

Kean University Accreditation History

First accredited: March 2021

Next review: March 2026

Maximum class size: 20/25/25

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March 2024

Adverse Action-Accreditation-Probation (following Provisional Monitoring review) due to noncompliance concerns regarding:

- Evidence the sponsoring institution supported the program in hiring sufficient faculty and staff to operate the educational program, comply with the *Standards*, and fulfill obligations to matriculating and enrolled students.
- Evidence the program had sufficient principal faculty to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program.
- Evidence of assessment of student performance in supervised clinical practice experiences evaluation that allowed for the identification of any student deficiencies in a *timely* manner.
- Evidence of an implemented self-assessment process that provided evidence of data collection to address all aspects of the program, performance of critical analysis of data, and application of results of analysis leading to conclusions that identified program strengths.
- Evidence of a self-study report that effectively documented the program's process of data collection to address all aspects of the program, ongoing data analysis, and data-driven conclusions with subsequent identification of program strengths, areas in need of improvement, and action plans.
- Submission of the documents as required.

A focused probation visit will occur in conjunction with the final provisional visit in advance of the March 2026 commission meeting. The program's maximum class size remains 25. The program did not appeal the commission's decision.

Report due May 15, 2024:

- Update SCPE data, PANCE pass rate data and student enrollment information in Program Management Portal

Report due May 15, 2024 (*Standards*, 5th edition):

- **Standard A1.02b** (lacked evidence the sponsoring institution is responsible for hiring faculty and staff)
- **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 are sufficient in number to meet the academic needs of enrolled students and manage the administrative responsibilities consistent with the complexity of the program)
- **Standard B1.03d** (lacked evidence that for each didactic and clinical course [including required and elective rotations], the program defines and publishes for students course goal/rationale information in syllabi or appendix to the syllabi)
- **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)

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components that allow the program to identify and address any student deficiencies in a timely manner)

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

- **Standard C1.02c.i.** modified self-study report (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program strengths)
- **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)
- **Standard E1.03** (lacked evidence program submits reports or documents as required by the ARC-PA)

March 2022

The commission **accepted** the report addressing 5th edition providing evidence of:

- Supervised clinical practice experience learning outcomes for each required rotation, narrative describing how program will determine each student has met the learning outcomes and copy of evaluation document.

No further information requested.

September 2021

The commission **reviewed and more information requested** for the report addressing 5th edition

- **Standard B2.09** (provided evidence the program curriculum includes instruction in technical skills and procedures),
- **Standard B2.11b** (provided evidence the program curriculum includes instruction in the social and behavioral sciences related to human sexuality),
- **Standard B2.15a** (provided evidence the program curriculum includes instruction in the public health concepts of disease reporting) and
- **Standards B4.01a-b** (lacked evidence the program will conduct student evaluations in the supervised clinical education components with a) clear parallels between what is expected, taught and assessed and b) allow the program to identify and address any student deficiencies in a timely manner).

Additional information (supervised clinical practice experience learning outcomes for each required rotation, narrative describing how program will determine each student has met the learning outcomes and copy of evaluation document) due September 22, 2021.

March 2021

Accreditation-Provisional; Next Comprehensive Evaluation: TBD (Provisional Monitoring). The program is approved for up to 20 students in the first class of students, 25 in the second class and 25 in the third class.

Report due June 15, 2021 (*Standards*, 5th edition) -

- **Standard B2.09** (lacked evidence the program curriculum includes instruction in technical skills and procedures),

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- **Standard B2.11b** (lacked evidence the program curriculum includes instruction in the social and behavioral sciences related to human sexuality),
- **Standard B2.15a** (lacked evidence the program curriculum includes instruction in the public health concepts of disease reporting) and
- **Standards B4.01a-b** (lacked evidence the program will conduct student evaluations in the supervised clinical education components with a) clear parallels between what is expected, taught and assessed and b) allow the program to identify and address any student deficiencies in a timely manner).