

# Ongoing Assessment Plan

### Overview

The Michigan State University College of Osteopathic Medicine’s Department of PA Medicine has created an Ongoing Assessment Plan that reflects the ability of the program to collect and interpret evidence of student learning, as well as program administrative functions and outcomes. The Ongoing Assessment Plan incorporates the study of both quantitative and qualitative performance data collected and critically analyzed by the program. The MSUCOM PA Medicine program gives careful thought to data collection, management and interpretation. The Ongoing Assessment Plan shows that outcome measures are used in concert with thoughtful evaluation about the results, the relevance of the data and the potential for improvement or change.

The MSUCOM PA Medicine program developed three department committees – Promotion, Curriculum, and Admissions – that were charged by the program director to provide summative reports that will empower students, faculty, and staff to provide input and also make the needed changes within the PA Medicine program based on a continuous review and analysis plan. The PA Medicine Program strategic planning process will annually review the program as part of the Ongoing Assessment Plan which will be submitted in the annual report to the MSUCOM Dean, Office of Academic Programs and the College Curriculum Committee regarding the PA Medicine curriculum, student outcomes and administrative functions.

MSUCOM PA Medicine Ongoing Assessment Plan Graphic Overview:  
<https://pa.com.msu.edu/curriculum/continuous-program-assessment-plan>

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Curriculum Committee

### Overview

The goal of the PA Medicine Curriculum Committee is to ensure that the PA Medicine Curriculum is of sufficient depth and breadth to prepare graduates for practice and to achieve program student outcomes. This committee will ensure that the curriculum prepares students to provide patient centered care and collegially work in Physician-PA teams in an interprofessional team environment. The curriculum establishes a strong foundation in evidence-based medicine and emphasizes the importance of remaining current with the changing nature of clinical practice. The professional curriculum for PA education includes applied medical, behavioral and social sciences; patient assessment and clinical medicine; supervised clinical practice; and health policy and professional practice issues.

The Curriculum Committee has structured semester and annual data collection processes to ensure compliance with ARC-PA Standards. The PA Medicine Curriculum Committee will perform semester reviews and provide annual reports to the Program Director which are included in the program annual report to the MSUCOM Dean, Office of Academic Programs and the College Curriculum Committee regarding the PA Medicine curriculum and student outcomes.

### Committee Structure

Chair: Preclinical Coordinator

Voting Members: All PA Medicine faculty who are Course Instructors of Record within the PA Medicine Curriculum.

Ex Officio Members: PA Medicine Program Director

### ARC-PA Standards Reviewed and Addressed by this Committee

| **Frequency** | **ARC-PA Standard** |
| --- | --- |
| Semester | A2.15 The program should not rely primarily on resident physicians for didactic or clinical instruction. |
| Annual | A2.16 All instructional faculty serving as supervised clinical practice experience preceptors must hold a valid license that allows them to practice at the clinical site. |
| Annual | A2.17 In each location to which a student is assigned for didactic instruction or supervised clinical practice experiences, there must be an instructional faculty member designated by the program to assess and supervise the student's progress in achieving learning outcomes. |
| Semester | A3.05 Students must not substitute for or function as instructional faculty. |
| Semester | A3.06 Students must not substitute for clinical or administrative staff during supervised clinical practical experiences. |
| Annual | B1.01 The curriculum must be consistent with the mission and goals of the program. |
| Annual | B1.02 The curriculum must include core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care. |
| Annual | B1.03 The curriculum must be of sufficient breadth and depth to prepare the student for the clinical practice of medicine. |
| Annual | B1.04 The curriculum design must reflect sequencing that enables students to develop the competencies necessary for current and evolving clinical practice. |
| Annual | B1.05 The curriculum must include instruction about intellectual honesty and appropriate academic and professional conduct. |
| Annual | B1.06 The curriculum must include instruction to prepare students to provide medical care to patients from diverse populations. |
| Annual | B1.07 The curriculum must include instruction related to the development of problem solving and medical decision-making skills. |
| Annual | B1.08 The curriculum must include instruction to prepare students to work collaboratively in interprofessional patient centered teams. |
| Semester | B1.09 For each didactic and clinical course, the program must define and publish instructional objectives that guide student acquisition of required competencies. |
| Semester | B1.10 The program should orient instructional faculty to the specific learning outcomes it requires of students. |
| Annual | B1.11 The program must ensure educational equivalency of course content, student experience and access to didactic and laboratory materials when instruction is: |
| a)      conducted at geographically separate locations and/or |
| b)      provided by different pedagogical and instructional methods or techniques for some students. |
| Annual | B2.01 While programs may require specific course(s) as prerequisites to enrollment, those prerequisites must not substitute for more advanced applied content within the professional component of the program. |
| Annual | B2.02 The program curriculum must include instruction in the following areas of applied medical sciences and their application in clinical practice: |
| a)      anatomy, |
| b)      physiology, |
| c)      pathophysiology, |
| d)      pharmacology and pharmacotherapeutics, |
| e)      the genetic and molecular mechanisms of health and disease. |
| Annual | B2.03 The program curriculum must include instruction in clinical medicine covering all organ systems. |
| Annual | B2.04 The program curriculum must include instruction in interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families and other health professionals. |
| Annual | B2.05 The program curriculum must include instruction in patient evaluation, diagnosis and management. |
| Annual | B2.06 The program curriculum must include instruction in the provision of clinical medical care across the life span. |
| Annual | B2.07 The program curriculum must include instruction in technical skills and procedures based on current professional practice. |
| Annual | B2.08 The program curriculum must include instruction in the social and behavioral sciences as well as normal and abnormal development across the life span. |
| Annual | B2.09 The program curriculum must include instruction in basic counseling and patient education skills. |
| Annual | B2.10 The program curriculum must include instruction to prepare students to search, interpret and evaluate the medical literature, including its application to individualized patient care. |
| Annual | B2.11 The program curriculum must include instruction in health care delivery systems and health policy. |
| Annual | B2.12 The program curriculum must include instruction in concepts of public health as they relate to the role of the practicing PA. |
| Annual | B2.13 The program curriculum must include instruction in patient safety, quality improvement, prevention of medical errors and risk management. |
| Annual | B2.14 The program curriculum must include instruction about PA licensure, credentialing and laws and regulations regarding professional practice. |
| Annual | B2.15 The program curriculum must include instruction regarding reimbursement, documentation of care, coding and billing. |
| Annual | B2.16 The program curriculum must include instruction in the principles and practice of medical ethics. |
| Annual | B2.17 The program curriculum must include instruction in the PA profession, its historical development and current trends. |
| Annual | B3.01 PA students must be clearly identified in the clinical setting to distinguish them from physicians, medical students and other health profession students and graduates. |
| Annual | B3.02 Supervised clinical practice experiences must enable all students to meet the program’s learning outcomes expected of students, to include preventive, emergent, acute, and chronic patient encounters. |
| Annual | B3.03 Supervised clinical practice experiences must enable all students to meet the program’s learning outcomes expected of students, for patients seeking: |
| a)      medical care across the life span to include, infants, children, adolescents, adults, and the elderly, |
| b)      women’s health (to include prenatal and gynecologic care), |
| c)      care for conditions requiring surgical management, including pre- operative, intra-operative, post-operative care and |
| d)      care for behavioral and mental health conditions. |
| Annual | B3.04 Supervised clinical practice experiences must occur in the following settings: |
| a)      outpatient, |
| b)      emergency department, |
| c)      inpatient and |
| d)      operating room. |
| Annual | B3.05 Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs. |
| Annual | B3.06 Supervised clinical practice experiences should occur with: |
| a)      physicians who are specialty board certified in their area of instruction, |
| b)      PAs teamed with physicians who are specialty board certified in their area of instruction or |
| c)      other licensed health care providers experienced in their area of instruction. |
| Annual | B3.07 Supervised clinical practice experiences should occur with preceptors practicing in the following disciplines: |
| a)      family medicine, |
| b)      internal medicine, |
| c)      general surgery, |
| d)      pediatrics, |
| e)      ob/gyn and |
| f)       behavioral and mental health care. |

### Curriculum Committee Reporting Items to Monthly Faculty Meetings

The Chair of the Curriculum Committee will address any current issues with these standing items at each monthly faculty meeting:

* Clinical Preceptor Evaluations
* Clinical Site Evaluations
* Clinical Site Resources
* Didactic Course Physical Facilities
* Didactic Curriculum Scheduling Issues

### Curriculum Committee Semester Report Items

In addition to the ACR-PA Standards above, the PA Medicine Curriculum Committee will perform semester reviews that incorporate the following measures:

* Student Course Reviews
* Faculty Workload
* Staff Workload
* Program Physical Facilities
* Faculty Course Summaries
* Use of Residents in Clinical and Didactic Education
* Student Clinical Performance
* Clinical Site Analysis

### Curriculum Committee Annual Report Items

The PA Medicine Curriculum Committee will perform annual reports for the Program Director that address the following measures:

* Student Program Surveys
* Faculty Surveys
* Summary of Student Course Evaluations
* Assessment of Program Physical Facilities
* Faculty Meeting Agendas
* Course Objectives
* Course Syllabi
* ARC-PA Standards
* Licensure and Board Certification Verification for didactic faculty and clinical preceptors

### Curriculum Committee 5 Year Review

Every 5 years, the PA Medicine Curriculum Committee will perform a broad review of the PA Medicine curriculum with the specific goal of evaluating the curriculum design content to align with the student outcomes for graduates. NCCPA Blueprints, the most recent National Ambulatory Medical Care Survey, and National Hospital Ambulatory Medical Care Survey, and State of Michigan Medicaid data regarding incidence of diagnosis and procedures in primary care setting (Managed by MSUCOM Medicaid Enhanced Reimbursement Program staff) to ensure alignment of the PA Medicine Curriculum with Entrustable Professional Activities (EPAs), current core competencies, and common disorder presentations in primary care. This will allow the PA Medicine curriculum a method for continuous review as trends change in the healthcare market and allow for benchmarking data of the most common disorders and presentations seen in primary care.

## Promotion Committee

### Overview

The goal of the Promotion Committee is to ensure that the PA Medicine assessment and student progress align with the Program Student Outcomes. This committee is tasked with analysis of measurable instructional objectives to allow assessment of student progress in developing the competencies required for entry into practice. This committee addresses learning expectations of students and the level of student performance required for success.

In terms of student assessment, the Promotion Committee will work with Instructors of Record so student assessment is both described and applied based on clear parallels between what is expected, taught and assessed. Thorough student assessment includes both formative and summative evaluations and involves multiple assessment approaches with multiple observations by multiple individuals.

If a student is experiencing academic difficulty, the Promotion Committee is tasked with adjudicating such cases through the Policy for Promotion, Retention, and Graduation and the Medical Students Rights and Responsibilities. The program has defined and applied process for addressing deficiencies in a student’s knowledge and skills, such that the correction of these deficiencies is measurable and can be documented. The Promotion Committee is responsible for the early identification and notification of students who are demonstrating academic deficiencies through monthly faculty meetings, as well as documentation of such deficiencies and remediation efforts through the online student portfolio platform, Via.

The Promotion Committee has structured semester and annual data collection processes to ensure compliance with ARC-PA Standards. The PA Medicine Promotion Committee will perform semester reviews and provide annual reports to the Program Director which are included in the program annual report to the MSUCOM Dean, Office of Academic Programs and the College Curriculum Committee regarding the PA Medicine curriculum and student outcomes.

Committee Structure

Chair: Clinical Coordinator

Voting Members: Preclinical Coordinator, PA Medicine Principal Faculty 0.5 FTE and greater

Ex Officio Members: Program Director, Associate Dean of Admissions and Student Life

### ARC-PA Standards Reviewed and Addressed by this Committee

| **Frequency** | **ARC-PA Standard** |
| --- | --- |
| Annual | A1.10 The sponsoring institution must provide the program with the academic resources needed by the program, staff and students to operate the educational program and to fulfill obligations to matriculating and enrolled students. |
| Semester | A3.18 Programs granting advanced placement must document within each student’s file that those students receiving advanced placement have: |
| a)      met program defined criteria for such placement, |
| b)      met institution defined criteria for such placement and |
| c)      demonstrated appropriate competencies for the curricular components in which advanced placement is given. |
| Semester | A3.19 Student files kept by the program must include documentation: |
| a)      that the student has met published admission criteria including advanced placement if awarded, |
| b)      that the student has met institution and program health screening and immunization requirements, |
| c)      of student performance while enrolled, |
| d)      of remediation efforts and outcomes, |
| e)      of summaries of any formal academic/behavioral disciplinary action taken against a student and that the student has met requirements for program completion. |
| Semester | C3.01 The program must conduct frequent, objective and documented evaluations of students related to learning outcomes for both didactic and supervised clinical education components. |
| Semester | C3.02 The program must document student demonstration of defined professional behaviors. |
| Semester | C3.03 The program must monitor and document the progress of each student in a manner that promptly identifies deficiencies in knowledge or skills and establishes means for remediation. |
| Annual | C3.04 The program must conduct and document 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. |
| Semester | C3.05 The program must document equivalency of student evaluation methods and outcomes when instruction is: |
| a)      conducted at geographically separate locations and/or |
| b)      provided by different pedagogical and instructional methods or techniques for some students. |

### Promotion Committee Reporting Items to Monthly Faculty Meetings

The Chair of the Promotion Committee will address any current issues with these standing items at each monthly faculty meeting:

* Student Academic Progress Concerns
* Student Professionalism Concerns

**Annual Faculty Meeting Item: Graduation Recommendation and Vote**

The Promotion Committee will review the list of candidates from the COM Office of Enrollment Services and Student Records and ensure all PA Medicine Program requirements, assessments, and student outcomes have been met. The Promotion Committee will then present an approved list of candidates to the next PA Medicine Faculty meeting agenda as an action item.

### Promotion Committee Semester Report Items

In addition to the ACR-PA Standards above, the PA Medicine Promotion Committee will perform semester reviews that incorporate the following measures:

* Academic Advising Compliance
* Professionalism Concerns
* Student Course Performance
* Remediation
* Grade Appeals
* Via Portfolio Measures
* Advanced Placement Determinations

### Promotion Committee Annual Report Items

The PA Medicine Promotion Committee will perform annual reports for the Program Director that address the following measures:

* Graduation Recommendation
* Student Course Performance
* Student Didactic or Clinical Performance
* Remediation
* Grade Appeals

Admissions Committee  
  
Overview

The Admissions Committee will provide admissions reports to the program director on an annual basis as part of the Ongoing Assessment Plan with summaries to be published in the program annual report. This committee will ensure that published information about the PA Medicine program is consistent with program policies. This committee will also ensure that admissions criteria are met by applicants and will monitor and review applications being processed through the PA Medicine program.

Once admissions decisions have been made, the Admissions Committee will work with matriculants and the Office of Enrollment and Student Records to ensure all Enrollment Compliances have been met.

The Admissions Committee has structured semester and annual data collection processes to ensure compliance with ARC-PA Standards. The PA Medicine Admissions Committee will perform semester reviews and provide annual reviews to the Program Director which are included in the program annual report to the MSUCOM Dean, Office of Academic Programs and the College Curriculum Committee.

Committee Structure

Chair: Principal Faculty

Voting Members: Preclinical Coordinator, Clinical Coordinator, Admission Counselor, Program Director, Medical Director, Office Coordinator I

Ex Officio Members: Associate Dean of Admissions and Student Life, COM Director of Admissions

### ARC-PA Standards Reviewed and Addressed by this Committee

| **Frequency** | **ARC-PA Standard** |
| --- | --- |
| Annual | A3.07 The program must have and implement a policy on immunization of students and such policy must be based on current Centers for Disease Control recommendations for health professionals. |
| Annual | A3.08 The program must inform students of written policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk. |
| Semester | A3.13 The program announcements and advertising must accurately reflect the program offered. |
| Annual | A3.14 The program must define, publish and make readily available to enrolled and prospective students general program information to include: |
| a)      the program’s ARC-PA accreditation status, |
| b)      the success of the program in achieving its goals, |
| c)      first time PANCE rates for the five most recent graduating classes, |
| d)      all required curricular components, |
| e)      academic credit offered by the program, |
| f)       estimates of all costs (tuition, fees, etc.) related to the program, |
| g)      policies and procedures for refunds of tuition and fees and |
| h)      policies about student employment while enrolled in the program. |
| Annual | A3.15 The program must define, publish and make readily available to prospective students admission related information to include: |
| a)      admission and enrollment practices that favor specified individuals or groups (if applicable), |
| b)      admission requirements regarding prior education or work experience, |
| c)      policies and procedures concerning awarding or granting advanced placement, |
| d)      any required academic standards for enrollment and |
| e)      any required technical standards for enrollment. |
| Semester | A3.16 The program must make student admission decisions in accordance with clearly defined and published practices of the institution and program. |
| Annual | A3.17 The program must define, publish and make readily available to students upon admission academic performance and progression information to include: |
| a)      any required academic standards, |
| b)      completion deadlines/requirements related to curricular components, |
| c)      requirements for progression in and completion of the program, |
| d)      policies and procedures for processing student grievances, |
| e)      policies and procedures for withdrawal and dismissal, |
| f)       policies and procedures for remediation and deceleration and |
| g)      policies and procedures for processing allegations of harassment. |
| Semester | A3.20 PA students must not have access to the academic records or other confidential information of other students or faculty. |
| Semester | A3.21 Student health records are confidential and must not be accessible to or reviewed by program, principal or instructional faculty or staff except for immunization and tuberculosis screening results which may be maintained and released with written permission from the student. |

### Annual Review Items

The PA Medicine Admissions Committee will perform annual reports for the Program Director that address the following measures:

* Admissions Survey
* Admissions Screening Tools
* Admissions Data

## 

## PA Medicine Program Annual Report

### Overview

Annual Committee Reports from the Curriculum Committee, Promotion Committee, and Admissions Committee will be submitted to the Program Director in preparation for the PA Medicine Strategic Retreat. The PA Medicine Program annual strategic planning process will review the program as part of the Ongoing Assessment Plan. The PA Medicine Strategic Retreat will include participation and input from all PA Medicine Faculty and Staff.

During the Strategic Retreat, a draft of the PA Medicine Annual Report and Action Plans will be created. This draft will be submitted to the advisory board for review and comments, which will be ultimately reviewed and approved during the monthly Program Faculty Meeting. The PA Medicine Program Annual Report with Action Plans will then be submitted to the MSUCOM Dean, Office of Academic Programs and the College Curriculum Committee for review and comments. Once the document is approved, the action plans will be implemented.

### ARC-PA Standards Reviewed and Addressed by this Report

| **Frequency** | **ARC-PA Standard** |
| --- | --- |
| Annual | A1.02 There must be written and signed agreements between the PA program and/or sponsoring institution and the clinical affiliates used for supervised clinical practice experiences that define the responsibilities of each party related to the educational program for students. |
| Annual | A1.03 The sponsoring institution is responsible for: |
| a)      supporting the planning by program faculty of curriculum design, course selection and program assessment, |
| b)      hiring faculty and staff, |
| c)      complying with ARC-PA accreditation Standards and policies, |
| d)      permanently maintaining student transcripts, |
| e)      conferring the credential and/or academic degree which documents satisfactory completion of the educational program, |
| f)       ensuring that all PA personnel and student policies are consistent with federal and state statutes, rules and regulations, |
| g)      addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs and |
| h)      teaching out currently matriculated students in accordance with the institution’s regional accreditor or federal law in the event of program closure and/or loss of accreditation. |
| Annual | A1.04 The sponsoring institution must provide the opportunity for continuing professional development of the program director and principal faculty by supporting the development of their clinical, teaching, scholarly and administrative skills. |
| Annual | A1.07 The sponsoring institution must provide the program with sufficient financial resources to operate the educational program and fulfill obligations to matriculating and enrolled students. |
| Annual | A1.08 The sponsoring institution must provide the program with the human resources necessary to operate the educational program and to fulfill obligations to matriculating and enrolled students. |
| Annual | A1.09 The sponsoring institution must provide the program with the physical facilities to operate the educational program to fulfill obligations to matriculating and enrolled students. |
| Annual | A1.11 The sponsoring institution must support the program in securing clinical sites and preceptors in sufficient numbers for program-required clinical practice experiences. |
| Annual | A2.04 Principal faculty and the program director should have academic appointments and privileges comparable to other faculty with similar academic responsibilities in the institution. |
| Annual | A2.05 Principal faculty and the program director must actively participate in the processes of: |
| a) developing, reviewing and revising as necessary the mission statement for the program, |
| b) selecting applicants for admission to the PA program, |
| c) providing student instruction, |
| d) evaluating student performance, |
| e) academic counseling of students, |
| f) assuring the availability of remedial instruction, |
| g) designing, implementing, coordinating, evaluating curriculum and |
| h) evaluating the program. |
| Annual | A2.18 There must be at least a 1.0 FTE position, which should be dedicated exclusively to the program, to provide administrative support for the program. |
| Annual | A3.01 Program policies must apply to all students, principal faculty and the program director regardless of location. |
| Annual | A3.02 The program must inform students of program policies and practices. |
| Annual | A3.03 Students must not be required to provide or solicit clinical sites or preceptors. The program must coordinate clinical sites and preceptors for program required rotations. |
| Annual | A3.04 PA students must not be required to work for the program. |
| Annual | A3.09 Principal faculty, the program director and the medical director must not participate as health care providers for students in the program, except in an emergency situation. |
| Annual | A3.10 The program must have written policies that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program. |
| Annual | A3.11 The program must define, publish and make readily available to faculty and students policies and procedures for processing student grievances and allegations of harassment. |
| Annual | A3.12 The program must define, publish and make readily available to faculty institutional policies and procedures for processing faculty grievances and allegations of harassment. |
| Annual | C1.01 The program must implement an ongoing program self-assessment process that is designed to document program effectiveness and foster program improvement. |
| Annual | C1.02 The program must apply the results of ongoing program self-assessment to the curriculum and other dimensions of the program. |
| Annual | C2.01 The program must prepare a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment. The report must follow the guidelines provided by the ARC-PA and, at a minimum, must document: |
| a)      the program process of ongoing self- assessment, |
| b)      results of critical analysis from the ongoing self-assessment, |
| c)      faculty evaluation of the curricular and administrative aspects of the program, |
| d)      modifications that occurred as a result of self-assessment, |
| e)      self-identified program strengths and areas in need of improvement and |
| f)       plans for addressing areas needing improvement. |

### Report Measures

The Annual Report will also address and/or summarize the following data points:

* Clinical Coordinator Semester Reviews
* Workload – Faculty and Staff
* Graduation Approval
* Student Handbook
* Program Director Review of Faculty\*:
* Policies
  + Mission Statement
  + Vision
* Curriculum Map
* Student Outcomes
* Clinical Site Availability
* Student Performance Outcomes
* National Exam performance
* Medical Director Review\*\*
* Interprofessional Education
* Fall Space Allocation
* Course Syllabi

### \*Annual Faculty Assessment

Annual faculty assessments are completed by the Program Director for each faculty member. A summary of these assessments is included in the Program Annual Report.

### ARC-PA Standards Reviewed and Addressed by this Assessment

A2.01 All faculty must possess the educational and experiential qualifications to perform their assigned duties.

A2.02 The program must have program faculty that include the program director, principal faculty, medical director, and instructional faculty.

b) The program must have at least three FTE principal faculty positions. Two FTE principal faculty positions must be filled by PA faculty who currently are NCCPA-certified.

A2.03 Principal faculty must be sufficient in number to meet the academic needs of enrolled students.

A2.13 Instructional faculty must be:

1. qualified through academic preparation and/or experience to teach assigned subjects and
2. knowledgeable in course content and effective in teaching assigned subjects.

A2.14 In addition to the principal faculty, there must be sufficient instructional faculty to provide students with the necessary attention, instruction and supervised clinical practice experiences to acquire the knowledge and competence required for entry into the profession.

A3.22 Principal faculty records must include:

1. current job descriptions that include duties and responsibilities specific to each principal

faculty member and

1. current curriculum vitae.

A3.23 The program must have current curriculum vitae for each course director.

### \*\*Medical Director Assessment

As per the annual faculty assessment, the Medical Director will also be assessed annually by the Program Director.

### ARC-PA Standards Reviewed and Addressed by this Assessment

A2.11 The medical director must be:

1. a currently licensed allopathic or osteopathic physician and
2. certified by an ABMS- or AOA-approved specialty board

A2.12 The medical director must be an active participant in the program.

## PA Medicine 5 Year Review

Every 5 years, the MSUCOM PA Medicine Program will conduct a complete review of the program, to include Curriculum Review with link to student outcomes and national data, review of Program Policies, and review of compliance with Institutional Policies. This ongoing self-assessment will include critical analysis of student evaluations for each course and rotation, student evaluations of faculty, failure rates for each course and rotation, student remediation, student attrition, preceptor evaluations of students’ preparedness for rotations, student exit and/or graduate evaluations of the program, the most recent five-year first time and aggregate graduate performance on the PANCE, sufficiency and effectiveness of faculty and staff, and faculty and staff attrition.

### ARC-PA Standards Reviewed and Addressed in this Report

A1.05 The sponsoring institution must provide academic and student health services to PA students that are equivalent to those services provided other comparable students of the institution.

C1.01 The program must implement an ongoing program self-assessment process that is designed to document program effectiveness and foster program improvement.

C1.02 The program must apply the results of ongoing program self-assessment to the curriculum and other dimensions of the program.

C2.01 The program must prepare a self-study report as part of the application for continuing accreditation that accurately and succinctly documents the process, application and results of ongoing program self-assessment. The report must follow the guidelines provided by the ARC-PA and, at a minimum, must document:

1. the program process of ongoing self- assessment,
2. results of critical analysis from the ongoing self-assessment,
3. faculty evaluation of the curricular and administrative aspects of the program,
4. modifications that occurred as a result of self-assessment,
5. self-identified program strengths and areas in need of improvement and
6. plans for addressing areas needing improvement.

C4.01 The program must define, maintain and document effective processes for the initial and ongoing evaluation of all sites and preceptors used for supervised clinical practice experiences to ensure that sites and preceptors meet program expectations for learning outcomes and performance evaluation measures.

C4.02 The program must document that each clinical site provides the student access to physical facilities, patient populations and supervision necessary to fulfill program expectations of the clinical experience.

## Additional Assessment

### Program Director Assessment

The University and college evaluate the PA Medicine Program Director's organization, administration, fiscal management, strategic planning, program assessment, compliance with accreditation standards and management of the program via the university annual performance review process for all departments within university. MSUCOM Dean evaluates all of the above for all Chairpersons/Program Directors on an annual basis. During all monthly college executive leadership meetings and a Department Chairs meetings, the Dean has a Departmental Roundtable agenda item where Chairs/Directors are responsible to communicate departmental initiatives, research, curriculum, student or faculty updates. This allows the Dean and other departments to hear and provide input to strategic initiatives and strategies within other college departments.

### ARC-PA Standards Reviewed and Addressed by this Assessment

A2.02 The program must have program faculty that include the program director, principal faculty, medical director, and instructional faculty.

a) The program director must be assigned to the program on a 12 month full time basis. At least 80% of that time should be devoted to academic and administrative responsibilities in support of the program.

A2.06 The program director must be a PA or a physician.

1. If the program director is a PA, s/he must hold current NCCPA certification.
2. If the program director is a physician, s/he must hold current licensure as an allopathic or osteopathic physician in the state in which the program exists and must be certified by an ABMS- or AOA-approved specialty board.

A2.07 The program director must not be the medical director.

A2.08 The program director must provide effective leadership and management.

A2.09 The program director must be knowledgeable about and responsible for program:

1. organization,
2. administration,
3. fiscal management,
4. continuous review and analysis,
5. planning,
6. development and
7. participation in the accreditation process.

A2.10 The program director must supervise the medical director, principal and instructional faculty and staff in all activities that directly relate to the PA program.