

University of South Carolina Accreditation History

First accredited: September 2016
Next review: June 2031
Maximum class size: 30
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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.

June 2023

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

- **Standard C1.03** modified Self-Study Report (mSSR) (provided evidence the self-study report accurately and succinctly documents the application and results of ongoing program self-assessment).

No further information requested.

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 2022

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

- **Standard A3.12d** (provided evidence the program defines, publishes and makes readily available to enrolled and prospective students all required curricular components including required rotation disciplines),
- **Standard A3.15b** (provided evidence the defines, publishes, consistently applies and makes readily available to students deadlines for program completion) and
- **Standard B4.01b** (provided evidence the program conducts student evaluations in the supervised clinical practice experience components that allow the program to address any student deficiencies in a timely manner).

No further information requested.

September 2021

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 2021

Accreditation-Continued; Next Comprehensive Evaluation: June 2031. Maximum Class Size: 30.

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

- **Standard A3.12d** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students all required curricular components including required rotation disciplines),
- **Standard A3.15b** (lacked evidence the defines, publishes, consistently applies and makes readily available to students deadlines for program completion) and

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- **Standard B4.01b** (lacked evidence the program conducts student evaluations in the supervised clinical practice experience components that allow the program to address any student deficiencies in a timely manner).

Report due March 15, 2023 (*Standards*, 5th edition) -

- **Standard C1.03** modified Self-Study Report (mSSR) (lacked evidence the self-study report accurately and succinctly documents the application and results of ongoing program self-assessment).

September 2020

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

- The program's deceleration policy and website updated with PANCE pass rate data. 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

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),
- **Standard A2.09g** (provided evidence the program director is knowledgeable about and responsible for program participation in the accreditation process),
- **Standard A3.15a** (provided evidence the program makes readily available to prospective students 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),
- **Standards A3.17e-f** (provided evidence the program defines, publishes and makes readily available to students upon admission policies and procedures for e) withdrawal and dismissal and f) remediation and deceleration),
- **Standards A3.19a-b** (provided evidence that student files include documentation that the student has met a) published admission criteria including advanced placement if awarded and b) institution and program health screening and immunization requirements),
- **Standards B3.03b-d** (provided evidence of methods to determine, after supervised clinical practice experiences, that all students are able to meet the program's learning outcomes with patients seeking b) women's health, c) surgical management and d) behavioral and mental health conditions),
- **Standard C3.01** (provided evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes) and
- **Standard C3.04** (provided evidence the program's planned summative evaluation of each student correlates with the didactic and clinical components of the program's curriculum).

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Additional information (evidence of deceleration policy and update website with PANCE pass rate data) due May 20, 2020.

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

- An updated website with the program's success in achieving its goals. No further information requested.

June 2019 (following Provisional Monitoring review)

Adverse Action-Accreditation-Probation. A focused probation site visit will need to occur in advance of the June 2021 commission meeting. The maximum approved class size is 30 students per class. The program did not appeal the commission's decision.

Report due August 12, 2019

- Update program website with program's success in achieving its goals.

Due September 6, 2019 (*Standards*, 4th edition) -

- **Standard A1.03c** (lacked evidence the sponsoring institution is responsible for complying with ARC-PA accreditation *Standards* and policies),
- **Standard A2.09g** (lacked evidence the program director is knowledgeable about and responsible for program participation in the accreditation process),
- **Standard A3.15a** (lacked evidence the program makes readily available to prospective students 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),
- **Standards A3.17e-f** (lacked evidence the program defines, publishes and makes readily available to students upon admission policies and procedures for e) withdrawal and dismissal and f) remediation and deceleration),
- **Standards A3.19a-b** (lacked evidence that student files include documentation that the student has met a) published admission criteria including advanced placement if awarded and b) institution and program health screening and immunization requirements),
- **Standards B3.03b-d** (lacked evidence of methods to determine, after supervised clinical practice experiences, that all students are able to meet the program's learning outcomes with patients seeking b) women's health, c) surgical management and d) behavioral and mental health conditions),
- **Standard C3.01** (lacked evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes) and
- **Standard C3.04** (lacked evidence the program's planned summative evaluation of each student correlates with the didactic and clinical components of the program's curriculum).

January 2017

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

- **Standard C4.02** (provided evidence the program documents that each clinical site provides the student access to physical facilities and supervision necessary to fulfill program expectations of the clinical experience). No further information requested.

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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 30 in the third class.

Report due October 17, 2016 (*Standards*, 4th edition) -

- **Standard C4.02** (lacked evidence the program documents that each clinical site provides the student access to physical facilities and supervision necessary to fulfill program expectations of the clinical experience).