

Touro University (Long Island) Accreditation History

First accredited: March 1991

Next review: September 2027

Maximum class size: 97 (65 at Bay Shore [MC] and 32 at Winthrop [DC])

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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 **accepted the report**. No further information requested.

March 2022

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.

June 2020

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

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

June 2019

Program Change: Change in class size (65 to 75 at the main campus and 32 to 45 at the distant campus), effective August 2019. The commission could not take action based upon the documentation submitted, as the documentation lacked specificity to understand the rationale for the proposed change.

March 2019

Program Change: Change in class size (65 to 75 at the main campus and 32 to 45 at the distant campus), effective August 2019. The commission could not take action based upon the documentation submitted, as the documentation lacked specificity to understand the rationale for the proposed change.

September 2018

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

- Documentation SCPEs occur with preceptors practicing in behavioral and mental health and every student has/had a SCPE with the preceptors. No further information requested.

June 2018

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

- **Standard B3.07f** (provided some evidence of SCPEs with preceptors practicing in behavioral and mental health).

Additional information (data documenting SCPEs occur with preceptors practicing in behavioral and mental health and every student has/had a SCPE with the preceptors) due July 9, 2018.

March 2018

Program Change: Change in length of program (24 to 28 months), effective August 1, 2018. The commission **acknowledged the proposed change**. No further information requested.

July 2017

Accreditation-Continued; Next Comprehensive Evaluation: September 2027. Maximum class size: 97. Report due June 30, 2018 (*Standards*, 4th edition) -

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- **Standard B3.07f** (lacked evidence of supervised clinical practice experiences [SCPEs] with preceptors practicing in behavioral and mental health).

March 2015

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

- The updated Portal. No further information requested.

The commission noted the supervised clinical practice experiences (SCPEs) in ob/gyn and behavioral medicine in the Program Management Portal were insufficient to accommodate the maximum entering class size. Update SCPEs in the Program Management Portal due February 5, 2015.

September 2011

The commission **accepted the report** addressing 3rd/4th edition

NOTE: The review was conducted as the ARC-PA was transitioning from the 3rd to 4th edition of the *Standards*. The citations listing reflects the 3rd edition of the *Standards* and the corresponding standard in the 4th edition.

- **Standards A3.05/A3.16** (provided evidence admission of students is made in accordance with clearly defined and published practices of the institution and program),
- **Standards A3.07a/A3.15a** (provided evidence the program defines, publishes and makes readily available to prospective and enrolled students any institutional policies and practices that favor specific groups of applicants),
- **Standards A3.07d/A3.15d and e** (provided evidence the program defines, publishes and makes readily available to prospective and enrolled students required academic and technical standards),
- **Standards A3.13a/A3.19a** (provided evidence student files kept by the program include documentation that the student has met published admission criteria),
- **Standards C2.01b3/C2.01b** (provided evidence the self-study report documents student failure rates in individual courses and rotations) and
- **Standards D1.01/A3.21** (provided evidence student health records are confidential). No further information requested.

March 2011

Accreditation-Continued; Next Comprehensive Evaluation: March 2015. Maximum Student Capacity: 194.

Report due July 1, 2011 (*Standards*, 3rd/4th edition) -

NOTE: The review was conducted as the ARC-PA was transitioning from the 3rd to 4th edition of the *Standards*. The citations listing reflects the 3rd edition of the *Standards* and the corresponding standard in the 4th edition.

- **Standards A3.05/A3.16** (lacked evidence admission of students is made in accordance with clearly defined and published practices of the institution and program),
- **Standards A3.07a/A3.15a** (lacked evidence the program defines, publishes and makes readily available to prospective and enrolled students any institutional policies and practices that favor specific groups of applicants),

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- **Standards A3.07d/A3.15d and e** (lacked evidence the program defines, publishes and makes readily available to prospective and enrolled students required academic and technical standards),
- **Standards A3.13a/A3.19a** (lacked evidence student files kept by the program include documentation that the student has met published admission criteria),
- **Standards C2.01b3/C2.01b** (lacked evidence the self-study report documents student failure rates in individual courses and rotations) and
- **Standards D1.01/A3.21** (lacked evidence student health records are confidential).

March 2010

Based upon review of the additional information (prerequisite comparison for entering students and budget analysis), the commission **approved the proposed change** (dual degree). No further information requested.

September 2009

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

- Budget, tuition, admission requirements and comparison of old to new curriculum relative to the program change.

Additional information (prerequisite comparison for entering students and budget analysis) due December 31, 2009.

March 2009

Program Change: Change in academic degree (dual degree-Bachelor of Sciences and Master of Science), effective May 2009. The commission **did not acknowledge the change**. Additional information (budget, tuition, admission requirements and comparison of old to new curriculum) due July 1, 2009.

September 2008

The commission **accepted the report** addressing 3rd edition

- **Standard D1.01** (provided evidence student health records are confidential). No further information requested.

March 2008

Accreditation-Continued; Next Comprehensive Evaluation: March 2011. Maximum Student Capacity: 194.

Report due July 11, 2008 (*Standards*, 3rd edition) -

- **Standard D1.01** (lacked evidence student health records are confidential).

September 2006

Adverse Action-Accreditation-Probation; Next Comprehensive Evaluation: March 2008. Maximum Student Capacity: 194. The program appealed the commission's decision, which was upheld by the Appeal Review Panel.

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The following standards were identified (*Standards*, 2nd edition) -

- **Standard A1.4** (lacked evidence the sponsoring institution, together with its affiliates, are capable of providing clinically oriented basic science education as well as clinical instruction and experience requisite to PA education),
- **Standard A1.5b** (lacked evidence the sponsoring institution assumes primary responsibility for curriculum planning and selection of course content),
- **Standard A2.1** (lacked evidence the program has effective leadership and management),
- **Standard A2.10** (lacked evidence the program director is knowledgeable about the accreditation process and responsible for the organization, administration, continuous review and analysis, planning, and development of the program),
- **Standard B1.4** (lacked evidence for each didactic and clinical course, the program provides a clearly written course syllabus that includes measurable instructional objectives and expected student competencies),
- **Standard B3.1a** (lacked evidence the program provides instruction in personality development),
- **Standard B4.1d** (lacked evidence the program provides instruction on quality assurance and risk management in medical practice),
- **Standard B6.2g** (lacked evidence the program documents that every student has clinical experiences in psychiatry/behavioral medicine),
- **Standards C2.2a, c-e, g** (lacked evidence the self-study report incorporates critical analysis of
 - a) student attrition, deceleration, and remediation,
 - c) student failure rates in individual courses and rotations,
 - d) student evaluations of individual didactic courses, clinical experiences, and faculty,
 - e) timely surveys of graduates evaluating curriculum and program effectiveness and
 - g) evaluation of the most recent five-year aggregate student performance on the national certifying examination),
- **Standard C3.1** (lacked evidence results of ongoing program evaluation is reflected in the curriculum and other dimensions of the program),
- **Standards C4.1b and d** (lacked evidence the self-study report documents b) outcome data analysis and d) modifications that occurred as a result of self-evaluation) and
- **Standard D2.3** (lacked evidence the program provides referral for counseling of students with personal problems that may interfere with their progress in the program).

March 2003

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

- **Standard A5.1** (provided evidence announcements and advertisements accurately reflect all current sites offered by the program and their associated fees). No further information requested.

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September 2002

Accreditation-Continued; Next Comprehensive Evaluation: September 2006. Maximum Student Capacity: 180.

Report due January 15, 2003 (*Standards*, 2nd edition) -

- **Standard A5.1** (lacked evidence announcements and advertisements accurately reflect all current sites offered by the program and their associated fees).

March 2002

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

- Approval by the New York State Department of Education, faculty list, clerical support, signed affiliation agreement with Winthrop University Hospital, and their organizational structure. No further information requested.

September-December 2001

Program Change: New program director appointed.

Program Change: Relocated extension center from Coney Island Hospital to Winthrop University Hospital and Medical Center. Report requested for review in March 2001 (approval by the New York State Department of Education, list of faculty and their responsibilities, clerical support, a copy of the signed affiliation agreement with Winthrop University Hospital, and their organizational structure).

March 2001

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

- The program's plans and timeline for replacing core faculty and reassigning responsibilities, status of affiliation agreements, an update on the summary evaluation of students, the status of the employer survey and improvements in the self-study process. to related to the request to reschedule

The commission approved rescheduling the next site visit to May 2002.

November 2000

Program Change: Program director resigned December 16, 2000. Associate director appointed.

Program requested one-year delay in next on-site evaluation. Before granting, the commission requested a report addressing the program's plans and timeline for replacing core faculty and reassigning responsibilities, status of affiliation agreements, an update on the summary evaluation of students, the status of the employer survey and improvements in the self-study process

September 2000

Program Change: Name change (Touro College PA program now Touro College, Barry Z. Levine School of Physician Assistant Studies). The program located in Bay Shore and Brooklyn will now be known as the Bay Shore PA Program/Coney Island Extension Center. The program in New York City will be referred to as the Manhattan PA Program.

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NOTE: The ARC-PA commission action information available begins in September 2000. Information from initial accreditation in 1991 by CAHEA and subsequent accrediting organizations is not available.

The program was previously accredited from June 1973 to September 1990. No further information available.