



December 7, 2022

Ms. Anna Romano, BS, RVT  
Pierpont Community & Technical College  
Veterinary Technology Program  
1201 Locust Ave.  
Fairmont, WV 26554

Dear Ms. Romano:

Following review of the progress report for the Pierpont Community & Technical College, the AVMA Committee on Veterinary Technician Education and Activities (CVTEA) **placed** the program on **Probationary** accreditation effective November 6, 2022.

The Committee's decision was based on the determination that the program's three-year pass rate of 40.5% is not in compliance with accreditation Standard 11, Outcomes, 11d:

The program's three year rolling average VTNE pass percentage for first time test takers must be 50% or higher.

A designation of probationary accreditation is not defined as an adverse accreditation decision. Programs have the right to submit a request for reconsideration of Probationary accreditation. The request procedure may be found in Section XII of the August 2022 *Accreditation Policies and Procedures of the AVMA CVTEA*; [Procedures for Request for Reconsideration of Probationary Accreditation](#). Pursuant to these procedures, no later than 10 business days from receipt of this letter, or by December 21, 2022, a "Notice of Intent to Request Reconsideration of Probationary Accreditation Status" must be submitted to the attention of the Chair of the AVMA CVTEA, via email to [jhorvath@avma.org](mailto:jhorvath@avma.org). The Notice must include a brief summary of why CVTEA's action was arbitrary and capricious, resulted from errors in the application of CVTEA's standards, policies or procedures, or was not based on substantial evidence in the accreditation record at the time of the decision. Failure to submit the Notice within the required timeframe will be deemed a waiver of the Program's right to request reconsideration of probationary accreditation status, and the CVTEA's designation of probationary status will become final.

After consideration of the documentation provided, the Committee has determined that continued reporting is required on the following deficiencies (see chart(s) below):

Critical deficiency(ies): 3, New Concern (noted below)

Major deficiency(ies): 1 (noted below)

Graduates of a program on probationary accreditation are graduates of an accredited program. Programs may remain on probationary accreditation for a maximum of two years (fall 2024). Failure to substantially meet the Standards of Accreditation by the end of the two-year probationary period may result in involuntary terminal accreditation. It is the Committee's goal to assist the program in achieving full accreditation.

Per the *Policies and Procedures of the AVMA CVTEA*, documentation of progress toward compliance with critical and major deficiencies must be included in the program's report to CVTEA. Insufficient progress toward meeting deficiencies may be considered cause for a change in the program's accreditation status. If there are any changes that impact critical or major deficiencies that the CVTEA previously determined do not require continued reporting, the program must report this change.

For your information, all programs will be required to submit a progress report due Fall 2023 (September 15, 2023) to address rabies mitigation processes through a reporting instrument in the Armature software management system. Absence of documented compliance by the August 1, 2023, deadline may lead to a change in accreditation status. Please note that in programs where rabies pre-exposure immunizations have not yet been implemented or where student vaccination is not required, it is the expectation of the CVTEA that the program is operating under mitigation procedures, following the outline in [Appendix A RABIES SUPPLEMENT – COMPREHENSIVE RABIES MITIGATION PLAN](#), to ensure protection of unvaccinated students.

For your information, it appears that the reporting information related to the Veterinary Technician National Examination (VTNE) currently posted on the Program's webpage is not accurate based on the AAVSB reporting for 2019-2022 submitted by the program in the fall 2023 report. The Program published a pass percentage of 45%; however, the AAVSB report states the pass percentage at 40.5%. The Program is required to submit the link to the corrected reporting information on or before **December 16, 2022**. You will receive an Armature notification on how to submit this information. Lack of compliance with CVTEA accreditation standards may result in a change in accreditation status for a program.

The dates of March 8 – 9, 2023 are tentatively scheduled for the next accreditation site visit. Please provide an update on completion of the new facilities and confirm these dates will work for you. A self-study report will be due January 25, 2023.

If you have any questions, or if staff may be of assistance in the preparation of your next report, please do not hesitate to contact staff ([jhorvath@avma.org](mailto:jhorvath@avma.org)).

Sincerely,



AAV, CVT, LVT, VTS LECC

Ms. Kelly Foltz, BA, LVT, VTS (ECC), CVTEA Chair

*AVMA Center for Veterinary Medical Accreditation*

RAV/LLL/jah

<b>Pierpont Community &amp; Technical College ROE 2021 SSV</b> <b>CRITICAL DEFICIENCY (IES)</b> Critical deficiencies apply to situations that clearly result in a program's inability to meet a Standard, and/or subject students, faculty, or others to unacceptable levels of risk. Documentation of significant progress toward compliance with each critical deficiency must be achieved by the time of the program's next report to CVTEA. Lack of compliance may be considered cause for a change of the program's accreditation status.  It is critical that:		(Office use only)  Is the Deficiency met with no further reporting required or unmet with continued reporting required?  (comments); date
1.	Program facilities emulate a contemporary veterinary environment (4b). With respect to: <ul style="list-style-type: none"> <li>a. Long term housing of dogs and cats not occurring simultaneously in the current basement housing areas that lack a complete dividing wall.</li> <li>b. Dogs not being housed in kennels with rusting materials that impair appropriate cleaning.</li> </ul>	Met; 11/2021
2.	The Program have an appropriately functioning institutional animal care and use committee (IACUC). (5a) With respect to: An appropriate IACUC-approved whistleblower policy	Met; 11/2021
3.	IACUC-approved protocols be in place for all animal activities and protocols be in accordance with Animal Welfare Act (AWA) guidelines. (5a) With respect to: <ul style="list-style-type: none"> <li>a. Avian animal use</li> </ul>	Unmet; to be reassessed at the 2023 site visit.
4.	Current, written memoranda of understanding (MOUs) that include exit strategies be in place with providers of resources critical to the Program. (5b) With respect to: <ul style="list-style-type: none"> <li>a. Stenger Farms</li> <li>b. McCord's Farm</li> <li>c. Silver Mist Stables</li> </ul>	Met; 11/2021
5.	<b>NEW CONCERN (11/2022):</b> The Program's VTNE three-year pass percentage for first time test takers be 50% or higher. (11d)	Unmet; to be reassessed at the 2023 site visit

<p><b>Pierpont Community &amp; Technical College ROE 2021 SSV</b></p> <p><b>MAJOR DEFICIENCY (IES)</b>  Major deficiencies apply to situations that jeopardize the ability of the program to meet a Standard. Progress toward meeting each major deficiency must be demonstrated on an annual or biennial basis. Documentation of steps taken toward compliance with major deficiencies is required. Lack of compliance within the assigned five- or six-year period, prior to the next scheduled complete evaluation, may be considered cause for a change of the program's accreditation status.</p> <p>It is required that:</p>		(Office use only)  Is the Deficiency met with no further reporting required or unmet with continued reporting required?  (comments); date
1.	IACUC-approved protocols be in place for all animal activities and protocols be in accordance with Animal Welfare Act (AWA) guidelines. (5a) With respect to: <ol style="list-style-type: none"> <li>a. Animal use numbers reflecting current practice (Ruminants, Rabbits)</li> </ol>	Met; 11/2021 (Rabbits) Unmet (Ruminants); to be reassessed at the 2023 site visit

<b>Pierpont Community &amp; Technical College ROE 2017</b>		(Office use only)
<p><b>CRITICAL DEFICIENCY (IES)</b>  Critical deficiencies apply to situations that clearly result in a program's inability to meet a Standard, and/or subject students, faculty, or others to unacceptable levels of risk. Documentation of significant progress toward compliance with each critical deficiency must be achieved by the time of the program's next report to CVTEA. Lack of compliance may be considered cause for reduction of the program's accreditation status.</p> <p>It is critical that:</p>		<p>Is the Deficiency met with no further reporting required or unmet with continued reporting required?  (comments); date</p>
1.	The Program be compliant with Occupational Safety and Health Administration (OSHA) with respect to: a) lack of availability of goggles in the clinical lab; b) empty eye-wash bottles in darkroom; c) lack of hearing protection signage in kennel area; and d) no labels on darkroom chemicals. (4e)	Met; 11/2017
2.	Potential safety issues be addressed, including: a) need for identification of all personnel involved in a radiographic exposure in the radiology log, including a signature page; b) inadequate safety of dogs when walked in outdoor areas; c) no weights included on F/air canisters; d) need for regular servicing of anesthetic vaporizers according to manufacturer's recommendations; d) lack of emergency lighting and an exposed thermostat mechanism in the surgery room; and e) presence of an unlabeled food can in the kennel refrigerator. (4e)	Met; 4/2018
3.	The Program have access to all required equipment including a dental radiographic unit. (4b)	Met; 11/2018
4.	Planning go forth to provide a kennel that emulates a contemporary facility and meets Program needs. (4a,4b)	Met; 11/2021
5.	The Program comply with VTNE reporting requirements by updating the website. (11c)	Met; 04/2018

<b>Pierpont Community &amp; Technical College ROE 2017</b>		(Office use only)
<b>MAJOR DEFICIENCY (IES)</b> Major deficiencies apply to situations that jeopardize the ability of the program to meet a Standard. Progress toward meeting each major deficiency must be demonstrated on an annual or biennial basis. Documentation of steps taken toward compliance with major deficiencies is required. Lack of compliance within the assigned five- or six-year period, prior to the next scheduled complete evaluation, may be considered cause for reduction of the program's accreditation status.  It is required that:		Is the Deficiency met with no further reporting required or unmet with continued reporting required?  (comments); date
1.	The Program Advisory Committee meet at least annually. (3e)	Met; 4/2019
2.	Program facilities emulate a contemporary veterinary facility. (4b)	Met; 11/2021
3.	Memoranda of Understanding that include a period of notification for non-renewal be in place with critical providers of animal resources. (5b)	Met; 11/2018
4.	The policy for the handling of complaints associated with animal care and use be appropriately posted. (5a)	Met; 11/2017
5.	Storage space be sufficient for Program needs. (4h)	Met; 11/2021
6.	Medical record-keeping emulate contemporary veterinary standards (5d)	Met; 11/2018
7.	The Program's three-year rolling average VTNE pass percentage for first-time test-takers be 50% or higher. (11d) *Compliance is required by September 1, 2021.	Met; 11/2021