

Emory & Henry College Accreditation History

First accredited: March 2017
Next review: September 2031
Maximum class size: 40
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March 2025

The commission **did not accept** the report providing evidence of

- documentation of critical analysis for the 2022 cohort PANCE report

Additional information (modified Appendix 14 SSR that reports PANCE performance data from the Class of 2022, 2023 and 2024) due October 6, 2025.

The program's PANCE pass rate percentage was 85% or less for its 2023 cohort. The program submitted the required follow-up analysis of PANCE performance. The commission **did not accept** the report. Additional information (modified Appendix 14 SSR that reports PANCE performance data from the Class of 2022, 2023 and 2024) due October 1, 2025.

Report due May 1, 2025:

- Update NCCPA PANCE Exam Performance Summary Report (All Test Takers) for the last 5 years on the program's website

The program received a **Warning Letter** regarding not demonstrating analysis of PANCE performance despite receiving feedback from the ARC-PA and its ability to implement self-assessment to identify areas needing improvement and appropriate action plans to foster better program outcomes.

June 2024

The program's PANCE pass rate percentage was 85% or less for its 2022 cohort. The program submitted the required follow-up analysis of PANCE performance. The commission **reviewed and more information requested** of the report.

Additional information (documentation of critical analysis) due no later than August 19, 2024.

March 2024

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

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

No further information requested.

The program's PANCE pass rate percentage was 85% or less for its 2022 cohort. The program submitted the required analysis of PANCE performance. The commission **reviewed and more information requested** of the report.

Additional information (resubmission of PANCE Required Report) due no later than February 1, 2024.

August 2023

Accreditation-Administrative Probation removed. The Annual Accreditation Fee was received in full in August 2023. Administrative-Probation removed post receipt of fee.

July 2023

Accreditation-Administrative Probation. The Annual Accreditation Fee was due July 1, 2023.

March 2022

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

- **Standard A2.09g** (provided evidence the program director is knowledgeable about and responsible for completion of ARC-PA required documents)

No additional information requested.

September 2021 (following Final Provisional review)

Accreditation-Continued; Next Comprehensive Evaluation: September 2031. The program is approved for a maximum class size of 40.

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

- **Standard A2.09g** (lacked evidence the program director is knowledgeable about and responsible for completion of ARC-PA required documents).

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

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

No report due (*Standards*, 5th edition) -

- **Standard A2.16a-b** (lacked evidence the program verifies and documents all instructional faculty who serve as supervised clinical practice experience preceptors hold a) a valid license that allows them to practice at the clinical site and b) a valid certification that allows them to practice in the area of instruction; corrected subsequent to the visit),
- **Standard B3.06a-c** (lacked evidence supervised clinical practice experiences occur with a) physicians who are specialty board certified in their area of instruction, b) NCCPA certified PAs and c) other licensed health care providers qualified in their area of instruction; corrected subsequent to the visit) and
- **Standard E1.03** (lacked evidence the program submits reports or documents as required by ARC-PA; corrected subsequent to the visit).

June 2021

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

- How the program determines each student met the expected learning outcomes for prenatal and gynecologic care, and pre-, intra- and post-operative care. No further information requested.

March 2021

The commission **received and more information requested** on the report addressing 4th edition

- **Standard C1.01** (provided evidence of the full implementation of an ongoing program self-assessment process which documents program effectiveness and fosters program improvement) and
- **Standard C3.01** (lacked evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes).

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Additional information (narrative describing how the program determines each student met the expected learning outcomes for prenatal and gynecologic care, and pre-, intra- and post-operative care) due March 29, 2021.

September 2020

The program's PANCE pass rate percentage was 85% or less for its 2019 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

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

- The update regarding changes in response to COVID-19. 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.

Program Change: Change in requirements for graduation (rotation length increased from four to six weeks), effective August 1, 2020. The commission **acknowledged the proposed change**. No further information requested.

March 2020

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

- **Standard B1.09** (provided evidence for each clinical course, the program defines instructional objectives that guide student acquisition of required competencies),
- **Standard B3.02** (provided evidence of clearly defined learning outcomes for students in supervised clinical practice experiences [SCPEs] for acute and chronic patient encounters and a method to determine that students meet the learning outcomes)
- **Standards B3.03a-d** (provided evidence of program 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 met the learning outcomes),
- **Standard B3.06a** (provided evidence of SCPEs with physicians specialty board certified in their area of instruction) and
- **Standard C1.01** (provided some evidence of implementation of an ongoing program self-assessment process which documents program effectiveness and fosters program improvement).

Report due May 1, 2020

- Update NCCPA PANCE Pass Rate Summary Report on the program's website.

Report due November 20, 2020 (*Standards*, 4th edition) -

- **Standard C1.01** (lacked evidence of the full implementation of an ongoing program self-assessment process which documents program effectiveness and fosters program improvement) and

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- **Standard C3.01** (lacked evidence that student evaluations in the supervised clinical education practice curriculum parallel the required learning outcomes).

September 2019 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: September 2021 (Final Provisional). The program's maximum class size remains 40 for the third class.

Report due December 18, 2019 (*Standards*, 4th edition) -

- **Standard B1.09** (lacked evidence for each clinical course, the program defines instructional objectives that guide student acquisition of required competencies),
- **Standard B3.02** (lacked evidence of clearly defined learning outcomes for students in supervised clinical practice experiences [SCPEs] for acute and chronic patient encounters and a method to determine that students meet the learning outcomes)
- **Standards B3.03a-d** (lacked evidence of program 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 met the learning outcomes),
- **Standard B3.06a** (lacked evidence of SCPEs with physicians specialty board certified in their area of instruction) and
- **Standard C1.01** (lacked evidence of implementation of an ongoing program self-assessment process which documents program effectiveness and fosters program improvement).

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

- **Standard C1.02** (lacked evidence the program applies the results of ongoing program self-assessment to the curriculum and other dimensions of the program)
- **Standard C2.01b** (lacked evidence the program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of critical analysis from the ongoing self-assessment)
- **Standard C2.01c** (lacked evidence the program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and faculty evaluation of the curricular and administrative aspects of the program)
- **Standard C2.01d** (lacked evidence the program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and modifications that occurred as a result of self-assessment)
- **Standard C2.01e** (lacked evidence the program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and self-identified program strengths and areas in need of improvement)
- **Standard C2.01f** (lacked evidence the program prepares a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and plans for addressing areas needing improvement)

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Accreditation-Provisional; Next Comprehensive Evaluation: September 2019 (Provisional Monitoring).
The program is approved for up to 30 students in the first class of students, 34 in the second class and 40 in the third class. The commission noted zero areas of noncompliance with the *Standards*.