

## Slippery Rock University Accreditation History

First accredited: March 2016

Next review: March 2030

Maximum class size: 52

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### September 2022

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

- **Standard B4.01a** (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 aligns with what is expected and taught). No further information requested.

### March 2022 (following probation visit)

Accreditation-Continued; Program has not yet enrolled students but plans and resource allocation, if fully implemented as planned, demonstrate the probability to meet the ARC-PA *Standards*. Next Comprehensive Evaluation: March 2030. Maximum class size: 52.

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

- **Standard B4.01a** (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 aligns with what is expected and taught)

### September 2021

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

- Analysis of PANCE Exam Performance First-Time Takers due to pass rate percentage of 85% or less for the class of 2020. No further information requested.

### March 2021

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

- **Standard A1.03c** (provided evidence the sponsoring institution is responsible for complying with ARC-PA accreditation Standards and policies),
- **Standard A2.03** (provided evidence principal faculty are sufficient in number to meet the academic needs of enrolled students),
- **Standard A2.05a** (provided evidence principal faculty and the program director actively participate in the processes of reviewing and revising as necessary the mission statement for the program),
- **Standards A2.09d and g** (provided evidence the interim program director is knowledgeable about and responsible for program d) continuous review and analysis and g) participation in the accreditation process),
- **Standard A3.13** (provided evidence the program announcements and advertising accurately reflect the program offered),
- **Standards A3.14b and g** (provided evidence the program publishes and makes readily available to enrolled and prospective students b) factually accurate evidence of its effectiveness in meeting its goals and g) policies and procedures for refunds of tuition and fees) and
- **Standard A3.15e** (provided evidence the program makes readily available to prospective students any required technical standards for enrollment). No further information requested.

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

- **Standard B2.04** (provided evidence the program curriculum includes instruction in

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interpersonal and communication skills),

- **Standard B2.06** (provided evidence the program curriculum includes instruction in rehabilitative care),
- **Standard B2.08** (provided evidence the program curriculum includes instruction in the patient's response to illness, injury and stress),
- **Standards B3.03a-c** (provided evidence of defined learning outcomes and methods to determine students, after supervised clinical practice experiences [SCPEs] with patients seeking a) medical care across the life span, b) women's health and c) surgical management, have met the learning outcomes),
- **Standards B3.06a and b** (provided evidence SCPEs occur with a) physicians specialty board certified in their area of instruction and b) PAs teamed with physicians specialty board certified in their area of instruction),
- **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 of frequent, objective and documented student evaluations related to didactic education components paralleling the required learning outcomes). No further information requested.

### September 2020

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.

### March 2020 (following Final Provisional review)

Adverse Action-Accreditation-Probation; A focused probation site visit will need to occur in advance of the March 2022 commission meeting. The program's maximum class size remains 52.

Report due August 30, 2020 (*Standards*, 4<sup>th</sup> edition) -

- **Standard A1.03c** (lacked evidence the sponsoring institution is responsible for complying with ARC-PA accreditation Standards and policies),
- **Standard A2.03** (lacked evidence principal faculty are sufficient in number to meet the academic needs of enrolled students),
- **Standard A2.05a** (lacked evidence principal faculty and the program director actively participate in the processes of reviewing and revising as necessary the mission statement for the program),
- **Standards A2.09d and g** (lacked evidence the interim program director is knowledgeable about and responsible for program d) continuous review and analysis and g) participation in the accreditation process),
- **Standard A3.13** (lacked evidence the program announcements and advertising accurately reflect the program offered),

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- **Standards A3.14b and g** (lacked evidence the program publishes and makes readily available to enrolled and prospective students b) factually accurate evidence of its effectiveness in meeting its goals and g) policies and procedures for refunds of tuition and fees) and
- **Standard A3.15e** (lacked evidence the program makes readily available to prospective students any required technical standards for enrollment).

Report due December 1, 2020 (*Standards*, 4<sup>th</sup> edition) -

- **Standard B2.04** (lacked evidence the program curriculum includes instruction in interpersonal and communication skills),
- **Standard B2.06** (lacked evidence the program curriculum includes instruction in rehabilitative care),
- **Standard B2.08** (lacked evidence the program curriculum includes instruction in the patient's response to illness, injury and stress),
- **Standards B3.03a-c** (lacked evidence of defined learning outcomes and methods to determine students, after supervised clinical practice experiences [SCPEs] with patients seeking a) medical care across the life span, b) women's health and c) surgical management, have met the learning outcomes),
- **Standards B3.06a and b** (lacked evidence SCPEs occur with a) physicians specialty board certified in their area of instruction and b) PAs teamed with physicians specialty board certified in their area of instruction),
- **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 of frequent, objective and documented student evaluations related to didactic education components paralleling the required learning outcomes).

Report due July 26, 2021 (*Standards*, 4<sup>th</sup> edition) -

- **Standard C1.02** (lacked evidence the program consistently applies the results of ongoing program self-assessment to the curriculum and other dimensions of the program) and
- **Standards C2.01a-f** modified self-study report (mSSR) (lacked evidence of a self-study report that documents a) the program process of ongoing self-assessment, b) results of critical analysis from the ongoing self-assessment, c) faculty evaluation of the curricular and administrative aspects of the program, d) modifications that occurred as a result of self-assessment e) self-identified program strengths and areas in need of improvement and f) plans for addressing areas needing improvement).

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 A3.22b** (lacked evidence principal faculty records must include current curriculum vitae)
- **Standard E1.03** (lacked evidence the program submits reports or documents as required by the ARC-PA).

June 2019

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

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- How stated preferences are factored into admissions decisions. No further information requested.

### March 2019

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

- **Standard A1.03a** (provided evidence the sponsoring institution is responsible for supporting the planning by program faculty in program assessment),
- **Standard A3.13** ((provided evidence the program announcements and advertising accurately reflect the program offered),
- **Standard A3.15a** (provided evidence the program publishes admission and enrollment practices that favor specified individuals or groups),
- **Standard A3.16** (provided evidence that student admission decisions are made in accordance with clearly defined and published practices of the institution and program) and
- **Standard B1.08** (provided evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams).

Additional information (evidence of how stated preferences are factored into admissions decisions) due March 20, 2019.

### June 2018 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: March 2020 (Final Provisional). The program's maximum class size remains 52 for the third class.

Report due September 1, 2018 (*Standards*, 4<sup>th</sup> edition) -

- **Standard A1.03a** (lacked evidence the sponsoring institution is responsible for supporting the planning by program faculty in program assessment),
- **Standard A3.13** (lacked evidence the program announcements and advertising accurately reflect the program offered),
- **Standard A3.15a** (lacked evidence the program publishes admission and enrollment practices that favor specified individuals or groups),
- **Standard A3.16** (lacked evidence that student admission decisions are made in accordance with clearly defined and published practices of the institution and program) and
- **Standard B1.08** (lacked evidence the curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams).

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 A3.14a** (lacked evidence the program must defines, publishes and makes readily available to enrolled and prospective students general program information to include the program's ARC-PA accreditation status)
- **Standard A3.14e** (lacked evidence the program must defines, publishes and makes readily available to enrolled and prospective students general program information to include academic credit offered by the program)

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- **Standard A3.14f** (lacked evidence the program must defines, publishes and makes readily available to enrolled and prospective students general program information to include estimates of all costs (tuition, fees, etc.) related to the program)
- **Standard C1.02** (lacked evidence the program must applies the results of ongoing program self-assessment to the curriculum and other dimensions of the program)
- **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)
- **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)

### July 2016

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

- **Standard A3.08** (provided evidence the program informs students of written policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk). No further information requested.

### March 2016

Accreditation-Provisional; Next Comprehensive Evaluation: June 2018 (Provisional Monitoring). The program is approved for up to 52 students in the first class, 52 students in the second class and 52 in the third class.

Report due April 22, 2016 (*Standards*, 4<sup>th</sup> edition) -

- **Standard A3.08** (lacked evidence the program informs students of written policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk).

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 A1.02** (lacked evidence of written and signed agreements between the PA program and/or sponsoring institution and the clinical affiliates used for supervised clinical practice experiences that define the responsibilities of each party related to the educational program for students)
- **Standard D1.07** (lacked evidence the program identified prospective clinical sites sufficient in number to meet the needs of the number of anticipated students)