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September 2024

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with most ARC-PA *Standards*. The commission noted one area of noncompliance with the *Standards*.

Next Comprehensive Evaluation: September 2032. Maximum class size: 60.

No report due (commission expects program to submit all reports and documents as required by the ARC-PA with the initial submission):

• **Standard C1.03** (lacked evidence the program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment and that follows the guidelines provided by the ARC-PA)

The commission accepted the report providing evidence of

• description of the process used to verify all supervised clinical practice experiences occur with physicians who are board certified in their area of instruction or description of why the requirement cannot be met and a table of all currently active physician preceptors

No further information requested.

<u>June 2024</u>

The commission deferred its decision regarding the report providing evidence of

description of the process used to verify all supervised clinical practice experiences occur with
physicians who are board certified in their area of instruction or description of why the
requirement cannot be met and a table of all currently active physician preceptors

until the program's probation review at the September 2024 commission meeting, at which time the commission will review the report in conjunction with the results of the focused probation visit. No further information requested.

September 2023

The commission reviewed and more information requested of the report providing evidence of

 url where program defines, publishes, and makes readily evidence of its effectiveness in meeting its goals and description of evaluation process the programs uses to determine physicians who are not specialty board certified or not board certified in their area of instruction are appropriate for the specified area of instruction

Additional information (description of the process used to verify all supervised clinical practice experiences occur with physicians who are board certified in their area of instruction or description of why the requirement cannot be met and a table of all currently active physician preceptors) due February 1, 2024

March 2023

The commission acknowledged the report providing evidence of

• Updates to the PANCE pass rate data in the Program Management Portal and on the program's website. No further information requested.

The commission reviewed and more information requested of the report addressing 5th edition

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- **Standard A3.12b** (lacked evidence program defines, publishes and makes readily available to enrolled and prospective students, general program information to include evidence of its effectiveness in meeting its goals)
- **Standard B3.06a** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)

Additional information (url where program defines, publishes, and makes readily evidence of its effectiveness in meeting its goals and description of evaluation process the programs uses to determine physicians who are not specialty board certified or not board certified in their area of instruction are appropriate for the specified area of instruction) due May 15, 2023.

September 2022

Adverse Action-Accreditation-Probation Extended due to the incomplete progress made by the program in demonstrating compliance with the *Standards*. A focused probation site visit will occur in advance of the September 2024 commission meeting. The program's maximum class size remains 60. The commission's decision is not appealable.

Report due November 15, 2022:

• Update website and portal with the most recent NCCPA PANCE Pass Rate Summary Report. Report due December 16, 2022 (*Standards*, 5th edition):

- **Standard A3.12b** (lacked evidence the program defines, publishes, and makes readily available to enrolled and prospective students, general information to include evidence of its effectiveness in meeting its goals)
- **Standard B3.06a** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board certified in their area of instruction)

Report due April 15, 2024 (Standards, 5th edition):

• **Standard C1.03**, modified Self-Study Report (lacked evidence program prepares a self-study report as part of the application for accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment)

No report due for the following citation(s) (commission expects program to submit all reports and documents as required by the ARC-PA with the initial submission):

- **Standard A3.11** (lacked evidence the sponsoring institution and program's announcements and advertising accurately reflects the program offered)
- **Standard A3.12a** (lacked evidence program defines, publishes and makes readily available to enrolled and prospective students, general program information to include the program's ARC-PA accreditation status as provided to the program by the ARC-PA)
- **Standard E1.03** (lacked evidence the program submits reports and documents as required by the ARC-PA)

The program's PANCE pass rate percentage was 85% or less for its 2021 cohort. The program submitted the required analysis of PANCE performance. The commission **reviewed and more information requested** the report. Additional information (how the program correlates analysis of PANCE content and task area student performance with the effectiveness of its curriculum) due November 29, 2022.

March 2022

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The commission acknowledged the report providing evidence of

• Website updated with the program's success in meeting its goals. No further information requested.

September 2021

The commission accepted the report providing evidence of

• Student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes for emergent, acute and chronic patient encounters and with patients seeking medical care across the life span, in women's health and in surgical management. No further information requested.

Report due November 23, 2021 (Standards, 5th edition) -

• **Standard A3.12b** (lacked evidence the program publishes and makes readily available to enrolled and prospective students evidence of its effectiveness in meeting its goals).

The commission **reviewed the findings of the virtual site visit.** No further information requested.

<u>June 2021</u>

The commission **did not accept the report** addressing 5th edition

- **Standards C2.01a-c** (lacked evidence the program documents the evaluation process to ensure all sites and preceptors meet program defined learning outcomes related to a) physical facilities, b) patient populations and c) supervision) and
- **Standard E1.03** (lacked evidence the program submits reports and documents as required by the ARC-PA).

Virtual focused visit to occur before September 2021 commission meeting.

The commission acknowledged the report providing evidence of

• Website updated with the latest NCCPA PANCE Exam Performance Summary Report. No further information requested.

March 2021

The commission reviewed and more information requested the report addressing 5th edition

• **Standard B4.01** (lacked evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes for emergent, acute and chronic patient encounters and with patients seeking medical care across the life span, in women's health and in surgical management). Report due May 14, 2021.

September 2020

Adverse Action-Accreditation-Probation; A focused probation visit will occur in advance of the September 2022 commission meeting. The program's maximum class size remains 60. Report due January 11, 2021 (*Standards*, 5th edition) -

• **Standards C2.01a-c** (lacked evidence the program documents the evaluation process to ensure all sites and preceptors meet program defined learning outcomes related to a) physical

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facilities, b) patient populations and c) supervision) and

• **Standard E1.03** (lacked evidence the program submits reports and documents as required by the ARC-PA).

March 2020 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: September 2022 (Final Provisional). The program's maximum class size remains 60 for the third class. Report due November 18, 2020 (*Standards*, 4th edition) -

- **Standard B3.02** (lacked evidence of clearly defined learning outcomes for students in supervised clinical practice experiences [SCPEs] that enable students to meet the program's learning outcomes for emergent, acute and chronic patient encounters),
- **Standards B3.03a-c** (lacked evidence of clearly defined learning outcomes and a mechanism to determine students, after SCPEs with patients seeking a) medical care across the life span, b) women's health and c) surgical management, have met the learning outcomes) and
- **Standard C3.01** (lacked evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes).

March 2019

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

Accreditation-Provisional; Next Comprehensive Evaluation: March 2020 (Provisional Monitoring). The program is approved for up to 40 students in the first class of students, 50 in the second class and 60 in the third class. The commission noted zero areas of noncompliance with the *Standards*.