South University - Austin Accreditation History

First accredited: September 2022

Next review: March 2027 Maximum class size: 40

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March 2025 (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. The commission noted 0 areas of noncompliance with the *Standards*.

Next Comprehensive Evaluation: March 2027 (Final Provisional). Maximum class size: 40.

March 2024

The commission accepted the report providing evidence of

 How the program ensures students are enabled to meet all the learning outcomes for Behavioral Medicine SCPE in a telemedicine setting.

No further information requested.

September 2023

The commission reviewed and requested additional information from the report providing evidence of

• Resubmitted Appendix 11a SCPE Excel spreadsheet with all active clinical sites/preceptors that the program plans to utilize for all required and elective rotations sufficient for its approved maximum class size, signed affiliation agreements for each clinical site or preceptor listed in Appendix 11a, how the program plans to ensure that SCPEs occur with preceptors who enable students to meet program defined leaning outcomes for behavioral and mental health care, SCPE expected learning outcomes for behavioral and mental health care, and how the program plans to document equivalency of student evaluation methods and outcomes for students who complete a behavioral medicine SCPE with a preceptor in a "telemedicine" setting vs. a clinical setting

Additional information (how the program ensures students are enabled to meet all the learning outcomes for Behavioral Medicine SCPE in a telemedicine setting) due December 1, 2023.

March 2023

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

- **Standard A1.01** (lacked evidence that when more than one institution is involved in the provision of academic and/or clinical education, responsibilities of the respective institutions for instruction and supervision of students are clearly described and documented in a manner signifying agreement by the involved institutions)
- **Standard A2.14** (provided evidence that in addition to the principal faculty, there is sufficient didactic instructional faculty to provide students with the necessary attention and instruction to acquire the knowledge, skills, and competencies required for entry into the profession)
- **Standard B3.06c** (provided evidence supervised clinical practice experiences occur with other licensed health care providers qualified in their area of instruction)

Additional information (resubmit Appendix 11a SCPE Excel spreadsheet with all active clinical sites/preceptors that the program plans to utilize for all required and elective rotations sufficient for its approved maximum class size, signed affiliation agreements for each clinical site or preceptor listed in Appendix 11a, how the program plans to ensure that SCPEs occur with preceptors who enable students to meet program defined leaning outcomes for behavioral and mental health care, SCPE expected learning outcomes for behavioral and mental health care, and how the program plans to document

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equivalency of student evaluation methods and outcomes for students who complete a behavioral medicine SCPE with a preceptor in a "telemedicine" setting vs. a clinical setting) due May 15, 2024.

September 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 40 students.

Report due December 22, 2022 (Standards, 5th edition) -

- **Standard A1.01** (lacked evidence that when more than one institution is involved in the provision of academic and/or clinical education, responsibilities of the respective institutions for instruction and supervision of students are clearly described and documented in a manner signifying agreement by the involved institutions)
- **Standard A2.14** (lacked evidence that in addition to the principal faculty, there is sufficient didactic instructional faculty to provide students with the necessary attention and instruction to acquire the knowledge, skills, and competencies required for entry into the profession)
- **Standard B3.06c** (lacked evidence supervised clinical practice experiences occur with c) other licensed health care providers qualified in their area of instruction)

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

• **Standard B4.01a** (lacked evidence that program planned to conduct frequent, objective and documented student assessment in the supervised clinical practice experience (SCPE) components to a) align with what is expected and taught; corrected subsequent to the visit)