

Saint Elizabeth University Accreditation History

First accredited: June 2019

Next review:

Maximum class size: 50

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March 2025

Pending finalization of commission action

The commission **reviewed and more information requested of the report** addressing 5th edition

- **Standard A1.11a** (lacked evidence the sponsoring institution demonstrates its commitment to student, faculty and staff diversity, equity and inclusion by supporting the program in defining its goal(s) for diversity, equity, and inclusion)
- **Standard A2.09g** (lacked evidence the program director is knowledgeable about and responsible for completion of ARC-PA required documents)
- **Standard B4.01b** (lacked evidence that the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that allow the program to identify and address any student deficiencies in a timely manner)
- **Standard C2.01b** (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to patient populations)

Additional information (how the program identifies and addresses any student deficiencies within the clinical curriculum in a timely manner, learning outcomes/instructional objectives and evaluation tool(s) for each required SCPE and process utilized for initial and ongoing evaluation of clinical sites used for SCPEs) due September 1, 2025

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 **did not accept the report**.

Additional information (revised and resubmitted Attrition Required Report) due September 1, 2025.

September 2024

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

- Updates to the program's Program Management Portal.

No further information requested.

March 2024 (following Final Provisional review)

Accreditation-Continued; Program has demonstrated continued and sufficient compliance with the ARC-PA *Standards* after completion of the provisional review process. Next Comprehensive Evaluation:

March 2034. Maximum class size: 50.

Report due May 1, 2024:

- Update student enrollment information in the Program Management Portal.

Report due October 1, 2024 (*Standards*, 5th edition):

- **Standard A1.11a** (lacked evidence the sponsoring institution demonstrates its commitment to student, faculty and staff diversity, equity and inclusion by supporting the program in defining its goal(s) for diversity, equity, and inclusion)

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- **Standard A2.09g** (lacked evidence the program director is knowledgeable about and responsible for completion of ARC-PA required documents)
- **Standard B4.01b** (lacked evidence that the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that allow the program to identify and address any student deficiencies in a timely manner)
- **Standard C2.01b** (lacked evidence the program defines and maintains effective processes and documents the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences, to ensure students are able to fulfill program learning outcomes with access to patient populations)

Report due October 1, 2025 (*Standards*, 5th edition) modified self-study report:

- **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)

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

- **Standard B3.06c** (lacked evidence supervised clinical practice experiences occur with other licensed health care providers qualified in their area of instruction)
- **Standard E1.03** (lacked evidence program submits reports or documents as required by the ARC-PA)

September 2022

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

- **Standard A2.16a** (provided evidence the program verifies and documents that all instructional faculty actively serving as supervised clinical practice experience preceptors hold a valid license that allows them to practice at the clinical site)
- **Standard B3.06a** (provided evidence supervised clinical practice experiences occur with physicians who are board specialty certified in their area of instruction)
- **Standard B4.01a** (provided evidence that the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that align with what is expected and taught)

No further information requested.

March 2022 (following Provisional Monitoring review)

Accreditation-Provisional; Program demonstrates continued progress in complying with the *Standards* as it prepares for the graduation of the first class of students. Next Comprehensive Evaluation: March 2024 (Final Provisional). Maximum class size: 50.

Report due May 11, 2022 (*Standards*, 5th edition):

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- **Standard A2.16a** (lacked evidence the program verifies and documents that all instructional faculty actively serving as supervised clinical practice experience preceptors hold a valid license that allows them to practice at the clinical site)
- **Standard B3.06a** (lacked evidence supervised clinical practice experiences occur with physicians who are board specialty certified in their area of instruction)
- **Standard B4.01a** (lacked evidence that the program conducts frequent, objective and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components that align with what is expected and taught)

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

- **Standard C1.02c.ii.** (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify program areas in need of improvement)
- **Standard C1.02c.iii.** (lacked evidence the program implements its ongoing self-assessment process by applying the results leading to conclusions that identify action plans)
- **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)

June 2021

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

- 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 program length (27 to 28 months) effective August 30, 2021. The commission **acknowledges the proposed change**. No further information requested.

March 2020

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

- **Standard C3.01** (provided evidence of student evaluations related to supervised clinical education components paralleling the required learning outcomes). No further information requested.

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

- **Standard B1.08** (provided evidence the curriculum provides opportunities for all students to apply principles of interprofessional practice in an interprofessional team setting). No further information requested.

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June 2019

Accreditation-Provisional; Next Comprehensive Evaluation: TBD (Provisional Monitoring). The program is approved for up to 50 students in the first class of students, 50 in the second class and 50 in the third class.

Report due August 14, 2019 (*Standards*, 4th edition) -

- **Standard B1.08** (lacked evidence the curriculum provides opportunities for all students to apply principles of interprofessional practice in an interprofessional team setting).

Due December 3, 2019 (*Standards*, 4th edition) -

- **Standard C3.01** (lacked evidence of student evaluations related to supervised clinical education components paralleling the required learning outcomes).