First accredited: September 2009

Next review: March 2027 Maximum class size: 60

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#### June 2023

Program Change: Increase maximum entering class size to 60 students, effective January 8, 2024. The commission **approved the program's proposed change.** No further information requested.

## September 2021

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

• **Standards C2.01b-f**, modified Self-Study Report (provided evidence of a self-study report that documented 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 further information requested.

#### September 2020

The commission accepted the report providing evidence of

 Follow up regarding 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.

Additional information (revised clinical syllabus) due June 17, 2020.

#### September 2019

The commission did not accept the report addressing 4th edition

• **Standards C2.01b-f**, modified Self-Study Report (lacked evidence of a self-study report that documented 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).

Additional information (standards C2.01b-f, modified Self-Study Report, with an emphasis on the continual program self-assessment process) due May 1, 2021.

#### September 2017

The commission accepted the report providing evidence of

• Updated website. No further information requested.

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

Standard A3.17f (provided evidence that policies and procedures for deceleration were
defined, published and readily available to students upon admission). No further
information requested.

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#### March 2017

Accreditation-Continued. Next Comprehensive Evaluation: March 2027. Maximum class size: 48. Reports due May 1, 2017 (*Standards*, 4<sup>th</sup> edition) –

- **Standard A3.17f** (lacked evidence that policies and procedures for deceleration were defined, published and readily available to students upon admission) and
- Update website with program's success in achieving goals.

Due April 1, 2019 (Standards, 4th edition) -

• **Standards C2.01b-f**, modified Self-Study Report (lacked evidence of a self-study report that documented 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).

#### September 2016

The program's PANCE pass rate for 2015 cohort was 82%. As pass rate was 82% or less, the program submitted required PANCE performance analysis report. The commission **accepted the report**. No further information requested.

#### March 2016

Program Change: Change in class size (24 to 48), effective January 4, 2016. The commission approved the change. No further information requested.

The commission accepted the report providing evidence of

• Updated website. No further information requested.

#### September 2015

Program Change: Change in class size (24 to 34, January 2016; 34 to 40, January 2017; and 40 to 48, January 2018). The commission **deferred approval** of the proposed class size increase. Additional information requested (report on discrepancy between approved class size and year two class and evidence of sufficient resources in the didactic and clinical years).

Report due October 28, 2015 (update website with success in achieving goals).

### September 2013

The commission accepted the report providing evidence of

• PANCE performance analysis. No further information requested.

## September 2012

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

 Standard A3.15e (provided evidence of the program making available to prospective students admission related information to include any required technical standards for enrollment),

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- **Standard C2.01b** (provided evidence of the self-study report documenting results of critical analysis from the ongoing self-assessment), and
- **Standard C3.04** (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 is prepared to enter clinical practice). No further information requested.

### March 2012

Accreditation-Continued; Next Comprehensive Evaluation: March 2017. Maximum Student Capacity: 72.

Reports due July 1, 2012 (Standards, 4th edition)

- Standard A3.15e (lacked evidence of the program making available to prospective students admission related information to include any required technical standards for enrollment),
- **Standard C2.01b** (lacked evidence of the self-study report documenting results of critical analysis from the ongoing self-assessment), and
- **Standard C3.04** (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 is prepared to enter clinical practice).

#### Due July 1, 2013

• PANCE performance analysis of first two graduating classes.

#### March 2011

The commission accepted the report providing evidence of

• Clinical sites. No further information requested.

## March 2010

The commission accepted the report addressing 3<sup>rd</sup> edition

- **Standard A3.07h** (provided evidence the ARC-PA accreditation status is defined, published and readily available to prospective and enrolled students),
- Standard D1.01 (provided evidence that student health records are confidential),
- Standard D1.02a (provided evidence that health screening and immunization of students is based on current CDC recommendations for health professionals),
- **Standard E1.12f** (provided evidence that qualified faculty in sufficient number have been identified for each course in the first 12 months of the program)
- **Standard E1.14** (provided evidence that prospective clinical sites sufficient in number have been identified) and
- The CV of the academic coordinator and a listing of all courses for the first 12 months. Additional information (update clinical sites grid) due December 31, 2010.

### September 2009

Accreditation-Provisional; Next Comprehensive Evaluation: March 2012. Maximum Student Capacity: 72.

First accredited: September 2009

Next review: March 2027 Maximum class size: 60

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Report due December 31, 2009 (Standards, 3rd edition) -

- **Standard A3.07h** (lacked evidence the ARC-PA accreditation status is defined, published and readily available to prospective and enrolled students),
- Standard D1.01 (lacked evidence that student health records are confidential),
- **Standard D1.02a** (lacked evidence that health screening and immunization of students is based on current CDC recommendations for health professionals),
- **Standard E1.12f** (lacked evidence that qualified faculty in sufficient number have been identified for each course in the first 12 months of the program)
- **Standard E1.14** (lacked evidence that prospective clinical sites sufficient in number have been identified) and
- Provide CV of academic coordinator and a listing of all courses for the first 12 months.