

## Franklin Pierce University – Goodyear, AZ Hybrid Program Accreditation History

First accredited: June 2022

Next review: TBD

Maximum class size: 48

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### March 2025

Pending finalization of commission action

### June 2023

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

- The process used by the program to verify all supervised clinical practice experiences occur with physicians who are board certified in their area of instruction,

No further information requested.

### March 2023

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

- **Standard A3.12d** (provided evidence of defining and publishing curricular components to be made readily available to enrolled and prospective students d) all required curricular components including required rotation disciplines),
- **Standard A3.13a** (provided evidence of defining and publishing admissions process to be made readily available to prospective students a) admission and enrollment practices that favor specified individuals or groups),
- **Standard A3.14** (provided evidence student admission decisions made in accordance with clearly defined and published practices of the institution and program),
- **Standard B3.06a** (lacked evidence that all supervised clinical practice experiences (SCPEs) occur with a) physicians who are specialty board certified in their area of instruction),
- **Standard B4.01b** (provided evidence of student assessment in the supervised clinical practice experience (SCPE) components b) allow the program to identify and address any student deficiencies in a timely manner),
- **Standard D1.04e** (provided evidence each course and rotation syllabus included e) learning outcomes and instructional objectives) and
- **Standard D1.04g** (provided evidence of providing detailed information for each course and rotation offered in the program including g) methods of student assessment/evaluation) -

Additional information (process used by the program 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 can't be met) due March 2, 2023.

### June 2022

Accreditation-Provisional; Program has not yet enrolled students but plans and resource allocation, if fully implemented as planned, demonstrate the probability to meet the ARC-PA *Standards*. Next Comprehensive Evaluation: March 2025 (Provisional Monitoring). The program is approved for up to 48 students.

Report due September 1, 2022 (*Standards*, 5<sup>th</sup> edition) -

- **Standard A3.12d** (lacked evidence of defining and publishing curricular components to be made readily available to enrolled and prospective students d) all required curricular components including required rotation disciplines),

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- **Standard A3.14** (lacked evidence student admission decisions made in accordance with clearly defined and published practices of the institution and program),
- **Standard B3.06a** (lacked evidence that all supervised clinical practice experiences (SCPEs) occur with a) physicians who are specialty board certified in their area of instruction),
- **Standard B4.01b** (lacked evidence of student assessment in the supervised clinical practice experience (SCPE) components b) allow the program to identify and address any student deficiencies in a timely manner),
- **Standard D1.04e** (lacked evidence each course and rotation syllabus included e) learning outcomes and instructional objectives) and
- **Standard D1.04g** (lacked evidence of providing detailed information for each course and rotation offered in the program including g) methods of student assessment/evaluation) -

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

- **Standard D1.02c** (lacked evidence that it informed, in writing, everyone who requested information or planned to enroll of c) the implications of non-accreditation by the ARC-PA; the program stated the website is the primary source for the implications of non-accreditation statement) and
- **Standard E1.03** (lacked evidence the program submits reports or documents as required by the ARC-PA).