

Milligan University Accreditation History

First accredited: September 2017

Next review: June 2032

Maximum class size: 26

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June 2024

The program's PANCE pass rate percentage was 85% or less for its 2023 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

September 2023

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

- Modified Appendix 14 SSR-Appendix G. No further information requested.

March 2023

The commission **Reviewed and More Information Requested** the report addressing 5th edition

- **Standard B1.03** (provided evidence of defining and publishing learning outcomes and instructional objectives, in measurable terms that can be assessed and that guide student acquisition of required competencies, for each didactic and clinical course (including required and elective rotations)
- **Standard C1.03** modified self-study report (lacked evidence program prepares a self-study report that accurately and succinctly documents the process, application and results of ongoing program self-assessment)

Additional information (modified Appendix 14 SSR-Appendix G) due May 15, 2023.

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

- Update of NCCPA PANCE Pass Rate Summary Report on website. No further information requested.

June 2022 (following Final Provisional review)

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards* after completion of the provisional review process. Next Comprehensive Evaluation: June 2032. The program is approved for a maximum class size of 26.

Report due August 12, 2022

- Update NCCPA PANCE Pass Rate Summary Report on website.

Report due December 16, 2022 (*Standards*, 5th edition) -

- **Standard B1.03** (lacked evidence of defining and publishing learning outcomes and instructional objectives, in measurable terms that can be assessed and that guide student acquisition of required competencies, for each didactic and clinical course (including required and elective rotations)
- **Standard C1.03** modified self-study report (lacked evidence program prepares a self-study report that accurately and succinctly documents the process, application and results of ongoing program self-assessment)

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):

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- **Standard A3.12b** (lacked evidence the program defined, published and made readily available to enrolled and prospective students general program information to include evidence of its effectiveness in meeting its goals)
- **Standard C2.01c** (lacked evidence the program defined and maintained effective processes and document the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure that students are able to fulfill program learning outcomes with access to supervision)

March 2022

The commission **accepted** the report

- Describing how the program aligns student assessment with the expected SCPE learning outcomes for each required rotation. No further information is required.

June 2021

The commission **reviewed and more information requested** for the report

- Describing how the program aligns student assessment with the expected supervised clinical practice experience (SCPE) learning outcomes and monitors the progress of each student.

Additional information (narrative describing how the program aligns student assessment with the expected SCPE learning outcomes for each required rotation) due October 15, 2021.

March 2021

The commission **did not accept the report** addressing 5th edition

- **Standard B3.03d** (lacked evidence of clearly defined learning outcomes for students in supervised clinical practice experiences [SCPEs] with patients seeking care for conditions requiring surgical management) and
- **Standard B4.02a** (lacked evidence the program monitors and documents the progress of each student in a manner that promptly identifies deficiencies in required skills for the SCPEs).

Additional information (narrative describing how the program aligns student assessment with the expected SCPE learning outcomes and monitors the progress of each student) due January 22, 2021.

June 2020 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: June 2022 (Final Provisional). The program's maximum class size remains 26 for the third class.

Report due December 15, 2020 (*Standards*, 5th edition) -

- **Standard B3.03d** (lacked evidence of clearly defined learning outcomes for students in supervised clinical practice experiences [SCPEs] with patients seeking care for conditions requiring surgical management) and
- **Standard B4.02a** (lacked evidence the program monitors and documents the progress of each student in a manner that promptly identifies deficiencies in required skills for the SCPEs).

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 C1.03** (lacked evidence program prepares a self-study report that accurately and succinctly documents the process, application and results of ongoing program self-assessment)

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

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

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

September 2019

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 2018

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

- **Standard B2.06** (provided evidence the program curriculum includes instruction in rehabilitative care). No further information requested.

September 2017

Accreditation-Provisional; Next Comprehensive Evaluation: June 2020 (Provisional Monitoring). The program is approved for up to 26 students in the first class of students, 26 in the second class and 26 in the third class.

Report due November 3, 2017 (*Standards*, 4th edition) -

- **Standard B2.06** (lacked evidence the program curriculum includes instruction in rehabilitative care).