

## University of Evansville Accreditation History

First accredited: September 2016

Next review: March 2031

Maximum class size: 40

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### March 2023

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.

### September 2021

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

- **Standard B2.06** (provided evidence the curriculum includes instruction in preparing students to evaluate their own values and avoid stereotyping),
- **Standard B2.07f** (provided evidence the curriculum provides students instruction related to referral),
- **Standard B2.11** (provided evidence the curriculum provides students instruction related to response to injury),
- **Standard B2.12c** (provided evidence the curriculum provides students instruction related to counseling and patient education skills focused on helping patients develop coping mechanisms),
- **Standard B2.16d** (provided evidence the curriculum provides students instruction related to risk management) and
- **Standard B2.17a** (provided evidence the curriculum provides students instruction related to credentialing). No further information requested.

### March 2021 (following Final Provisional review)

Accreditation-Continued; Next Comprehensive Evaluation: March 2031. Maximum class size: 40 .

Report due June 1, 2021 (*Standards*, 5<sup>th</sup> edition) -

- **Standard B2.06** (lacked evidence the curriculum includes instruction in preparing students to evaluate their own values and avoid stereotyping),
- **Standard B2.07f** (lacked evidence the curriculum provides students instruction related to referral),
- **Standard B2.11** (lacked evidence the curriculum provides students instruction related to response to injury),
- **Standard B2.12c** (lacked evidence the curriculum provides students instruction related to counseling and patient education skills focused on helping patients develop coping mechanisms),
- **Standard B2.16d** (lacked evidence the curriculum provides students instruction related to risk management) and
- **Standard B2.17a** (lacked evidence the curriculum provides students instruction related to credentialing).

Report due December 15, 2022 (*Standards*, 5<sup>th</sup> edition) -

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- **Standard C1.03** (lacked evidence the self-study report effectively documents results of faculty evaluation of the curricular aspects of the program from 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.

### September 2019

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

- **Standard A3.15a** (provided evidence the program makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),
- **Standard B3.02** (provided evidence of methods to determine, after supervised clinical practice experiences, that all students are able to meet the program's learning outcomes), and
- **Standards B3.03a-d** (provided evidence of clearly defined learning outcomes and methods to determine students, after 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 have attained the expected learning outcomes). No further information requested.

### March 2019 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: March 2021 (Final Provisional). The program is approved for up to 40 students in the third class.

Report due May 24, 2019 (*Standards*, 4<sup>th</sup> edition) -

- **Standard A3.15a** (lacked evidence the program makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),
- **Standard B3.02** (lacked evidence of methods to determine, after supervised clinical practice experiences, that all students are able to meet the program's learning outcomes), and
- **Standards B3.03a-d** (lacked evidence of clearly defined learning outcomes and methods to determine students, after 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 have attained the expected learning outcomes).

### March 2018

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.

### March 2017

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

- **Standard A3.15a** (provided evidence the program makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),
- **Standards B3.03a-d** (provided evidence supervised clinical practice experience provide sufficient patient exposure with patients seeking a) medical care across the life span, b) women's health,

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c) surgical management and d) behavioral and mental health conditions to allow each student to meet program expectations) and

- **Standard C3.01** (provided evidence that student evaluations in the didactic and supervised clinical education practice curriculum parallel the required learning outcomes). No further information requested.

### September 2016

Accreditation-Provisional; Next Comprehensive Evaluation: March 2019 (Provisional Monitoring). The program is approved for up to 20 students in the first class of students, 30 in the second class and 40 in the third class.

Report due December 9, 2016 (*Standards*, 4<sup>th</sup> edition) -

- **Standard A3.15a** (lacked evidence the program makes readily available to prospective students admission and enrollment practices that favor specified individuals or groups),
- **Standards B3.03a-d** (lacked evidence supervised clinical practice experience provide sufficient patient exposure with patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions to allow each student to meet program expectations) and
- **Standard C3.01** (lacked evidence that student evaluations in the didactic and supervised clinical education practice curriculum parallel the required learning outcomes).