

## University of Iowa Emergency Medicine Physician Assistant Residency Accreditation History

First accredited: June 2021

Next review: June 2031

Maximum class size per cohort: 3 (4 eff. 2.1.25)

Number of cohorts per year: 1

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### September 2024

Program Change: Increase maximum entering class size to 4 students, effective February 1, 2025. The commission **approved the program's proposed change**. No further information requested.

### June 2024

Accreditation-Clinical Postgraduate Program; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards* after completion of the provisional review process. Next Comprehensive Evaluation: June 2031. The program is approved for up to three (3) students per cohort with one (1) entering cohort per year.

The program received a Warning Letter regarding documentation of the self-assessment process.

Report due February 1, 2026 (*Standards*, 3<sup>rd</sup> edition) modified self-study report:

- **Standard C1.01a** (lacked evidence the program defines its ongoing self-assessment process that is designed to document program effectiveness and foster program improvement and addresses administrative aspects of the program and institutional resources)
- **Standard C1.02bi** (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data leading to conclusions that identify program strengths)
- **Standard C1.02bii** (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data leading to conclusions that identify program areas in need of improvement)
- **Standard C1.02biii** (lacked evidence the program implements its ongoing self-assessment process by performing critical analysis of data leading to conclusions that identify action plans to address the areas in need of improvement)
- **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 follows the guidelines provided by the ARC-PA)

No report due (program provided evidence of compliance after site visit but was not in compliance at time of visit):

- **Standard A4.06** (lacked evidence the program clearly defines and publishes the admission requirements and practices upon which admissions decisions are made)
- **Standard E1.04** (lacked evidence the program submits surveys and reports as required by the ARC-PA)

### March 2023

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

- program's documentation of the components of its ongoing self-assessment process

No further information requested.

### March 2022

The commission **Reviewed and More Information Requested** the report addressing 3<sup>rd</sup> edition

- **Standard C1.02** (lacked evidence the program accurately and succinctly documents the components of its ongoing self-assessment process)

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Additional information (describe the program's documentation of the components of its ongoing self-assessment process) due October 21, 2022.

### September 2021

The commission **accepted** the report addressing 3<sup>rd</sup> edition

- **Standard B1.06** (provided evidence the program provides each PA trainee a written syllabus that includes instructional objectives that guide PA trainees towards acquisition of learning outcomes and required competencies).

### June 2021

Accreditation-Clinical Postgraduate Program; Next Comprehensive Evaluation: June 2024. The program is approved for up to three (3) students per cohort.

Report due August 20, 2021 (*Standards*, 3<sup>rd</sup> edition):

- **Standard B1.06** (lacked evidence the program provides each PA trainee a written syllabus that includes instructional objectives that guide PA trainees towards acquisition of learning outcomes and required competencies)

Report due December 1, 2021 (*Standards*, 3<sup>rd</sup> edition):

- **Standard C1.02** (lacked evidence the program accurately and succinctly documents the components of its ongoing self-assessment process)

No report due (program provided evidence of compliance after site visit but was not in compliance at time of visit):

- **Standard A4.06** (lacked evidence the program defines and publishes the admission requirements and practices upon which admissions decisions are made; corrected subsequent to the visit)