1997 by CAAHEP is not available.