

Daemen University Accreditation History

First accredited: October 1997

Next review: March 2033

Maximum class size: 65

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June 2024

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 **did not accept the report**. Additional information (how remediation efforts and outcomes were evaluated as it relates to student attrition and how the program evaluated the effectiveness of the university's undergraduate science prerequisite courses in preparing students for the PA foundational science courses) due July 26, 2024.

September 2023

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

- **Standard A3.15c** (provided evidence program defines, publishes, consistently applies and makes readily available to students upon admission policies and procedures for remediation and deceleration)
- **Standard B4.01b** (provided evidence evaluation of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components identifies and addresses any student deficiencies in a timely manner)

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

- Updates to the program's website.

No further information requested.

March 2023

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards*. Next Comprehensive Evaluation: September 2033. The program is approved for a maximum class size of 4065

Report due May 15, 2023 (*Standards*, 5th edition):

- Update PANCE data on program website
- **Standard A3.15c** (lacked evidence program defines, publishes, consistently applies and makes readily available to students upon admission policies and procedures for remediation and deceleration)
- **Standard B4.01b** (lacked evidence evaluation of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components identifies and addresses any student deficiencies in a timely manner)

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

- **Standard A3.17b** (lacked evidence student academic records kept by the sponsoring institution or program are readily accessible to authorized program personnel and includes documentation of remediation efforts and outcomes)

Report due October 1, 2024 (*Standards*, 5th edition):

- **Standard C1.03** modified Self-Study Report (lacked evidence 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)

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

- **Standard E1.03** (lacked evidence program submits reports or documents as required by the ARC-PA)

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.

March 2016

Program Change: Change in degree (baccalaureate to master's curriculum), effective May 2016. The commission **approved the proposed change**. No further information requested.

September 2013

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

- **Standard A3.20** (provided evidence that PA students do not have access to the academic records or other confidential information of other students or faculty). No further information requested.

March 2013

Accreditation-Continued; Next Comprehensive Evaluation: March 2020. Maximum class size: 65.

Report due May 1, 2013 (*Standards*, 4th edition) -

- **Standard A3.20** (lacked evidence that PA students do not have access to the academic records or other confidential information of other students or faculty).

March 2012

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

- Update on facilities and faculty and staff hiring. No further information requested.

September 2011

Program Change: Change in maximum student enrollment (135 to 195), effective September 2011. The commission **acknowledged the proposed change**. Additional information (update on facilities renovation and faculty and staff hiring) requested by December 31, 2011

March 2007

The commission **accepted the report** addressing 2nd edition

- **Standard C2.2c** (provided evidence the self-study report includes critical analysis of student failure rates in individual courses and rotations) and

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- **Standard D1.4** (provided evidence student immunization status meets the current recommendations of the Advisory Committee on Immunization Practices of the federal Centers for Disease Control and Prevention). No further information requested.

September 2006

Accreditation-Continued; Next Comprehensive Evaluation: September 2012. Maximum Student Capacity: 135.

Report due January 12, 2007 (*Standards*, 2nd edition) -

- **Standard C2.2c** (lacked evidence the self-study report includes critical analysis of student failure rates in individual courses and rotations) and
- **Standard D1.4** (lacked evidence student immunization status meets the current recommendations of the Advisory Committee on Immunization Practices of the federal Centers for Disease Control and Prevention).

September 2002

Personnel Change: Appointment of new program director, effective June 5, 2002. No further information requested.

December 2001

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

- Critical analysis of data. No further information requested.

March 2001

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

- **Standard I E 1** (provided evidence the self-study report includes analysis of outcomes data, particularly in the areas of student attrition and failure rates and surveys of graduates and employers) and
- **Standard II B 2 b** (provided evidence the learning objectives for medical ethics are sufficient to guide student learning).

Additional information (evidence of critical analysis of outcome data as part of continuous self-assessment) requested.

September 2000

Accreditation-Continued; Next Comprehensive Evaluation: September 2006.

Report due January 15, 2001 (*Standards*, 1st edition) -

- **Standard I E 1** (lacked evidence the self-study report includes analysis of outcomes data, particularly in the areas of student attrition and failure rates and surveys of graduates and employers) and
- **Standard II B 2 b** (lacked evidence the learning objectives for medical ethics are sufficient to guide student learning).

September 1998

The commission **acknowledged the report** addressing four citations. No further information requested.

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NOTE: The ARC-PA commission action information available begins in September 1998. Information from initial accreditation in 1997 by CAAHEP is not available.