First accredited: March 2017 Next review: March 2032 Maximum class size: 40

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## March 2024 (Following Probation Review)

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards*. Next Comprehensive Evaluation: March 2032. Maximum class size: 40. Report due May 15, 2024 (*Standards*, 5<sup>th</sup> edition):

- **Standard B3.07a** (lacked evidence supervised clinical practice experiences occur with preceptors who enable students to meet program defined learning outcomes for family medicine)
- **Standard C2.01a** (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to physical facilities)

## September 2022

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

- **Standard A1.02a** (provided evidence the sponsoring institution is responsible for supporting the planning by program faculty of curriculum design, course selection, and program assessment)
- **Standard A2.09d** (provided evidence the program director is knowledgeable about and responsible for continuous programmatic review and analysis)

## March 2022 (following Final Provisional Review)

Adverse Action-Accreditation-Probation extended due to the incomplete progress made by the program in demonstrating compliance with the *Standards*. A focused probation site visit will need to occur in advance of the March 2024 commission meeting. The program's maximum class size remains 40. Report due May 6, 2022 (*Standards*, 5<sup>th</sup> edition):

- **Standard A1.02a** (lacked evidence the sponsoring institution is responsible for supporting the planning by program faculty of curriculum design, course selection, and program assessment)
- **Standard A2.09d** (lacked evidence the program director is knowledgeable about and responsible for continuous programmatic review and analysis)

Report due August 3, 2023 modified self-study report (Standards, 5th edition):

- **Standard C1.02b** (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data)
- Standard C1.02c.ii. (lacked evidence the program implements its ongoing self-assessment
  process by applying the results leading to conclusions that identify program areas in need of
  improvement)
- **Standard C1.02c.iii.** (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify action plans)
- **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)

#### September 2021

The commission acknowledged the report providing evidence of

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• Updates to the Program Management Portal and updated PANCE pass rate data on the program's website. No further information requested.

#### June 2021

The commission accepted the report providing evidence of

• How the program verified that students met the program's learning outcomes for patients seeking women's health. No further information requested.

### March 2021

The commission acknowledged the report providing evidence of

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

#### September 2020

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

- **Standards A1.03a**, **c** (provided evidence the sponsoring institution is responsible for a) supporting the planning by program faculty in program assessment and c) complying with ARC-PA accreditation **Standards** and policies),
- **Standard A2.09d** (provided evidence the program director is knowledgeable about and responsible for program continuous review and analysis),
- **Standard A3.14b** (provided evidence the program publishes factually accurate evidence of the program's success in achieving its goals),
- **Standard B2.12** (provided evidence the program curriculum includes instruction in concepts of public health including participation in disease surveillance and intervention),
- **Standard C1.01** (provided evidence of implementation of an ongoing program self-assessment process which documents program effectiveness and fosters program improvement) and
- **Standard C3.01** (provided evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes).

Additional information (narrative and documentation addressing how the program verified that students met the program's learning outcomes for patients seeking women's health [standard B3.03b,  $4^{th}$  edition; standard 3.03c,  $5^{th}$  edition]) due February 10, 2021.

The commission acknowledged the report providing evidence of

 Website updated with the most recent NCCPA PANCE Pass Rate Summary Report. 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 (following Provisional Monitoring review)

Adverse Action-Accreditation-Probation; A focused probation site visit will occur in advance of the March 2022 commission meeting. The program is approved for up to 40 students in its third class. The program did not appeal the commission's decision.

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## Report due April 17, 2020

• Update website with the most recent NCCPA PANCE Pass Rate Summary Report. Report due May 15, 2020 (*Standards*, 4<sup>th</sup> edition) -

- **Standards A1.03a**, **c** (lacked evidence the sponsoring institution is responsible for a) supporting the planning by program faculty in program assessment and c) complying with ARC-PA accreditation **Standards** and policies),
- **Standard A2.09d** (lacked evidence the program director is knowledgeable about and responsible for program continuous review and analysis),
- **Standard A3.14b** (lacked evidence the program publishes factually accurate evidence of the program's success in achieving its goals) and
- **Standard B2.12** (lacked evidence the program curriculum includes instruction in concepts of public health including participation in disease surveillance and intervention).

Report due June 17, 2020 (Standards, 4th edition) -

- **Standard B3.03a** (lacked evidence that supervised clinical practice experiences [SCPEs] enable all students to meet the program's learning outcomes for medical care across the life span to include, infants, children, adolescents, adults, and the elderly)
- **Standard B3.03b** (lacked evidence that supervised clinical practice experiences [SCPEs] enable all students to meet the program's learning outcomes for patients seeking women's health)
- **Standard C1.01** (lacked evidence of implementation of an ongoing program self-assessment process which documents program effectiveness and fosters program improvement) and
- **Standard C3.01** (lacked evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes).

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

- **Standard C1.02** (lacked evidence program applies the results of ongoing program self-assessment to the curriculum and other dimensions of the program)
- **Standard C2.01a** (lacked evidence program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment to include the program process of self-assessment)
- Standard C2.01b (lacked evidence program prepares a self-study report as part of the
  application for continuing accreditation that accurately and succinctly documents the process,
  application and results of ongoing program self-assessment to include the results of critical
  analysis from the ongoing self-assessment)
- **Standard C2.01c** (lacked evidence program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment to include faculty evaluation of the curricular and administrative aspects of the program)
- **Standard C2.01d** (lacked evidence program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment to include modifications that occurred as a result of self-assessment)

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- Standard C2.01e (lacked evidence program prepares a self-study report as part of the
  application for continuing accreditation that accurately and succinctly documents the process,
  application and results of ongoing program self-assessment to include self-identified program
  strengths and areas in need of improvement)
- **Standard C2.01f** (lacked evidence program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment to include plans for addressing areas needing improvement)
- **Standard E1.03** (lacked evidence the program submits reports or documents as required by the ARC-PA)

### March 2017

Accreditation-Provisional; Next Comprehensive Evaluation: March 2020 (Provisional Monitoring). The program is approved for up to 30 students in the first class of students, 35 in the second class and 40 in the third class. The commission noted zero areas of noncompliance with the *Standards*.