

University of the Cumberland Accreditation History

First accredited: September 2014

Next review: March 2029

Maximum class size: 30

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March 2025

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

- Identification of areas in need of improvement based on the program's data analysis and action plans to address the areas in need of improvement which are identified by the program's process of ongoing self-assessment, tabular or graphical displays of data reflecting the program's analysis of the areas in need of improvement.

No further information requested.

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 program's student attrition rate was 10.9% or greater for its 2023 cohort. The program submitted the Student Attrition Required Report. The commission **reviewed and requested more information from the report**. Additional information (identify areas in need of improvement based on the program's data analysis and action plans to address the areas in need of improvement which are identified by the program's process of ongoing self-assessment, tabular or graphical displays of data reflecting the program's analysis of the areas in need of improvement) due July 30, 2024.

September 2022

The program's PANCE pass rate percentage was 85% or less for its 2021 cohort. The program submitted the required analysis of PANCE performance. The commission **accepted the report**. No further information requested.

September 2021

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

- **Standards C2.01b, d and e** (provided evidence of a self-study report that documents b) results of critical analysis from the ongoing self-assessment, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement). No further information requested.

March 2021

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.

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

- Updates regarding 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.

March 2019 (following Final Provisional review)

Accreditation-Continued; Next Comprehensive Evaluation: March 2029. Maximum class size: 30. Report due May 2, 2021 (*Standards*, 4th edition) -

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- **Standards C2.01b, d and e** (lacked evidence of a self-study report that documents b) results of critical analysis from the ongoing self-assessment, d) modifications that occurred as a result of self-assessment and e) self-identified program strengths and areas in need of improvement).

September 2017

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

- **Standard B3.03b** (provided evidence supervised clinical practice experiences [SCPEs] enable each student to meet the program expectations and acquire the competencies needed for entry into clinical PA practice with patients seeking women's health) and
- **Standard B3.07e** (provided evidence of SCPEs with preceptors practicing in ob/gyn). No further information requested.

March 2017 (following Provisional Monitoring review)

Accreditation-Provisional; Next Comprehensive Evaluation: March 2019 (Final Provisional). The program's maximum class size remains 30 for the third class.

Report due May 19, 2017 (*Standards*, 4th edition) -

- **Standard B3.03b** (lacked evidence supervised clinical practice experiences [SCPEs] enable each student to meet the program expectations and acquire the competencies needed for entry into clinical PA practice with patients seeking women's health) and
- **Standard B3.07e** (lacked evidence of SCPEs with preceptors practicing in ob/gyn).

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.

March 2015

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

- **Standard A3.17f** (provided evidence the program defines, publishes and makes readily available to students upon admission policies and procedures for remediation and deceleration),
- **Standard B1.09** (provided evidence for each didactic and clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies),
- **Standard B2.06** (provided evidence the program curriculum includes instruction in rehabilitative medicine),
- **Standard C1.01** (provided evidence of an ongoing self-assessment process designed to document program effectiveness and foster program improvement),
- **Standard C1.02** (provided evidence the program plans to apply the results of ongoing program self-assessment to the curriculum and other dimensions of the program) and
- **Standard C3.01** (provided evidence student evaluations are to relate to the required learning outcomes). No further information requested.

September 2014

Accreditation-Provisional; Next Comprehensive Evaluation: March 2017 (Provisional Monitoring). The program is approved for up to 30 students in the first class of students, 30 in the second class and 30 in the third class.

Report due January 9, 2015 (*Standards*, 4th edition) -

- **Standard A3.17f** (lacked evidence the program defines, publishes and makes readily available to students upon admission policies and procedures for remediation and deceleration),

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- **Standard B1.09** (lacked evidence for each didactic and clinical course, the program defines and publishes instructional objectives that guide student acquisition of required competencies),
 - **Standard B2.06** (lacked evidence the program curriculum includes instruction in rehabilitative medicine),
 - **Standard C1.01** (lacked evidence of an ongoing self-assessment process designed to document program effectiveness and foster program improvement),
 - **Standard C1.02** (lacked evidence the program plans to apply the results of ongoing program self-assessment to the curriculum and other dimensions of the program) and
 - **Standard C3.01** (lacked evidence student evaluations are to relate to the required learning outcomes).
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The program was accredited from September 2009 through May 2013.

March-May 2013

Adverse Action-Accreditation-Withdrawn.

The commission **did not accept the reports** addressing 4th edition

- **Standard A3.14c** (lacked evidence the program published the PANCE Pass Rate Summary Report on website) and
- PANCE performance analysis.

Response raised additional concerns related to (*Standards*, 4th edition) -

- **Standard A3.14d** (lacked evidence the program defines, publishes and makes readily available to enrolled and prospective students all required curricular components),
- **Standards A3.17b and c** (lacked evidence the program defines, publishes and makes readily available to students upon admission b) completion deadlines related to curricular components and c) requirements for progression in and completion of the program),
- **Standard C3.01** (lacked evidence the program conducts frequent, objective and documented evaluations of students related to learning outcomes for the supervised clinical education components) and
- **Standard C3.04** (lacked evidence the program conducts and documents a summative evaluation of each student within the final four months of the program to verify that each student is prepared to enter clinical practice).

The program appealed the commission's decision. The Reconsideration Review Panel upheld the commission's decision. The program voluntarily withdrew as of May 29, 2013.

September 2012

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

- Updated information in the Portal.

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

- **Standard B3.03b** (provided evidence supervised clinical practice experiences (SCPEs) provide sufficient patient exposure with patients seeking women's health) and

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- **Standard B3.06a** (provided evidence of SCPEs with physicians specialty board certified in their area of instruction).

Additional information (PANCE performance analysis [pass rate for class of 2012 was 57%] and 4th edition standard A3.14c, lacked evidence the program published the PANCE Pass Rate Summary Report on website) due December 31, 2012.

Program Change: Change in maximum student capacity (48 to 96), effective May 2013. The commission **did not acknowledge the proposed change.**

March 2012

Accreditation-Continued. Next Comprehensive Evaluation: March 2015. Maximum Student Capacity: 48. Report due April 20, 2012

- Update information in the Program Management Portal.

Report due July 1, 2012 (*Standards*, 4th edition) -

- **Standard B3.03b** (lacked evidence supervised clinical practice experiences (SCPEs) provide sufficient patient exposure with patients seeking women's health) and
- **Standard B3.06a** (lacked evidence of SCPEs with physicians specialty board certified in their area of instruction).

September 2010

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

- How favored applicants are defined and updated information on supervised clinical practice experiences. No further information requested.

March 2010

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

- **Standard A3.07a** (provided evidence the program defines, publishes and makes readily available to prospective and enrolled students any institutional policies and practices that favor specific groups of applicants),
- **Standard C1.01b** (provided evidence the program collects and analyzes faculty attrition),
- **Standard E1.01** (provided evidence the sponsoring institution authorized the development of the PA program) and
- **Standard E1.14** (provided evidence the program has identified prospective clinical sites sufficient in number to meet the needs of students).

Additional information (define favored applicants and update information on supervised clinical practice experiences) due July 7, 2010.

September 2009

Accreditation-Provisional; Next Comprehensive Evaluation: March 2012. Maximum Student Capacity: 48. Report due December 31, 2009 (*Standards*, 3rd edition) -

- **Standard A3.07a** (lacked evidence the program defines, publishes and makes readily available to prospective and enrolled students any institutional policies and practices that favor specific groups of applicants),
- **Standard C1.01b** (lacked evidence the program collects and analyzes faculty attrition),
- **Standard E1.01** (lacked evidence the sponsoring institution authorized the development of the PA program) and

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- **Standard E1.14** (lacked evidence the program has identified prospective clinical sites sufficient in number to meet the needs of students).