

## Sacred Heart University Accreditation History

First accredited: March 2016

Next review: March 2031

Maximum class size: 42

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### September 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 **reviewed and more information requested** for the report. Additional information (detailed action plan that includes the areas in need of improvement, following implementation related to the conclusions drawn from the data analysis as presented) due November 20, 2024.

### June 2022

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

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

No further information requested.

### March 2022

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

- Narrative describing how program ensures all required clinical and technical skills identified on list are performed to meet learning outcomes in a timely manner in order to remediate any deficiencies.

No further information requested.

### September 2021

The commission **reviewed and more information requested** for the report addressing 5<sup>th</sup> edition

- **Standard A1.02** (provided evidence the sponsoring institution is responsible for supporting program faculty in program assessment),
- **Standard A3.10** (provided evidence the program defines and publishes written procedures that provide for timely access and/or referral of students to services addressing personal issues),
- **Standard B3.06a** (provided evidence that supervised clinical practice experiences 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).

Additional information (narrative describing how program ensures all required clinical and technical skills identified on list are performed to meet learning outcomes in a timely manner in order to remediate any deficiencies) due September 13, 2021.

### June 2021

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 (following Final Provisional review)

Accreditation-Continued; Next Comprehensive Evaluation: March 2031. Maximum class size: 42.

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

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- **Standard A3.12c** (lacked evidence the most current annual NCCPA PANCE Exam Performance Summary Report is published on the program website).

Report due June 15, 2021 (*Standards*, 5<sup>h</sup> edition) -

- **Standard A1.02** (lacked evidence the sponsoring institution is responsible for supporting program faculty in program assessment),
- **Standard A3.10** (lacked evidence the program defines and publishes written procedures that provide for timely access and/or referral of students to services addressing personal issues),
- **Standard B3.06a** (lacked evidence that supervised clinical practice experiences 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 March 15, 2022 (*Standards*, 5<sup>h</sup> edition) -

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

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

- Analysis of Class of 2019 PANCE performance. 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.

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

- Summary of July 2019 meeting including PANCE analysis and recommendations for improvement. No further information requested.

### March 2020

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

- Learning outcomes addressing preventive, emergent, acute and chronic care as well as care across the life span, women's health, surgical management and behavioral and mental health, and the methods to determine each student has met the learning outcomes. No further information requested.

The program's PANCE pass rate percentage was 85% or less for its 2018 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. Additional reports (summary of July 2019 meeting including analysis and recommendations for improvement) due January 6 and (analysis of class of 2019 PANCE performance) due July 13, 2020.

### September 2019

The commission **did not accept the report** addressing 4<sup>th</sup> edition

- **Standard B2.12** (lacked evidence the curriculum included instruction in disease surveillance and reporting),

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- **Standard B3.02** (lacked evidence of defined learning outcomes for students in supervised clinical practice experiences [SCPEs] with preventive, emergent, acute and chronic patient encounters),
- **Standards B3.03a-d** (lacked evidence that SCPEs enabled all students to meet the program's learning outcomes for patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions) and
- **Standard C1.01** (lacked evidence of implementation of an ongoing program self-assessment process which documented program effectiveness and fostered program improvement).

Additional information (learning outcomes addressing preventive, emergent, acute and chronic care as well as care across the life span, women's health, surgical management and behavioral and mental health, plus the methods to determine each student has met the learning outcomes) due September 30, 2019.

### March 2019 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: March 2021 (Final Provisional). The program is approved for up to 42 students in the third class.

Report due June 12, 2019 (*Standards*, 4<sup>th</sup> edition) -

- **Standard B2.12** (lacked evidence the curriculum included instruction in disease surveillance and reporting),
- **Standard B3.02** (lacked evidence of defined learning outcomes for students in supervised clinical practice experiences [SCPEs] with preventive, emergent, acute and chronic patient encounters),
- **Standards B3.03a-d** (lacked evidence that SCPEs enabled all students to meet the program's learning outcomes for patients seeking a) medical care across the life span, b) women's health, c) surgical management and d) behavioral and mental health conditions) and
- **Standard C1.01** (lacked evidence of implementation of an ongoing program self-assessment process which documented program effectiveness and fostered program improvement).

### March 2016

Accreditation-Provisional; Next Comprehensive Evaluation: March 2019 (Provisional Monitoring). The program is approved for up to 28 students in the first class of students, 34 in the second class and 42 in the third class. The commission noted zero areas of noncompliance with the *Standards*.