

St. Bonaventure University Accreditation History

First accredited: March 2020
Next review: June 2025
Maximum class size: 25/35/40
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March 2025

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

- Data demonstrating the analysis of the content and task areas of PACKRAT 1, 2, EOC, and PANCE leading to conclusion regarding infectious disease; data and analysis supporting the need to improve pharmacology education & pharmacy cards as a grading component for SCPE rotations; and data and analysis supporting the use of keywork feedback for EOR exams

No further information requested.

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

- Program clearly defines, publishes, and makes readily available to students upon admission, policies, and procedures for deceleration related to students who are decelerated for academic reasons.

No further information requested.

June 2024

The commission **reviewed and more information requested** of the report providing evidence of

- Program's strategies for recruitment of faculty, staff, and students in the context of diversity, equity, and inclusion and evidence of institutional support in implementing those strategies; evidence that the program clearly defines, publishes, and makes readily available to students upon admission, policies, and procedures for deceleration related to students who are decelerated for academic reasons; how the program aligns student assessment with what the program expects of a student on supervised clinical practice experiences [SCPEs]; and how the preceptor evaluation allows the program to identify and address any student deficiencies in the expected learning outcomes and instructional objectives in a timely manner especially for clinical/technical skills found in the instructional objectives for each SCPE)

Additional information (evidence that the program clearly defines, publishes, and makes readily available to students upon admission, policies, and procedures for deceleration related to students who are decelerated for academic reasons) due July 12, 2024.

The program's PANCE pass rate percentage was 85% or less for its 2023 cohort. The program submitted the required analysis of PANCE performance. The commission **did not accept the report**. Additional information (data demonstrating the analysis of the content and task areas of PACKRAT 1, 2, EOC, and PANCE leading to conclusion regarding infectious disease; data and analysis supporting the need to improve pharmacology education & pharmacy cards as a grading component for SCPE rotations; and data and analysis supporting the use of keywork feedback for EOR exams) due July 4, 2024.

March 2024

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

- **Standard A1.11b** (lacked evidence the sponsoring institution demonstrates its commitment to student, faculty and staff diversity, equity, and inclusion by supporting the program in implementing recruitment strategies)

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- **Standard A1.11c** (provided evidence the sponsoring institution demonstrates its commitment to student, faculty and staff diversity and inclusion by supporting the program in implementing retention strategies)
- **Standard A3.15c** (lacked evidence the program defines, publishes, consistently applies and makes readily available to students upon admission policies and procedures for remediation and deceleration)
- **Standard B3.06a** (provided evidence supervised clinical practice experiences occur with physicians who are specialty board 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)
- **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)

Additional information (program's strategies for recruitment of faculty, staff, and students in the context of diversity, equity, and inclusion and evidence of institutional support in implementing those strategies; evidence that the program clearly defines, publishes, and makes readily available to students upon admission, policies, and procedures for deceleration related to students who are decelerated for academic reasons; how the program aligns student assessment with what the program expects of a student on supervised clinical practice experiences [SCPEs]; and how the preceptor evaluation allows the program to identify and address any student deficiencies in the expected learning outcomes and instructional objectives in a timely manner especially for clinical/technical skills found in the instructional objectives for each SCPE) due February 1, 2024.

Report due February 1, 2024:

- Update PANCE report on program website

June 2023 (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: June 2025 (Final Provisional). Maximum class size: 40.

Report due October 1, 2023 (*Standards*, 5th edition):

- **Standard A1.11b** (lacked evidence the sponsoring institution demonstrates its commitment to student, faculty and staff diversity, equity, and inclusion by supporting the program in implementing recruitment strategies)
- **Standard A1.11c** (lacked evidence the sponsoring institution demonstrates its commitment to student, faculty and staff diversity and inclusion by supporting the program in implementing retention strategies)
- **Standard A3.15c** (lacked evidence the program defines, publishes, consistently applies and makes readily available to students upon admission policies and procedures for remediation and deceleration)

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- **Standard B3.06a** (lacked evidence supervised clinical practice experiences occur with physicians who are specialty board 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)
- **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)

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

- **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)
- **Standard E1.03** (lacked evidence program submits reports or documents as required by the ARC-PA)

September 2020

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

- **Standards A3.14f-g** (provided evidence the program defines, publishes and makes readily available to enrolled and prospective students f) estimates of all costs [tuition, fees, etc.] related to the program and g) policies and procedures for refunds of tuition and fees) and
- **Standard A3.15a** (provided evidence the program defines admission and enrollment practices that favor specified individuals or groups). No further information requested.

March 2020

Accreditation-Provisional; Next Comprehensive Evaluation: TBD (Provisional Monitoring).

The program is approved for up to 25 students in the first class of students, 35 in the second class and 40 in the third class.

Report due June 17, 2020 (*Standards*, 4th edition) -

- **Standards A3.14f-g** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students f) estimates of all costs [tuition, fees, etc.] related to the program and g) policies and procedures for refunds of tuition and fees) and
- **Standard A3.15a** (lacked evidence the program defines admission and enrollment practices that favor specified individuals or groups).