

Idaho State University Accreditation History

First accredited: April 1997

Next review: March 2035

Maximum class size: 72 (30 at MC, 30 at Meridian and 12 at Caldwell)

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March 2025

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with most ARC-PA *Standards*. The commission noted 0 areas of noncompliance with the *Standards*.

Next Comprehensive Evaluation: March 2035. Maximum class size: 72 (30 at MC, 30 at Meridian and 12 at Caldwell).

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.

September 2024

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.

June 2024

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

- clarification of sufficient principal faculty at Meridian campus

No further information requested.

Program Change: Temporarily increase maximum entering class size to 76 students in order to admit students from a closing program. The commission **reviewed and more information requested** of the proposed change.

Additional information (clarification of sufficient principal faculty at Meridian campus) due by April 29, 2024.

August 2023

Accreditation-Administrative Probation removed. The Annual Accreditation Fee was received in full in August 2022. Administrative-Probation removed post receipt of fee.

July 2023

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

March 2023

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.

June 2021

Program Change: Change in class size (one-time temporary increase from 72 to 74 students for year-two cohort), effective June 1, 2021. The commission **approved the proposed change**. No further information requested.

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March 2021

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

- Documentation of how each student met the program's learning outcomes. No further information requested.

June 2020

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

- The proposed plan in response to COVID-19.

Additional information (documentation of how each student meets the program's learning outcomes) due August 7, 2020.

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

- Adequacy of lab spaces, faculty to student ratios by campus and budget plan by campus. No further information requested.

March 2020

Program Change: Change in program support (decrease in physical space). The commission **acknowledged the proposed change**. Additional information (clarification of adequacy of lab spaces, faculty to student ratios by campus and budget plan by campus) due February 28, 2020.

May 2016

The program was notified of a change in the accreditation process (time extended between regularly scheduled validation reviews from seven to ten years). Program's next validation review changed from March 2022 to March 2025 due to this change.

March 2016

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

- **Standard A1.09** (provided evidence the sponsoring institution provides the program physical facilities to operate the educational program to fulfill obligations to matriculating and enrolled students). No further information requested.

September 2015

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

- The website update and correction of the Portal. No further information requested.

March 2015

Accreditation-Continued; Next Comprehensive Evaluation: March 2022. Class size remains 72; 30 at the main campus in Pocatello, 30 at the distant campus in Meridian, and 12 at the distant campus in Caldwell.

Report due April 20, 2015

- Update website and correct Program Management Portal.

Due December 4, 2015 (*Standards*, 4th edition) -

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- **Standard A1.09** (lacked evidence the sponsoring institution provides the program physical facilities to operate the educational program to fulfill obligations to matriculating and enrolled students).

September 2014

Program Change: Change in graduation requirements (increase from 88 to 120), effective August 2014. The commission **acknowledged the proposed change**. No further information requested.

September 2013

Program Change: Distant Campus application (distant campus in Caldwell, ID), effective August 2014. The commission **approved the proposed change**. The program is approved to accept up to a class size of 12 at the distant campus in addition to the class size of 30 at the main campus in Pocatello, ID and the class size of 30 at the distant campus in Meridian, ID. No further information requested.

September 2010

Program Change: Change in class size (100 to 120), effective August 2010. The commission **acknowledged the proposed change**. No further information requested.

March 2010

The commission **accepted the report** addressing 3rd edition

- **Standard B7.03c** (provided evidence of documentation that every student has supervised clinical practice experiences [SCPEs] with patients seeking care for conditions requiring inpatient surgical management),
- **Standard B7.04e** (provided evidence SCPEs occur in long-term care settings) and
- **Standard B7.05d** (provided evidence SCPEs occur with residency trained physicians or other licensed health care professionals experienced in general surgery). No further information requested.

March 2009

Accreditation-Continued; Next Comprehensive Evaluation: March 2015. Maximum Student Capacity: 100.

Report due January 8, 2010 (*Standards*, 3rd edition) -

- **Standard B7.03c** (lacked evidence of documentation that every student has supervised clinical practice experiences [SCPEs] with patients seeking care for conditions requiring inpatient surgical management), and
- **Standard B7.05d** (lacked evidence SCPEs occur with residency trained physicians or other licensed health care professionals experienced in general surgery).

Due January 7, 2011 (*Standards*, 3rd edition) -

- **Standard B7.04e** (lacked evidence SCPEs occur in long-term care settings).

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September 2006

Program Change: Class size expansion to 100 (maximum student enrollment), effective August 2007. The commission **acknowledged the proposed change**. No further information requested.

March 2006

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

- Clarification of learning objectives. No further information requested.

March 2005

The commission **acknowledged the report** addressing 2nd edition

- **Standard B1.4** (provided evidence for each didactic and clinical course of a clearly written course syllabus that includes measurable instructional objectives and expected student competencies),
- **Standard B4.1d** (provided evidence that program curriculum provides instruction in quality assurance and risk management in medical practice),
- **Standard C1.1** (provided evidence of a formal self-evaluation process),
- **Standard C2.1** (provided evidence of securing information on student and graduate outcomes) and
- **Standards C2.2a, e-f** (provided evidence self-study reports include critical analysis of a) student attrition, deceleration, and remediation, e) timely surveys of graduates evaluating curriculum and program effectiveness and f) surveys of employers on such matters as employment settings, scope of practice, graduate competence, and suggestions for curriculum improvement) and
- Providing evidence of syllabi and learning objectives, summary of course content, timeline for continuous self-study and analysis of student problems. Additional information (clarification of learning objectives) due January 13, 2006.

March 2004

Accreditation-Continued; Next Comprehensive Evaluation: March 2009. Maximum Student Capacity: 60. Report due January 17, 2005 (*Standards*, 2nd edition) –

- **Standard B1.4** (lacked evidence for each didactic and clinical course of a clearly written course syllabus that includes measurable instructional objectives and expected student competencies),
- **Standard B4.1d** (lacked evidence that program curriculum includes instruction in quality assurance and risk management in medical practice),
- **Standard C1.1** (lacked evidence of a formal self-evaluation process),
- **Standard C2.1** (lacked evidence of securing information on student and graduate outcomes) and
- **Standards C2.2a, e-f** (lacked evidence self-study reports include critical analysis of a) student attrition, deceleration, and remediation, e) timely surveys of graduates evaluating curriculum and program effectiveness and f) surveys of employers on such matters as employment settings, scope of practice, graduate competence, and suggestions for curriculum improvement) and
- Syllabi and learning objectives, summary of course content, timeline for continuous self-study and analysis of student problems.

March 2003

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Program Change: Change in degree awarded (baccalaureate to a master's curriculum). The commission **acknowledged the proposed change**. Report due (any changes to the clinical year curriculum and confirm hiring of additional faculty).

September 2000

The commission **accepted the report** addressing 1st edition

- **Standard I D 1 f** (provided evidence of published policies preventing students from substituting for regular staff),
- **Standard I E 1 c** (provided evidence of analysis of graduate surveys and conduct of employer surveys),
- **Standard I E 1 e** (provided evidence of analysis of student evaluations of courses and programs),
- **Standard I E 3** (provided evidence of an analytical self-study) and
- **Standard II B 1 e** (provided evidence of analysis that students at family practice sites acquire sufficient clinical practice experiences). No further information requested.

March 2000

Accreditation-Continued; Next Comprehensive Evaluation: March 2004.

Report due August 1, 2000 (*Standards*, 1st edition) -

- **Standard I D 1 f** (lacked evidence of published policies preventing students from substituting for regular staff),
- **Standard I E 1 c** (lacked evidence of analysis of graduate surveys and conduct of employer surveys),
- **Standard I E 1 e** (lacked evidence of analysis of student evaluations of courses and programs),
- **Standard I E 3** (lacked evidence of an analytical self-study) and
- **Standard II B 1 e** (lacked evidence of analysis that students at family practice sites acquire sufficient clinical practice experiences).

NOTE: The ARC-PA commission action information available begins in March 2000. Information from initial accreditation in 1997 by the American Medical Association Council on Medical Education and subsequent accrediting organizations is not available.