

University of Dubuque Accreditation History

First accredited: March 2016

Next review: March 2032

Maximum class size: 30

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March 2023

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

- **Standard B1.03** (provided evidence that for each didactic and clinical course (including required and elective rotations), the program defines and publishes learning outcomes and instructional objectives, in measurable terms that can be assessed, and that guide student acquisition of required competencies)

June 2022

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards*. Next Comprehensive Evaluation: March 2031. Maximum class size: 30. Report due October 15, 2022 (*Standards*, 5th edition) -

- **Standard B1.03** (lacked evidence that for each didactic and clinical course (including required and elective rotations), the program defines and publishes learning outcomes and instructional objectives, in measurable terms that can be assessed, and that guide student acquisition of required competencies)

March 2022

Program Change: Change in graduation requirements (123 to 121 credits). The commission **did not approve the proposed change**. The program may resubmit a request for change in credits

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

- **Standard A2.01** (provided evidence that all faculty possess the educational and experiential qualifications to perform their assigned duties),
- **Standard A2.16a** (provided evidence all instructional faculty who serve as supervised clinical practice experience [SCPE] preceptors hold a valid license),
- **Standard B3.06a** (provided evidence SCPEs occur with physicians specialty board certified in their area of instruction) and
- **Standards B4.01a-b** (provided evidence student assessment in the supervised clinical practice experience components a) parallels what is expected of students and taught and b) allows the program to identify and address any student deficiencies timely). No further information requested.

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

- PANCE data updated in program management portal. No further information requested.

September 2021

Program Change: Change in graduation requirements (116 to 123 credits), effective January 1, 2022. The commission **approved the proposed change**. No further information requested.

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

- **Standard A2.01** (provided evidence that all faculty possess the educational and experiential qualifications to perform their assigned duties),

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- **Standard A2.16a** (provided evidence all instructional faculty who serve as supervised clinical practice experience [SCPE] preceptors hold a valid license),
- **Standard B3.06a** (provided evidence SCPEs occur with physicians specialty board certified in their area of instruction) and
- **Standards B4.01a-b** (provided evidence student assessment in the supervised clinical practice experience components a) parallels what is expected of students and taught and b) allows the program to identify and address any student deficiencies timely). No further information requested.

March 2021 (following Final Provisional and probation review)

Adverse Action-Accreditation-Probation; A focused probation site visit will need to occur in advance of the June 2022 commission meeting. The program's maximum class size remains 30.

Report due July 1, 2021 (*Standards*, 5th edition) -

- **Standard A2.01** (lacked evidence that all faculty possess the educational and experiential qualifications to perform their assigned duties),
- **Standard A2.16a** (lacked evidence all instructional faculty who serve as supervised clinical practice experience [SCPE] preceptors hold a valid license),
- **Standard B3.06a** (lacked evidence SCPEs occur with physicians specialty board certified in their area of instruction) and
- **Standards B4.01a-b** (lacked evidence student assessment in the supervised clinical practice experience components a) parallels what is expected of students and taught and b) allows the program to identify and address any student deficiencies timely).

Report due January 3, 2022 (*Standards*, 5th edition) -

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

June 2020

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

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

March 2020

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

- **Standard C3.01** (provided evidence the evaluation of students related to SCPEs paralleled the program's required learning outcomes).

September 2019

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

- **Standard A1.03c** (provided evidence the sponsoring institution is responsible for complying with ARC-PA accreditation *Standards* and policies),

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- **Standard A3.10** (provided evidence of written policies that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program),
- **Standard A3.13** (provided evidence the program announcements and advertising accurately reflect the program offered),
- **Standard B2.06** (provided evidence the program curriculum includes instruction in rehabilitative care),
- **Standard B2.12** (provided evidence the program curriculum includes instruction in disease surveillance, reporting and intervention),
- **Standard B3.02** (provided evidence of methods to determine, after supervised clinical practice experiences [SCPEs], that all students are able to meet the program's learning outcomes), and
- **Standards B3.03a-d** (provided evidence of methods to determine, after SCPEs, that all students are able to meet the program's learning outcomes with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions).

Additional information (standard C3.01, lacked evidence the evaluation of students related to SCPEs paralleled the program's required learning outcomes) due December 18, 2019.

March 2019 (following Provisional Monitoring review)

Adverse Action-Accreditation-Probation; Next Comprehensive Evaluation: March 2021 (Final Provisional). Maximum class size: 30. A focused probation site visit will occur in advance of the March 2021 commission meeting. The program did not appeal the commission's decision.

Report due June 7, 2019 (*Standards*, 4th edition) -

- **Standard A1.03c** (lacked evidence the sponsoring institution is responsible for complying with ARC-PA accreditation *Standards* and policies),
- **Standard A3.10** (lacked evidence of written policies that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program),
- **Standard A3.13** (lacked evidence the program announcements and advertising accurately reflect the program offered),
- **Standard B2.06** (lacked evidence the program curriculum includes instruction in rehabilitative care),
- **Standard B2.12** (lacked evidence the program curriculum includes instruction in disease surveillance, reporting and intervention),
- **Standard B3.02** (lacked evidence of methods to determine, after supervised clinical practice experiences [SCPEs], that all students are able to meet the program's learning outcomes), and
- **Standards B3.03a-d** (lacked evidence of methods to determine, after SCPEs, that all students are able to meet the program's learning outcomes with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions).

June 2018

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

- SCPE data updated in the Program Management Portal. No further information requested.

Program Change: Change in graduation requirements (95 to 116 credits), effective August 1, 2018. The commission **acknowledged the proposed change**. No further information requested.

March 2018

The commission **did not accept the report** providing evidence of

- Sufficient SCPE placements in pediatrics. Report due April 30, 2018 (update SCPE data in the Portal identifying sufficient SCPE placements).

October 2017

The commission noted the number of SCPEs was not sufficient to support the first-year clinical students. Report due October 17, 2017 (update Portal or provide explanation related to insufficient SCPEs).

September 2017

The program was contacted by the commission to correct the number of students listed in the Program Management Portal and to enter data in the Portal related to the supervised clinical practice experiences (SCPEs) available to students in the clinical year. The Portal to be reviewed by the commission in October 2017.

July 2017

Program Change: Change in graduation requirements: (93 to 95 credits), effective January 2, 2018. The commission **acknowledged the proposed change**. No further information requested.

September 2016

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

- **Standard A3.20** (provided evidence that PA students do not have access to the academic records or other confidential information of other students or faculty) and
- **Standard B1.08** (provided evidence the program curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams). No further information requested.

March 2016

Accreditation-Provisional; Next Comprehensive Evaluation: March 2019 (Provisional Monitoring). The program is approved for up to 25 students in the first class of students, 25 in the second class and 30 in the third class.

Report due June 15, 2016 (*Standards*, 4th edition) -

- **Standard A3.20** (lacked evidence that PA students do not have access to the academic records or other confidential information of other students or faculty) and
- **Standard B1.08** (lacked evidence the program curriculum includes opportunities for students to apply principles of interprofessional practice in interprofessional teams).