

Misericordia University Accreditation History

First accredited: March 2018
Next review: September 2032
Maximum class size: 25
Page 1 of 4

March 2023

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

- **Standard B4.01b** (provided 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 components that allow the program to identify and address any student deficiencies in a timely manner)
- **Standard B4.03a** (provided evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including clinical and technical skills)

No further information requested.

September 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: September 2032. Maximum class size: 25.

Report due December 9, 2022 (*Standards*, 5th edition):

- **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 components that allow the program to identify and address any student deficiencies in a timely manner)
- **Standard B4.03a** (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student meets the program competencies required to enter clinical practice, including clinical and technical skills)

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

- **Standard A3.11** (lacked evidence the sponsoring institution and program's announcements and advertising *accurately* reflect the program offered)

September 2021

The program's PANCE pass rate percentage was 85% or less for its 2020 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

The commission **accepted the findings of the virtual site visit**. No further information requested.

March 2021

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

Misericordia University Accreditation History

First accredited: March 2018
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Page 2 of 4

- **Standard B2.17f** (provided evidence the program curriculum includes instruction in current trends that affect the PA profession) and
- **Standard B3.06a** (provided evidence that all supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction). No further information requested.

September 2020 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: TBD (Final Provisional). The approved maximum class size remains 25 for the third class.

Report due December 18, 2020 (*Standards*, 5th edition) -

- **Standard B2.17f** (lacked evidence the program curriculum includes instruction in current trends that affect the PA profession) and
- **Standard B3.06a** (lacked evidence that all supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction).

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

- Updated changes in response to COVID-19. No further information requested.

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

- Updated changes 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.

September 2018

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

- **Standard B3.03a** (provided evidence of methods to determine, after supervised clinical practice experiences [SCPEs], that all students are able to meet the program's learning outcomes with patients seeking medical care across the life span). No further information requested.

March 2018

Accreditation-Provisional; Next Comprehensive Evaluation: September 2020 (Provisional Monitoring).

The program is approved for up to 20 students in the first class of students, 20 in the second class and 25 in the third class.

Report due May 23, 2018 (*Standards*, 4th edition) -

- **Standard B3.03a** (lacked evidence of methods to determine, after supervised clinical practice experiences [SCPEs], that all students are able to meet the program's learning outcomes with patients seeking medical care across the life span).
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Misericordia University
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Page 3 of 4

The program was accredited from March 2012 through August 2017.

September 2015

Adverse Action-Accreditation Withdrawn. Action based on noncompliance with *Standards*, 4th edition

- **Standard A1.03a** (lacked evidence the sponsoring institution is responsible for supporting the planning by program faculty in program assessment),
- **Standard A2.08** (lacked evidence the program director provides effective leadership and management),
- **Standard A3.07** (lacked evidence the policy on immunization of students is based on current Centers for Disease Control recommendations for health professionals),
- **Standard A3.14b** (lacked evidence the program publishes and makes readily available to enrolled and prospective students the program's success in achieving its goals),
- **Standard A3.17c** (lacked evidence the program defines, publishes and makes readily available to students upon admission academic performance and progression information to include requirements for progression in and completion of the program),
- **Standards A3.19b and f** (lacked evidence that student files include documentation that the student has met b) institution and program health screening and immunization requirements and f) requirements for program completion),
- **Standard B1.01** (lacked evidence the curriculum is consistent with the mission and goals of the program),
- **Standard B1.03** (lacked evidence the curriculum is of sufficient breadth and depth to prepare the student for the clinical practice of medicine),
- **Standard B1.05** (lacked evidence the curriculum includes instruction in intellectual honesty and appropriate academic conduct),
- **Standard B1.09** (lacked evidence for each clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies),
- **Standard B2.05** (lacked evidence the program curriculum includes instruction in patient management),
- **Standard B3.02** (lacked evidence the supervised clinical practice experiences [SCPEs] address preventive, emergent, acute and chronic patient encounters and enable students to meet program expectations and acquire competencies needed for entry into clinical practice),
- **Standards B3.03a-d** (lacked evidence of program defined requirements for SCPEs with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions),
- **Standard C1.01** (lacked evidence of an ongoing self-assessment process designed to document program effectiveness and foster program improvement),
- **Standards C2.01b-d** (lacked evidence of a self-study report that documents b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program and d) modifications that occurred as a result of self-assessment) and

Misericordia University Accreditation History

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Page 4 of 4

- **Standard C3.03** (lacked evidence the program monitors and documents the progress of each student in a manner that promptly identifies deficiencies in knowledge or skills and establishes a means for remediation).

The program did not appeal the decision and voluntarily withdrew from accreditation, effective August 30, 2017. Program remained on Accreditation-Probation until teach-out of students completed.

September 2012

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

- **Standard A2.14** (provided evidence there are sufficient instructional faculty to provide students with the necessary attention, instruction and supervised clinical practice experiences to acquire the knowledge and competence required for entry into the profession),
- **Standards A3.14f** (provided evidence the program defines, publishes and makes readily available to enrolled and prospective students estimates of all costs [tuition, fees, etc.] related to the program) and
- **Standard A3.15b** (provided evidence the program defines, publishes and makes readily available to prospective students b) admission requirements regarding prior education or work experience).

Additional information (curriculum vitae for director of clinical education) due as soon as possible.

March 2012

Accreditation-Provisional; Next Comprehensive Evaluation: September 2015. The program is approved for up to 40 students.

Report due July 1, 2012 (*Standards*, 4th edition) -

- **Standard A2.14** (lacked evidence there are sufficient instructional faculty to provide students with the necessary attention, instruction and supervised clinical practice experiences to acquire the knowledge and competence required for entry into the profession),
- **Standards A3.14f** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students estimates of all costs [tuition, fees, etc.] related to the program) and
- **Standard A3.15b** (lacked evidence the program defines, publishes and makes readily available to prospective students b) admission requirements regarding prior education or work experience).