

ASSESSMENT FRAMEWORK

*Responsible administrator: Associate Dean for Faculty Affairs and Strategic Initiatives
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Abbreviations:

- **AAMS** – Assessment & Accreditation Management System
- **ADAP** – Associate Dean for Academic Programs
- **ADCAO** – Associate Dean of Clinical Affairs and Outreach
- **ADFASI** – Associate Dean for Faculty Affairs & Strategic Initiatives
- **Admissions** – Chair, Admissions Committee
- **ADR** – Associate Dean for Research
- **APT** – Assessment Progression Team
- **COO** – Chief Operating Officer
- **DAPA** – Director of Alumni and Professional Affairs
- **DGP** – Director of Graduate Programs
- **DO** – Development Officer
- **DoA** – Director of Assessment
- **DDIC** – Director, Drug Information Center
- **DIPD**– Director of International Programs & Diversity
- **DIPE** – Director of Interprofessional Education
- **DOEECC** – Director of Operations for Experiential Education and Co-Curriculum
- **DPP** – Director of the Professional Program
- **DRDS** – Director of Research Development & Support
- **DSA** – Director of Student Affairs
- **DSO** – Director or Strategic Operations
- **DSTL** – Director, Scholarship of Teaching & Learning
- **EDCA** – Executive Director of Clinical Affairs
- **EXP** – Experiential Learning Community
- **IPPEC** – Introductory Pharmacy Practice Experience Coordinator
- **MIIT** – Manager, Information and Instructional Technology
- **PEC** – Chair, Professional Education Committee

HSOP ASSESSMENT FRAMEWORK - PART I

ASSESSMENTS RELATED TO **2016 ACPE STANDARDS**

Rows highlighted in Light Orange require documents or artifacts rather than data

* Dissemination: In addition to those listed, all assessment items should be disseminated to the Director of Strategic Operations and the Director of Assessment for inclusion in AAMS and the Annual Assessment Report

Section I: Educational Outcomes

Standard 1 – Foundational Knowledge			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Annual performance of students nearing completion of the didactic curriculum on Pharmacy Curriculum Outcomes Assessment (PCOA) outcome data broken down by campus/branch/pathway	ADFASI, DoA	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Performance of graduates (passing rates of first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 3 years broken down by campus/branch/pathway (only required for multi-campus and/or multi-pathway programs) Template available to download	ADFASI, DoA	Annually, by June 1 st	Executive Committee PEC Faculty, Students

Performance of graduates (passing rate,, Competency Area 1 scores, Competency Area 2 scores, and Competency Area 3 scores for first-time candidates) on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 3 years Template available to download	ADFASI, DoA	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Performance of graduates (passing rate of first-time candidates) on Multistate Pharmacy Jurisprudence Examination® (MPJE®) for the last 3 years Template available to download	ADFASI, DoA	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Analysis of Student Academic Performance Throughout the Program (e.g., progression rates, academic probation rates, attrition rates)	ADAP, DPP	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Standard 1, Graduating Student Survey, Question 12 The PharmD program prepared me to apply knowledge from the foundational pharmaceutical and biomedical sciences to the provision of patient care.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 1, Graduating Student Survey, Question 13 The PharmD program prepared me to apply knowledge from the clinical sciences to the provision of patient care.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 1, Graduating Student Survey, Question 14 The PharmD program prepared me to evaluate scientific literature.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 1, Graduating Student Survey, Question 77 I am prepared to enter pharmacy practice.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 1, Preceptor Survey, Question 19 The PharmD program prepares students to apply knowledge from the foundational pharmaceutical and biomedical sciences to the provision of patient care.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 1, Preceptor Survey, Question 20 The PharmD program prepares students to apply knowledge from the clinical sciences to the provision of patient care.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 1, Preceptor Survey, Question 21 The PharmD program prepares students to evaluate scientific literature.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 1, Alumni Survey, Question 26 The PharmD program prepared me to apply knowledge from the foundational pharmaceutical and biomedical sciences to the provision of patient care.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty

Standard 1, Alumni Survey, Question 27 The PharmD program prepared me to apply knowledge from the clinical sciences to the provision of patient care.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 1, Alumni Survey, Question 28 The PharmD program prepared me to evaluate scientific literature.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
OTHER DOCUMENTATION			

Standard 2 - Essentials for Practice and Care			
ITEM	RESPONSIBLE PARTY *	OCCURENCE	DISSEMINATION *
Outcome assessment data summarizing overall student achievement of learning objectives for didactic coursework.	ADFASI, DoA, DPP	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Outcome assessment data summarizing overall student achievement of learning objectives for introductory pharmacy practice experiences (IPPE)	ADFASI, DoA, EDCA	Annually, by June 1 st	Executive Committee PEC, EDCA Faculty
Outcome assessment data summarizing overall student achievement of learning objectives for advance pharmacy practice experiences (APPE).	ADFASI, DoA, EDCA	Annually, by June 1 st	Executive Committee PEC, EDCA Faculty, Students
Standard 2, Graduating Student Survey, Question 15 The PharmD program prepared me to provide medication expertise as part of patient-centered care	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 2, Graduating Student Survey, Question 16 The PharmD program prepared me to optimize the safety and efficacy of medication use systems (e.g., dispensing, administration, effects monitoring) to manage patient healthcare needs.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 2, Graduating Student Survey, Question 17 The PharmD program prepared me to design strategies to manage chronic disease and improve health and wellness.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 2, Graduating Student Survey, Question 18 The PharmD program prepared me to assess the health needs of a given patient population.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 2, Graduating Student Survey, Question 19 The PharmD program prepared me to provide patient-centered care based on evidence-based best practices.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty

Standard 2, Preceptor Survey, Question 22 The PharmD program prepares students to provide medication expertise as part of patient-centered care.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 2, Preceptor Survey, Question 23 The PharmD program prepares students to optimize the safety and efficacy of medication use systems (e.g., dispensing, administration, effects monitoring) to manage patient healthcare needs.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 2, Preceptor Survey, Question 24 The PharmD program prepares students to design strategies to manage chronic disease and improve health and wellness.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 2, Preceptor Survey, Question 25 The PharmD program prepares students to assess the health needs of a given patient population.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 2, Preceptor Survey, Question 26 The PharmD program prepares students to provide patient-centered care based on evidence-based best practices.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 2, Alumni Survey, Question 29 The PharmD program prepared me to provide medication expertise as part of patient-centered care.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 2, Alumni Survey, Question 30 The PharmD program prepared me to optimize the safety and efficacy of medication use systems (e.g., dispensing, administration, effects monitoring) to manage patient healthcare needs	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 2, Alumni Survey, Question 31 The PharmD program prepared me to design strategies to manage chronic disease and improve health and wellness	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 2, Alumni Survey, Question 32 The PharmD program prepared me to assess the health needs of a given patient population	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 2, Alumni Survey, Question 33 The PharmD program prepared me to provide patient-centered care based on evidence-based best practices.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
OTHER DOCUMENTATION			

Standard 3 - Approach to Practice and Care			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Examples of student participation in IPE activities (e.g. didactic, simulation, experiential).	DIPE	Every 3rd Year	AAMS
Outcome assessment data of student achievement of learning objectives for didactic course work	ADFASI, DoA, APT	Annually, by June 1 st	Executive Committee PEC Faculty
Outcome assessment data of student achievement of learning objectives for introductory pharmacy practice experiences	ADFASI, DoA, EDCA	Annually, by June 1 st	Executive Committee PEC, EDCA Faculty
Outcome assessment data of student achievement of learning objectives for advanced pharmacy practice experiences	ADFASI, DoA, EDCA	Annually, by June 1 st	Executive Committee PEC, EDCA Faculty
Outcome assessment data of overall student participation in IPE activities	DIPE	Annually, by June 1 st	Executive Committee PEC Faculty
Examples of curricular and co-curricular experiences available to students to document developing competence in affective domain-related expectations of Standard 3	DPP, DOECC	Every 3rd Year	AAMS
Outcome assessment data of student achievement of problem-solving and critical thinking	DOECC, APT	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Outcome assessment data of student ability to communicate professionally	DOECC, APT	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Outcome assessment data of student ability to advocate for patients	DOECC, APT	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Outcome assessment data of student ability to educate others	DOECC, APT	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Outcome assessment data of student demonstration of cultural awareness and sensitivity	DOECC, APT, DIPD	Annually, by June 1 st	Executive Committee PEC Faculty, Students
Standard 3, Graduating Student Survey, Question 20 The PharmD program prepared me to design, implement, and evaluate viable solutions to patient care problems.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 3, Graduating Student Survey, Question 21 The PharmD program prepared me to use effective	ADFASI, DoA	Annually, Spring	Executive Committee Faculty

strategies to educate patients, healthcare professionals, and caregivers to improve patient care.			
Standard 3, Graduating Student Survey, Question 22 The PharmD program prepared me to advocate for the patient's best interest.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 3, Graduating Student Survey, Question 23 The PharmD program prepared me to engage as a member of an interprofessional healthcare team.	ADFASI, DoA	Annually, Spring	Executive Committee DIPE Faculty
Standard 3, Graduating Student Survey, Question 24 The PharmD program prepared me to identify cultural disparities in healthcare	ADFASI, DoA	Annually, Spring	Executive Committee Co-Curricular Faculty
Standard 3, Graduating Student Survey, Question 25 The PharmD program prepared me to recognize and address cultural disparities in access to and delivery of health care.	ADFASI, DoA	Annually, Spring	Executive Committee Co-Curricular Faculty
Standard 3, Graduating Student Survey, Question 26 The PharmD program prepared me to effectively communicate (verbal, non-verbal, written) when interacting with individuals, groups, and organizations.	ADFASI, DoA	Annually, Spring	Executive Committee Co-Curricular Faculty
Standard 3, Preceptor Survey, Question 27 The PharmD program prepares students to design, implement, and evaluate viable solutions to patient care problems.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 3, Preceptor Survey, Question 28 The PharmD program prepares students to use effective strategies to educate patients, healthcare professionals, and caregivers to improve patient care	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 3, Preceptor Survey, Question 29 The PharmD program prepares students to advocate for the patient's best interest.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 3, Preceptor Survey, Question 30 The PharmD program prepares students to engage as a member of an interprofessional healthcare team	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 3, Preceptor Survey, Question 31 The PharmD program prepares students to Identify cultural disparities in healthcare.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 3, Preceptor Survey, Question 32 The PharmD program prepares students to recognize and address cultural disparities in access to and delivery of health care	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty

Standard 3, Preceptor Survey, Question 33 The PharmD program prepares students to effectively communicate (verbal, non-verbal, written) when interacting with individuals, groups, and organizations	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 3, Alumni Survey, Question 34 The PharmD program prepared me to design, implement, and evaluate viable solutions to patient care problems.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 3, Alumni Survey, Question 35 The PharmD program prepared me to use effective strategies to educate patients, healthcare professionals, and caregivers to improve patient care.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 3, Alumni Survey, Question 36 The PharmD program prepared me to advocate for the patient's best interest.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 3, Alumni Survey, Question 37 The PharmD program prepared to engage as a member of an interprofessional healthcare team.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee DIPE Faculty
Standard 3, Alumni Survey, Question 38 The PharmD program prepared me to identify cultural disparities in healthcare.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Co-Curricular Faculty
Standard 3, Alumni Survey, Question 39 The PharmD program prepared me to recognize and address cultural disparities in access to and delivery of health care	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Co-Curricular Faculty
Standard 3, Alumni Survey, Question 40 The PharmD program prepared me to effectively communicate (verbal, non-verbal, written) when interacting with individuals, groups, and organizations.	ADFASI, DOA, DAPA	Biennially, Spring	Executive Committee Co-Curricular Faculty
OTHER DOCUMENTATION			

Standard 4 - Personal and Professional Development			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Outcome assessment data summarizing students' overall achievement of professionalism	DOEECC, DPP	Annually, by June 1 st	Executive Committee Faculty, Students
Outcome assessment data summarizing students' overall achievement of leadership	DOEECC, DPP	Annually, by June 1 st	Executive Committee Faculty, Students
Outcome assessment data summarizing students' overall achievement of self-awareness	DOEECC, DPP	Annually, by June 1 st	Executive Committee Faculty, Students

Outcome assessment data summarizing students' overall achievement of creative thinking	DOEECC, DPP	Annually, by June 1 st	Executive Committee Faculty, Students
Examples of curricular and co-curricular experiences available to students to document developing competence in affective domain-related expectations of Standard 4	DOEECC, DPP	Every 3rd Year	AAMS
Description of tools utilized to capture students' reflections on personal/professional growth and development	DOEECC	Every 3rd Year	AAMS
Description of processes by which students are guided to develop a commitment to continuous professional development and to self-directed lifelong learning	DOEECC	Every 3rd Year	AAMS
Outcome assessment data of student achievement of learning objectives for didactic course work	DPP, DoA	Annually, by June 1 st	Executive Committee Faculty
Outcome assessment data of student achievement of learning objectives for introductory pharmacy practice experiences	EDCA, DOEECC	Annually, by June 1 st	Executive Committee EDCA Faculty
Outcome assessment data of student achievement of learning objectives for advanced pharmacy practice experiences	EDCA, DOEECC	Annually, by June 1 st	Executive Committee EDCA Faculty
Standard 4, Graduating Student Survey, Question 27 The PharmD program prepared me to examine and reflect on how my behavior and choices affect my personal and professional growth	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 4, Graduating Student Survey, Question 28 The PharmD program prepared me to accept responsibility for creating and achieving shared goals.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 4, Graduating Student Survey, Question 29 The PharmD program prepared me to develop new ideas and approaches to practice.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 4, Graduating Student Survey, Question 30 The PharmD program prepared me to act in a manner	ADFASI, DoA	Annually, Spring	Executive Committee Faculty

consistent with the trust given to pharmacists by patients, other healthcare providers, and society.			
Standard 4, Graduating Student Survey, Question 31 I developed the skills needed to prepare me for continuous professional development and self-directed life-long learning	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 4, Graduating Student Survey, Question 33 Elective didactic courses permitted exploration of and/or advanced study in areas of professional interest.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 4, Preceptor Survey, Question 34 The PharmD program prepares students to examine and reflect on how my behavior and choices affect my personal and professional growth	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 4, Preceptor Survey, Question 35 The PharmD program prepares students to accept responsibility for creating and achieving shared goals	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 4, Preceptor Survey, Question 36 The PharmD program prepares students to develop new ideas and approaches to practice	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 4, Preceptor Survey, Question 37 The PharmD program prepares students to act in a manner consistent with the trust given to pharmacists by patients, other healthcare providers, and society.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA Faculty
Standard 4, Alumni Survey, Question 20 I was encouraged to assume responsibility for my own learning	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 4, Alumni Survey, Question 41 The PharmD program prepared me to examine and reflect on how my behavior and choices affect my personal and professional growth	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 4, Alumni Survey, Question 42 The PharmD program prepared me to accept responsibility for creating and achieving shared goals.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty

Standard 4, Alumni Survey, Question 43 The PharmD program prepared me to develop new ideas and approaches to practice.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 4, Alumni Survey, Question 44 The PharmD program prepared me to act in a manner consistent with the trust given to pharmacists by patients, other healthcare providers, and society.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
OTHER DOCUMENTATION			

Section II: Structure and Process to Promote Achievement of Educational Outcomes

Standard 5 – Eligibility and Reporting Requirements			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
University organizational chart depicting the reporting relationship(s) for the Dean of the college or school.	Dean's Office	Updated Annually	AAMS
Document(s) verifying institutional accreditation.	Dean's Office	Every 3rd Year	AAMS
Documents verifying legal authority to offer/award the Doctor of Pharmacy degree	Dean's Office	Every 3rd Year	AAMS
Accreditation reports identifying deficiencies (if applicable)	Dean's Office	Every 3rd Year	AAMS
Description of level of autonomy of the college or school	Dean's Office	Every 3rd Year	AAMS
Relevant extract(s) from accreditation report that identifies any deficiencies from institutional accreditation that impact or potentially impact the college, school or program.	Dean's Office	Every 3rd Year	AAMS
OTHER DOCUMENTATION			

Standard 6 – College or School Vision, Mission, and Goals			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION **
Vision, mission and goal statements (college/school, parent institution, and department/division, if applicable)	Dean's Office, Department Heads	Every 3rd Year	AAMS Website

Outcome assessment data summarizing the extent to which the college or school is achieving its vision, mission, and goals	See HSOP Assessment Framework Part II		
OTHER DOCUMENTATION			

Standard 7 – Strategic Plan			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
College or school's strategic planning documents	Dean's Office, ADAFSI, DSO	Updated Annually	AAMS
Description of the development process of the strategic plan.	Dean's Office, ADAFSI, DSO	Every 3rd Year	AAMS
Outcome assessment data summarizing the implementation of the strategic plan	See HSOP Assessment Framework Part II		
Standard 7, Faculty Survey, Question 11 The college/school effectively employs strategic planning.	ADFSI, DoA, DSO	Biennially, Spring	Executive Committee Faculty
Standard 7, Faculty Survey, Question 12 The college/school requested my input during the development of the current strategic plan.	ADFSI, DoA, DSO	Biennially, Spring	Executive Committee Faculty
OTHER DOCUMENTATION			

Standard 8 – Organization and Governance			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
College or school organizational chart	Dean's Office	Updated Annually	AAMS
Job descriptions and responsibilities for college or school Dean and other administrative leadership team members	Dean's Office	Every 3rd Year	AAMS
List of committees with their members and designated charges	Dean's Office	Updated Annually	AAMS
College, school, or university policies and procedures that address systems failures, data security and backup, and contingency planning	Dean's Office, COO, MIIT	Updated Annually	AAMS
Curriculum Vitae of the Dean and other administrative leadership team members	Dean's Office	Every 3rd Year	AAMS
Evidence of faculty participation in university governance	Dean's Office	Every 3rd Year	AAMS
Written bylaws and policies and procedures of college or school	Dean's Office	Every 3rd Year	AAMS

Distribution of Full-Time Pharmacy Faculty by Department and Rank The data view below is being populated using individual data from the Faculty Profiles. Please have all faculty members at your college/school complete their profile before commenting on the data view.	Individual Faculty	Updated Annually	AAMS
Standard 8, Faculty Survey, Question 1 The college/school's administrators (e.g. Dean, Associate/Assistant Dean, Department Chair, Program Directors) have clearly defined responsibilities	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 8, Faculty Survey, Question 2 The college/school's administrators function as a unified team.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 8, Faculty Survey, Question 5 The Dean is an effective leader of the college/school.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 8, Faculty Survey, Question 10 The college/school provides opportunities for faculty participation in governance.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 8, Alumni Survey, Question 14 The current Dean is providing leadership in pharmacy.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
OTHER DOCUMENTATION			

Standard 9 – Organizational Culture			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
College, school, or university policies describing expectations of faculty, administrators, students and staff behaviors	Dean's Office	Every 3rd Year	AAMS Faculty, Staff, Students Website
Examples of intra/interprofessional and intra/interdisciplinary collaboration	Dean's Office / DIPE	Every 3rd Year	AAMS
Examples of affiliation agreements for practice or service relationships (other than experiential education agreements)	ADCAO	Every 3rd Year	AAMS
Examples of affiliation agreements for the purposes of research collaboration (if applicable)	ADR	Every 3rd Year	AAMS
Examples of affiliation agreements for academic or teaching collaboration (if applicable)	Dean's Office / Department Heads	Every 3rd Year	AAMS

Standard 9, Faculty Survey, Question 3 The college/school's administrator(s) are aware of my needs/problems.	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 9, Faculty Survey, Question 4 The college/school's administrator(s) are responsive to my needs/problems	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 9, Faculty Survey, Question 6 I am given the opportunity to provide evaluative feedback of the administrator	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 9, Faculty Survey, Question 35 Curricular collaboration among disciplines is encouraged at my college/school	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 9, Faculty Survey, Question 37 The college/school provides an environment and culture that promote professional behavior among students, faculty, administrators, preceptors, and staff	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 9, Graduating Student Survey, Question 54 The college/school's administration responded to problems and issues of concern to the student body	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 9, Graduating Student Survey, Question 59 The college/school of pharmacy had processes to communicate student perspectives to the faculty or administration	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 9, Graduating Student Survey, Question 60 Faculty, administrators and staff served as positive role models for students	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 9, Graduating Student Survey, Question 61 Preceptors modeled professional attributes and behaviors.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 9, Graduating Student Survey, Question 63 I was aware of expected behaviors with respect to professional and academic conduct.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 9, Alumni Survey, Question 13 The college/school communicates effectively with alumni about college/school activities.	ADFASI, DOA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 9, Alumni Survey, Question 15 The college/school encourages alumni to stay involved.	ADFASI, DOA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 9, Alumni Survey, Question 16 When I was a student the faculty displayed respect for their colleagues and students.	ADFASI, DOA, DAPA	Biennially, Spring	Executive Committee Faculty

Standard 9, Alumni Survey, Question 17 When I was a student faculty, administrators, and staff served as positive role models for students	ADFASI, DOA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 9, Preceptor Survey, Question 38 I have ongoing contact with the Office of Experiential Education.	ADFASI, DOA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
OTHER DOCUMENTATION			

Standard 10 – Curriculum Design, Delivery, and Oversight			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Description of curricular and degree requirements, including elective didactic and experiential expectations	ADAP, DSA	Every 3rd Year	AAMS Website
A map/cross-walk of the curriculum (didactic and experiential) to the professional competencies and outcome expectations of the program	PEC, EDCA, DOA	Every 3rd Year	AAMS
A map/cross-walk of the curriculum to Appendix 1 of the ACPE Standards	PEC, DOA	Every 3rd Year	AAMS
Curriculum vitae of faculty teaching within the curriculum	Dean's Office	Every 3rd Year	AAMS
Tabular display of courses, faculty members assigned to each course and their role, and credentials supporting the teaching assignments	Dean's Office, Department Heads	Every 3rd Year	AAMS
List of the professional competencies and outcome expectations for the professional program in pharmacy	DPP, PEC	Every 3rd Year	AAMS Website
A list of the members of the Curriculum Committee (or equivalent) with details of their position/affiliation to the college or school	PEC	Every 3rd Year	AAMS
A list of the charges, assignments and major accomplishments of the Curriculum Committee in the last 1-3 years	PEC	Updated Annually	AAMS Faculty, Staff, Students
Examples of instructional tools, such as portfolios, used by students to document self-assessment of, and reflection on, learning needs, plans and achievements, and professional growth and development	DOEECC	Every 3rd Year	AAMS
Sample documents used by faculty, preceptors and students to evaluate learning experiences and provide formative and/or summative feedback	DOA, EDCA	Every 3rd Year	AAMS

Policies related to academic integrity	ADAP, DSA	Every 3rd Year	AAMS Faculty, Staff, Students Website
Policies related to experiential learning that ensures compliance with Key Element 10.5 (professional attitudes and behaviors development)	ADAP, DSA, EDCA	Every 3rd Year	AAMS
Examples of instructional methods employed by faculty and the extent of their employment to actively engage learners	ADAP, DPP, PEC	Every 3rd Year	AAMS
Examples of instructional methods employed by faculty and the extent of their employment to integrate and reinforce content across the curriculum	ADAP, DPP, PEC	Every 3rd Year	AAMS
Examples of instructional methods employed by faculty and the extent of their employment to provide opportunity for mastery of skills	ADAP, DPP, PEC	Every 3rd Year	AAMS
Examples of instructional methods employed by faculty and the extent of their employment to instruct within the experiential learning program	ADAP, EDCA	Every 3rd Year	AAMS
Examples of instructional methods employed by faculty and the extent of their employment to stimulate higher-order thinking, problem solving, and clinical-reasoning skills	ADAP, DPP, PEC	Every 3rd Year	AAMS
Examples of instructional methods employed by faculty and the extent of their employment to foster self-directed lifelong learning skills and attitudes	ADAP, DPP, PEC	Every 3rd Year	AAMS
Examples of instructional methods employed by faculty and the extent of their employment to address/accommodate diverse learning styles	ADAP, DPP, PEC	Every 3rd Year	AAMS
Examples of instructional methods employed by faculty and the extent of their employment to incorporate meaningful interprofessional learning opportunities	ADAP, DPP, DIPE	Every 3rd Year	AAMS
All course syllabi (didactic and experiential)	ADAP, DPP, EDCA, DGP		AAMS
Standard 10, Faculty Survey, Question 9 The curriculum oversight processes are effective	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 10, Faculty Survey, Question 32 The organization and structure of the curriculum is clear.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 10, Faculty Survey, Question 33 I understand how my instructional content fits into the curriculum	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty

Standard 10, Faculty Survey, Question 34 The curriculum is taught at a depth that supports understanding of central concepts and principles	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 10, Faculty Survey, Question 35 Curricular collaboration among disciplines is encouraged at my college/school	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 10, Faculty Survey, Question 36 The college/school uses programmatic assessment data to improve the curriculum.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 10, Graduating Student Survey, Question 31 I developed the skills needed to prepare me for continuous professional development and self-directed life-long learning.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 10, Graduating Student Survey, Question 32 I was provided opportunities to engage in active learning (e.g., laboratories, recitations, student portfolios, problem-based learning, in-class activities)	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 10, Graduating Student Survey, Question 33 Elective didactic courses permitted exploration of and/or advanced study in areas of professional interest.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 10, Graduating Student Survey, Question 34 My introductory pharmacy practice experiences were valuable in helping me to prepare for my advanced pharmacy practice experiences.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 10, Graduating Student Survey, Question 35 My introductory pharmacy practice experiences permitted my involvement in direct patient care responsibilities in both community and institutional settings	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 10, Graduating Student Survey, Question 36 My introductory pharmacy practice experiences were of high quality	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 10, Graduating Student Survey, Question 63 I was aware of expected behaviors with respect to professional and academic conduct.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 10, Graduating Student Survey, Question 68 I was aware of opportunities to participate in research activities with faculty.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 10, Alumni Survey, Question 19 The curriculum provided opportunities to engage in active	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty

learning (e.g., laboratories, recitations, student portfolios, problem-based learning)			
Standard 10, Alumni Survey, Question 20 I was encouraged to assume responsibility for my own learning	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 10, Alumni Survey, Question 24 Elective didactic courses permitted exploration of and/or advanced study in areas of professional interest	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 10, Preceptor Survey, Question 10 I receive the results from students' evaluations of my rotation.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 10, Preceptor Survey, Question 17 The assessment tools provided to me for my site are suitable for measuring student performance.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
OTHER DOCUMENTATION			

Standard 11 – Interprofessional Education (DIPE)			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Vision, mission, and goal statements related to interprofessional education	DIPE	Every 3rd Year	AAMS, Faculty, Students
Statements addressing interprofessional education and practice contained within student handbooks and/or catalogs	DIPE, ADAP, DSA	Every 3rd Year	AAMS, Faculty, Students
Relevant syllabi for required and elective didactic and experiential education course that incorporate elements of interprofessional education to document that concepts are reinforced throughout the curriculum and that interprofessional education related skills are practiced at appropriate times during pre-APPE	DIPE	Every 3rd Year	AAMS
Student IPPE and APPE evaluation data documenting the extent of exposure ton interprofessional, team-based patient care	DIPE, EDCA	Annually, by June 1 st	AAMS, Faculty, Students
Outcome assessment data summarizing students' overall achievement of expected interprofessional education outcomes in the pre-APPE and APPE curriculum	DIPE, EDCA	Annually, by June 1 st	AAMS, Faculty, Students
Standard 11, Graduating Student Survey, Question 11 The learning experience with other professions students	ADFASI, DOA	Annually, Spring	Executive Committee Faculty

helped me gain a better understanding of how to be part of a multi-disciplinary team to improve patient outcomes			
Standard 11, Graduating Student Survey, Question 46 My pharmacy practice experiences allowed me to collaborate with other health care professionals	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
OTHER DOCUMENTATION			

Standard 12 – Pre-Advanced Pharmacy Practice Experiences (Pre-APPE) Curriculum			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Description of curricular and degree requirements, including elective didactic and experiential expectations	ADAP, DPP, DSA	Every 3rd Year	AAMS Website
A tabular display of courses, faculty members assigned to each course and their role, and credentials supporting the teaching assignments	PEC	Every 3rd Year	AAMS
Curriculum maps documenting breadth and depth of coverage of Appendix 1 content and learning expectations in the professional (and, if appropriate, preprofessional) curriculum	PEC, DOA	Every 3rd Year	AAMS
Examples of curricular and co-curricular experiences made available to students to document developing competence in affective domain-related expectations of Standards 3 and 4	PEC, DOECC	Every 3rd Year	AAMS
Outcome assessment data of student preparedness to progress to advanced pharmacy practice experiences (e.g., comprehensive assessments of knowledge, skills, and competencies)	APT, DOA, EDCA	Annually, by June 1 st	AAMS, DOA, PEC
Description of the introductory pharmacy practice experiences learning program and its goals, objectives, and time requirements	EDCA, EXP	Every 3rd Year	AAMS
List of simulation activities and hours counted within the introductory pharmacy practice experiences 300 hour requirement	EDCA	Every 3rd Year	AAMS
Introductory pharmacy practice experiences course syllabi including general and rotation-specific learning objectives and extent of DIPE exposure	EDCA	Every 3rd Year	AAMS

Introductory pharmacy practice experiences student and preceptor manuals	EDCA	Every 3rd Year	AAMS
Introductory pharmacy practice experiences student and preceptor assessment tools	EDCA	Every 3rd Year	AAMS
Introductory pharmacy practice experiences preceptor recruitment and training manuals and/or programs	EDCA	Every 3rd Year	AAMS
Outcome assessment data summarizing overall student achievement of Pre-APPE educational outcomes	EDCA	Annually, by June 1 st	Executive Committee Faculty
Standard 12, Faculty Survey, Question 34 The curriculum is taught at a depth that supports understanding of central concepts and principles	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 12, Graduating Student Survey, Question 32 I was provided opportunities to engage in active learning (e.g., laboratories, recitations, student portfolios, problem-based learning, in-class activities	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 12, Graduating Student Survey, Question 34 My introductory pharmacy practice experiences were valuable in helping me to prepare for my advanced pharmacy practice experiences	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 12, Graduating Student Survey, Question 35 My introductory pharmacy practice experiences permitted my involvement in direct patient care responsibilities in both community and institutional settings.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 12, Graduating Student Survey, Question 36 My introductory pharmacy practice experiences were of high quality.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 12, Graduating Student Survey, Question 66 The college/school's faculty and administration encouraged me to participate in regional, state, or national pharmacy meetings.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 12, Graduating Student Survey, Question 67 The college/school of pharmacy was supportive of student professional organizations.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 12, Graduating Student Survey, Question 77 I am prepared to enter pharmacy practice.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 12, Graduating Student Survey, Question 78 If I were starting my college career over again I would choose to study pharmacy.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty

Standard 12, Graduating Student Survey, Question 79 If I were starting my pharmacy program over again I would choose the same college/school of pharmacy	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 12, Alumni Survey, Question 19 When I was a student the curriculum provided opportunities to engage in active learning (e.g., laboratories, recitations, student portfolios, problem-based learning)	ADFASI, DOA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 12, Alumni Survey, Question 22 When I was a student the curriculum prepared me to enter my first pharmacy job	ADFASI, DOA, DAPA	Biennially, Spring	Executive Committee Faculty
OTHER DOCUMENTATION			

Standard 13 – Advanced Pharmacy Practice Experiences (APPE) Curriculum			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
The objectives for each introductory and advanced pharmacy practice experience with the responsibilities of the student, preceptor, and site, as applicable	EDCA, DOECC, IPPEC	Every 3rd Year	AAMS
A map/crosswalk of all advanced pharmacy practice experiences against the activities listed in Appendix 2 of the Standards. <i>(Note: Each practice experience should be mapped to the activities listed and the map should demonstrate that students' experiences will cover all the activities. The list of activities mapped, however, can include activities not specifically listed in Appendix 2.)</i>	EDCA, DOECC	Every 3rd Year	AAMS
Overview of APPE curriculum (duration, types of required and elective rotations, etc.)	EDCA, DOECC	Every 3rd Year	AAMS
Advanced pharmacy practice experience course syllabi including general and experience-specific learning objectives	EDCA, DOECC	Every 3rd Year	AAMS
Advanced pharmacy practice experience student and preceptor manual	EDCA, DOECC	Every 3rd Year	AAMS
Advanced pharmacy practice experience student and preceptor assessment tools	EDCA, DOECC	Every 3rd Year	AAMS
Preceptor recruitment and training manuals and/or programs	EDCA, DOECC	Every 3rd Year	AAMS
Student advanced pharmacy practice experience evaluation data documenting extent of exposure to diverse patient populations and interprofessional, team-based patient care	EDCA, DIPE, DIPD	Annually, by June 1 st	DOA, AAMS, Executive Committee, PEC

Outcome assessment data summarizing students' overall achievement of advanced pharmacy practice experience educational outcomes	EDCA, DOEEC, DoA	Annually, by June 1 st	DOA, AAMS, Executive Committee, PEC
List of current preceptors with details of credentials (including licensure) and practice sit	EDCA, DOEEC	Every 3rd Year	AAMS
Standard 13, Graduating Student Survey, Question 37 In the community pharmacy setting, I was able to engage in direct patient care	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 13, Graduating Student Survey, Question 38 In the ambulatory care setting, I was able to engage in direct patient care.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 13, Graduating Student Survey, Question 39 In the hospital or health-system pharmacy setting, I was able to engage in direct patient care	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 13, Graduating Student Survey, Question 40 In the inpatient/acute care setting, I was able to engage in direct patient care	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 13, Graduating Student Survey, Question 41 The need for continuity of care (e.g., acute, chronic, and wellness promoting patient care services) in outpatient and inpatient settings was emphasized in the advanced pharmacy practice experiences	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 13, Graduating Student Survey, Question 42 The variety of the available advanced pharmacy practice experience electives met my needs as a student	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 13, Graduating Student Survey, Question 43 I was academically prepared to enter my advanced pharmacy practice experiences	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 13, Graduating Student Survey, Question 44 My advanced pharmacy practice experiences were of high quality.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 13, Graduating Student Survey, Question 45 My pharmacy practice experiences allowed me to have direct interaction with diverse patient populations (e.g., age, gender, socioeconomic, ethnic and/or cultural background, disease states, etc.).	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 13, Graduating Student Survey, Question 46 My pharmacy practice experiences allowed me to collaborate with other health care professionals	ADFASI, DoA	Annually, Spring	Executive Committee Faculty

Standard 13, Alumni Survey, Question 21 When I was a student I was academically prepared to enter my advanced pharmacy practice experiences.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 13, Alumni Survey, Question 25 When I was a student my pharmacy practice experiences were of high quality	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
OTHER DOCUMENTATION			

Standard 14 – Student Services			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Synopsis of the Curriculum Vitae of the student affairs administrative officer	ADAP	Every 3rd Year	AAMS
An organizational chart depicting student services and the corresponding responsible person(s)	ADAP, DSA	Every 3rd Year	AAMS
Student Handbook and/or Catalog (college, school or university), and copies of additional information distributed to students regarding student service elements (financial aid, health insurance, etc.)	ADAP, DSA	Reviewed & Updated Annually	AAMS
Copies of policies that ensure nondiscrimination and access to allowed disability accommodations	ADAP, DSA	Every 3rd Year	AAMS
Student feedback on the college/school's self-study	Self-Study Chair(s), DSA	Every 3rd Year	Executive Committee, AAMS, Faculty
The Student Handbook	ADAP, DSA	Reviewed & Updated Annually	AAMS, Students Website
Standard 14, Graduating Student Survey, Question 47 College/school provided access to academic advising.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 14, Graduating Student Survey, Question 48 College/school provided access to guidance on career planning	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 14, Graduating Student Survey, Question 49 College/school provided access to accommodation services as defined by the Americans with Disabilities Act (ADA)	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 14, Graduating Student Survey, Question 50 College/school provided access to financial aid advising.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 14, Graduating Student Survey, Question 51 College/school provided access to student health and	ADFASI, DoA	Annually, Spring	Executive Committee Faculty

wellness services (e.g. immunizations, counseling services, campus pharmacy, primary care clinics, etc.).			
Standard 14, Graduating Student Survey, Question 53 Information was made available to me about additional educational opportunities (e.g., residencies, fellowships, graduate school)	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 14, Graduating Student Survey, Question 57 The college/school of pharmacy was welcoming to students with diverse backgrounds.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 14, Graduating Student Survey, Question 58 I know how to utilize college/school policies dealing with harassment and discrimination.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 14, Alumni Survey, Question 23 When I was a student information was made available to me about additional educational opportunities (e.g. residencies, fellowships, graduate school)	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 14, Preceptor Survey, Question 13 I know how to utilize college/school policies dealing with harassment and discrimination	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee EDCA, Faculty
OTHER DOCUMENTATION			

Standard 15 – Academic Environment			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION **
URL or link to program information on the college or school's website	COO, MIIT	Every 3rd Year	AAMS
Copy of student complaint policy related to college or school adherence to ACPE standards	ADAP, DSA	Every 3rd Year	AAMS (Other?)
Number and nature of student complaints related to college or school adherence to ACPE standards (inspection of the file by evaluation teams during site visits)	Dean's Office, ADAP	Annually, by August 1 st	AAMS
List of committees involving students with names and professional years of current student members	Dean's Office, DSA	Updated Annually	Faculty, Staff, Students
College or school's code of conduct (or equivalent) addressing professional behavior	ADAP, DSA	Reviewed & Updated Annually	AAMS, Website

<ul style="list-style-type: none"> • College or school's Catalog • Recruitment brochures • Student Handbook • The Student Complaints File 	ADAP, DSA	Reviewed & Updated Annually	AAMS
Standard 15, Faculty Survey, Question 38 The college/school has an effective process to manage academic misconduct by students (e.g. plagiarism)	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 15, Faculty Survey, Question 39 The college/school has an effective process to manage professional misconduct by students (e.g. repeated tardiness/absences, drug diversion).	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 15, Graduating Student Survey, Question 52 The college/school of pharmacy provided timely information about news, events, and important matters within the college/school of pharmacy	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 15, Graduating Student Survey, Question 55 I was aware of the process for raising issues with the college/school administration	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 15, Graduating Student Survey, Question 56 I was aware that student representatives served on college/school committees with responsibility for curriculum and other matters	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 15, Graduating Student Survey, Question 58 I know how to utilize college/school policies dealing with harassment and discrimination	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 15, Graduating Student Survey, Question 64 The college/school had an effective process to manage academic misconduct by students (e.g. plagiarism)	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 15, Graduating Student Survey, Question 65 The college/school had an effective process to manage professional misconduct by students (e.g. repeated tardiness/absences, drug diversion)	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 15, Graduating Student Survey, Question 68 I was aware of opportunities to participate in research activities with faculty	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 15, Preceptor Survey, Question 11 I know how to utilize the process that exists within the	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty

college/school to effectively manage academic misconduct (e.g., plagiarism) by students			
Standard 15, Preceptor Survey, Question 12 I know how to utilize the process that exists within the college/school to effectively manage professional misconduct (e.g., repeated tardiness/absences, drug diversion) by students	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
OTHER DOCUMENTATION			

Standard 16 – Admissions			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
The list of preprofessional requirements for admission into the professional degree program	ADAP, DSA, Admissions	Annually, by June 1 st	AAMS. Website
Copies of Early Assurance Program agreement(s) between the college or school and the associated institution(s) or student (if applicable)	ADAP, DSA	Annually, by June 1 st	AAMS
Enrollment data for the past three years by year and enrollment projections for the next year (if applicable, broken down by branch/campus and by pathway). Template available for download	ADAP, DSA	Annually, by September 1 st	AAMS
Organizational chart depicting Admissions unit and responsible administrator(s)	ADAP, DSA, Admissions	Every 3rd Year	AAMS
Pharmacy College Aptitude Test (PCAT) scores (mean, maximum, and minimum), if required, for the past three admitted classes (required for nonparticipating PharmCAS institutions only)	Not Required for HSOP (Participates in PharmCAS)		
GPA scores (mean, maximum, and minimum) for preprofessional coursework for the past three admitted classes (required for nonparticipating PharmCAS institutions only)	Not Required for HSOP (Participates in PharmCAS)		
GPA scores (mean, maximum, and minimum) for preprofessional science courses for the past three admitted classes (required for nonparticipating PharmCAS institutions only)	Not Required for HSOP (Participates in PharmCAS)		
Comparisons of PCAT scores (if applicable) and preprofessional GPAs with peer schools for last admitted three admitted classes (nonparticipating PharmCAS institutions will not have access to peer data)	ADAP, DSA, Admissions	Annually, by September 1 st	AAMS

List of admission committee members with name and affiliation	ADAP, DSA, Admissions	Updated Annually	AAMS
Policies and procedures regarding the admissions process including selection of admitted students, transfer of credit, and course waiver policies	ADAP, DSA, Admissions	Every 3rd Year	AAMS
Professional and technical standards for school, college, and/or university (if applicable)	ADAP, DSA, Admissions	Every 3rd Year	AAMS
Copies of instruments used during the admissions process including interview evaluation forms and assessment of written and oral communication	ADAP, DSA, Admissions	Every 3rd Year	AAMS
Section of Student Handbook and/or Catalog (college, school, or university) regarding admissions	ADAP, DSA, Admissions	Every 3rd Year	AAMS
Link to websites (or documentation of other mechanisms) that provide to the public information on required indicators of quality	ADAP, DSA, Admissions	Every 3rd Year	AAMS
Applications and Admissions/Enrollments for the past three years	ADAP, DSA, Admissions	Annually, by September 1 st	AAMS, Executive Committee
Enrollment data for the past three years by year and gender	ADAP, DSA, Admissions	Annually, by September 1 st	AAMS, Executive Committee
Enrollment data for the past three years by year and race/ethnicity	ADAP, DSA, Admissions	Annually, by September 1 st	AAMS, Executive Committee
Standard 16, PCAT PCAT Composite Percentile Rank for Past 3 Years	ADAP, DSA, Admissions	Annually, by September 1 st	AAMS, Executive Committee
Standard 16, GPA Overall Grade Point Average (GPA) for Past 3 Years	ADAP, DSA, Admissions	Annually, by September 1 st	AAMS, Executive Committee
Standard 16, Science GPA Science Grade Point Average (GPA) for Past 3 Years	ADAP, DSA, Admissions	Annually, by September 1 st	AAMS, Executive Committee
Mean PCAT Scores for Admitted Class for Past 3 Years Compared to Peer Schools (for participating PharmCAS institutions only)	ADAP, DSA, Admissions	A Annually, by September 1 st	AAMS, Executive Committee
Mean GPA for Admitted Class for Past 3 Years Compared to Peer Schools (for participating PharmCAS institutions only)	ADAP, DSA, Admissions	Annually, by September 1 st	AAMS, Executive Committee
Mean Science GPA for Admitted Class for Past 3 Years Compared to Peer Schools (for participating PharmCAS institutions only)	ADAP, DSA, Admissions	Annually, by September 1 st	AAMS, Executive Committee
OTHER DOCUMENTATION			

Standard 17 – Progression

ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Policies and procedures regarding student progression, early intervention, academic probation, remediation, missed course work or credit, leaves of absence, dismissal, readmission, due process, and appeals	ADAP, DSA	Every 3rd Year	AAMS, Website
Section of Student Handbook and/or Catalog (college, school, or university) regarding student progression	ADAP, DSA	Every 3rd Year	AAMS
Correlation analysis of admission variables and academic performance	ADAP, DSA, Admissions	Annually, by August 1 st	AAMS, DoA
Standard 17, On-Time Graduation Rates On-time graduation rates for the last three admitted classes (compared to national rate)	ADAP, DSA	Annually, by August 1 st	AAMS, Executive Committee
Standard 17, Percentage Total Attrition Rate Percentage total attrition rate for the last three admitted classes (compared to national rate)	ADAP, DSA	Annually, by August 1 st	AAMS, Executive Committee
Standard 17, Percentage Academic Dismissals Percentage academic dismissals for the last three admitted classes (compared to national rate)	ADAP, DSA	Annually, by August 1 st	AAMS, Executive Committee
Standard 17, Faculty Survey, Question 40 The college/school has an effective process to manage poor academic performance of students	ADAP, DSA	Annually, by August 1 st	AAMS, Executive Committee
OTHER DOCUMENTATION			

Standard 18 – Faculty and Staff - Quantitative Factors			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Organizational chart depicting all full-time faculty by department/division	Dean's Office, Department Heads	Updated Annually	AAMS, Website
ACPE Faculty Resource Report related to number of full-time and part-time faculty. Template available for download	Dean's Office	Every 3rd Year	AAMS
List of faculty turnover for the last 5 years, by department/division, with reasons for departure	Dean's Office	Every 3rd Year	AAMS
Description of coursework mapped to full-time and part-time faculty teaching in each course	DPP, DGP, Department Heads	Every 3rd Year	AAMS
List of voluntary faculty, with academic title/status and practice site; specify IPPE and/or APPE	Dean's Office, EDCA, Department Heads	Every 3rd Year	AAMS
List of key university and college or school administrators, and full-time and part-time (≥ 0.5FTE) faculty, including a	Dean's Office	Every 3rd Year	AAMS

summary of their current academic rank, primary discipline, title/position, credentials, post-graduate training, and licensure (if applicable)			
Faculty Addendum The faculty addendum is a listing of the key University/College/School officers, followed by a listing by department or division of salaried faculty with the ranking of instructor and above (list full time and part time separately), with the chair of each department/division indicated	Dean's Office, Department Heads	Every 3rd Year	AAMS
Standard 18, Faculty Survey, Question 25 The college or school has a sufficient number of staff to effectively address programmatic needs	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 18, Faculty Survey, Question 30 The college/school has a sufficient number of faculty	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Allocation of Faculty Effort (total for all faculty with ≥ 0.5FTE) (Auto Populated?)	Dean's Office	Every 3rd Year	AAMS
Distribution of Full-Time Pharmacy Faculty by Rank and Years in Rank (Auto Populated?)	Dean's Office	Every 3rd Year	AAMS
OTHER DOCUMENTATION			

Standard 19 – Faculty and Staff - Qualitative Factors			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
List of active research areas of faculty and an aggregate summary of faculty publications/presentations over the past three years.	Dean's Office, ADR, DSTL, Department Heads	Annually by October 1	AAMS, Executive Committee
Procedures employed to promote a conceptual understanding of contemporary practice, particularly among non-pharmacist faculty	Dean's Office, DAPA, Department Heads	Updated Annually By June 1	AAMS
Policies and procedures related to faculty recruitment, performance review, promotion, tenure (if applicable), and retention	Dean's Office	Every 3rd Year	AAMS

<ul style="list-style-type: none"> • Copy of the Faculty Handbook • CVs of administrators, faculty and staff • If utilized, examples of faculty portfolios, documenting teaching, research and service activities 	Dean's Office	Every 3rd Year	AAMS
Standard 19, Faculty Survey, Question 7 I am aware that my college/school has policies for dealing with harassment and discrimination	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 13 I have access to documents that detail policies related to my performance as a faculty member	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 14 My performance assessment criteria are explicit and clear.	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 15 My allocation of effort has been clearly stated	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 16 Criteria for my performance assessment are consistent with my responsibilities	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 17 I receive formal feedback on my performance on a regular basis	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 18 The performance feedback I receive is constructive	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 19 The college/school consistently applies promotion and/or tenure policies and procedures	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 20 I receive guidance on career development	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 21 Funds are available to support faculty development	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 22 Programs are available to orient non-practice faculty to the pharmacy profession and professional education	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 19, Faculty Survey, Question 23 Programs are available to improve teaching and to facilitate student learning	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty

Standard 19, Faculty Survey, Question 24 Programs are available to develop competence in research and/or scholarship.	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Distribution of Full-Time Pharmacy Faculty by Rank, Gender and Race/Ethnicity (auto populated?)	Individual Faculty (Auto Populated?)	Every 3rd Year	AAMS
Distribution of Full-Time Pharmacy Faculty by Rank and Highest Degree Earned (auto populated?)	Individual Faculty (Auto Populated?)	Every 3rd Year	AAMS
Distribution of Full-Time Pharmacy Faculty by Rank and Tenure Status (auto populated?)	Individual Faculty (Auto Populated?)	Every 3rd Year	AAMS
Research, Scholarly, Professional and Scientific Activity by Department:	ADR, Department Heads, DSTL	Every 3rd Year	AAMS
OTHER DOCUMENTATION			

Standard 20 – Preceptors			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
List of active preceptors with credentials and practice site	EDCA, DOECC	Every 3rd Year	AAMS
Number and percentage of required APPE precepted by non-pharmacists categorized by type of experience.	EDCA, DOECC	Every 3rd Year	AAMS
Description of practice sites (location, type of practice, student/preceptor ratios	EDCA, DOECC	Every 3rd Year	AAMS
Policies and procedures related to preceptor recruitment, orientation, development, performance review, promotion, and retention	EDCA, DOECC	Every 3rd Year	AAMS
Examples of instruments used by preceptors to assess student performance	EDCA, DOECC	Every 3rd Year	AAMS
Curriculum vitae of administrator(s) responsible for overseeing the experiential education component of the curriculum	EDCA, DOECC	Every 3rd Year	AAMS
Description of the structure, organization and administrative support of the Experiential Education office (or equivalent)	EDCA, DOECC	Every 3rd Year	AAMS
Standard 20, Graduating Student Survey, Question 61 Preceptors modeled professional attributes and behaviors.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 20, Graduating Student Survey, Question 62 Preceptors provided me with individualized instruction, guidance, and evaluation.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 20, Preceptor Survey, Question 9 I know the process for documenting and addressing student performance	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty

Standard 20, Preceptor Survey, Question 14 I am aware of the mechanism to provide feedback to the college/school	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 20, Preceptor Survey, Question 15 The criteria for evaluating my performance as a preceptor are clear	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 20, Preceptor Survey, Question 16 The specific learning expectations for the student have been clearly defined for my rotation(s).	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 20, Preceptor Survey, Question 17 The assessment tools provided to me for my site are suitable for measuring student performance	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 20, Preceptor Survey, Question 18 I know how to use the assessment tools provided to measure student performance	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 20, Preceptor Survey, Question 38 I have ongoing contact with the Office of Experiential Education.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 20, Preceptor Survey, Question 39 I receive needed support from the Office of Experiential Education	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 20, Preceptor Survey, Question 40 The student-to-preceptor ratios at my site are appropriate to maximize learning.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 20, Preceptor Survey, Question 41 The college/school has an effective continuing professional development program for me that is consistent with my preceptor responsibilities	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
OTHER DOCUMENTATION			

Standard 21 – Physical Facilities and Educational Resources			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Floor plans for college or school's facilities and descriptions of the use(s) of available space	Dean's Office, COO	Every 3rd Year	AAMS
Description of shared space and how such space promotes interprofessional interaction	Dean's Office, COO, DIPE	Every 3rd Year	AAMS
Analysis of the quantity and quality of space available to the program and plans to address identified inadequacies.	Dean's Office, DPP, ADFASI	Every 3rd Year	AAMS

Documentation of Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC) or other nationally recognized accreditation of animal care facilities, if applicable	ADR	Reviewed and Updated Annually by June 1	AAMS
Description of educational resources available to faculty, preceptors, and students (library, internet access, etc.)	Dean's Office, COO, DDIC	Every 3rd Year	AAMS
CV of the librarian(s) who act as primary contacts for the pharmacy program	Dean's Office	Every 3rd Year	AAMS
Required Documentation for On-Site Review Plans/architectural drawings of the physical facilities (if not feasible to provide as part of Self-Study Report)	Dean's Office, COO	Every 3rd Year	AAMS, Site Visit Team
Standard 21, Faculty Survey, Question 26 Faculty office space permits accomplishment of my responsibilities.	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 21, Faculty Survey, Question 27 The college or school has resources to effectively address research/scholarship needs	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 21, Faculty Survey, Question 28 The college or school has resources to effectively address instructional technology needs.	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 21, Faculty Survey, Question 29 The college or school has physical facilities to effectively support academic program needs	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 21, Faculty Survey, Question 31 My campus work environment is safe	ADFASI, DOA	Biennially, Spring	Executive Committee Faculty
Standard 21, Graduating Student Survey, Question 68 I was aware of opportunities to participate in research activities with faculty	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 21, Graduating Student Survey, Question 69 My campus learning environment was safe	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 21, Graduating Student Survey, Question 70 The information technology resources provided by the college/school of pharmacy and/or elsewhere on campus were conducive to learning.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 21, Graduating Student Survey, Question 71 The classrooms in the college/school of pharmacy or elsewhere on campus were conducive to learning.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty

Standard 21, Graduating Student Survey, Question 72 The laboratories and other non-classroom environments were conducive to learning	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 21, Graduating Student Survey, Question 73 The study areas in the college/school of pharmacy or elsewhere on campus were conducive to learning.	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 21, Graduating Student Survey, Question 74 The common spaces such as lounges, lobbies, or other areas for relaxation and socialization available in the college/school of pharmacy or elsewhere on campus met my needs	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 21, Graduating Student Survey, Question 75 Access to educational resources (e.g., library, electronic data bases) was conducive to learning	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 21, Graduating Student Survey, Question 76 During pharmacy practice experiences, access to educational resources (e.g., library, electronic data bases) was conducive to learning	ADFASI, DOA	Annually, Spring	Executive Committee Faculty
Standard 21, Preceptor Survey, Question 42 There are adequate facilities and resources at the practice site to precept students	ADFASI, DOA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 21, Preceptor Survey, Question 43 The college/school provides me with access to library and educational resources	ADFASI, DOA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
OTHER DOCUMENTATION			

Standard 22 – Practice Facilities			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Examples of affiliation agreements between college/school and practice sites (all agreements will be reviewed during site visits)	EDCA, DOEECC	Every 3rd Year	AAMS
Description of practice sites (location, type of practice, student:preceptor ratios) and involvement in IPPE, APPE, or both	EDCA, DOEECC	Every 3rd Year	AAMS
Policies and procedures related to site selection, recruitment, and assessment	EDCA, DOEECC	Every 3rd Year	AAMS
Examples of quality improvements made to improve student learning outcomes as a result of site/facility assessment	EDCA, DOEECC	Every 3rd Year	AAMS

ACPE IPPE Capacity Chart. Template available to download.	EDCA, IPPEC	Every 3rd Year	AAMS
ACPE APPE Capacity Chart. Template available to download	EDCA, DOECC	Every 3rd Year	AAMS
Required Documentation for On-Site Review A list of practices sites (classified by type of practices), specifying IPPE and/or APPE, with number of students served, interaction with other health professional students and practitioners, the number of pharmacy or other preceptors serving the facility, and their licensure status. (Sites used in the past academic year should be identified.)	EDCA, DOECC, IPPEC	Every 3rd Year	AAMS, Site Visit Team Members
OTHER DOCUMENTATION			

Standard 23 – Financial Resources			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
Detailed budget plan or proforma (previous, current, and subsequent years)	Dean’s Office, COO	Updated Annually	AAMS
Description of college or school’s budgetary processes	Dean’s Office, COO	Every 3rd Year	AAMS
In-state and out-of-state tuition compared to peer schools	ADAP, DSA	Annually, by November 1 st	AAMS
Standard 23, Faculty Survey, Question 27 The college or school has resources to effectively address research/scholarship needs.	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 23, Faculty Survey, Question 28 The college or school has resources to effectively address instructional technology needs	ADFASI, DoA	Biennially, Spring	Executive Committee Faculty
Standard 23, Preceptor Survey, Question 42 There are adequate facilities and resources at the practice site to precept students	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 23, In-State Tuition In-state tuition for past five years compared to national data	ADAP, DSA	Annually, by November 1 st	AAMS, Executive Committee
Standard 23, Out-of-state Tuition Out-of-state tuition for past five years compared to national data	ADAP, DSA	Annually, by November 1 st	AAMS, Executive Committee
Standard 23, Grant Funding Grant funding for past five years compared to national data	ADR, COO	Annually, by November 1 st	AAMS, Executive Committee

In-state tuition for past five years, with peer school comparisons	ADAP, DSA	Annually, by November 1 st	AAMS, Executive Committee
Out-of-state tuition for past five years, with peer school comparisons	ADAP, DSA	Annually, by November 1 st	AAMS, Executive Committee
Total grant funding for past five years, with peer school comparisons	ADR, COO	Annually, by November 1 st	AAMS, Executive Committee
NIH funding for past five years, with peer school comparisons	ADR, COO	Annually, by November 1 st	AAMS, Executive Committee
Faculty salaries by academic rank expressed as a percentile against a selected peer group of colleges and schools. <i>(Note: This report is available from AACCP on request.). Request form available for download.</i>	Dean's Office, COO	Annually, by November 1 st	AAMS, Executive Committee
OTHER DOCUMENTATION			

Section III: Assessment of Standards and Key Elements

Standard 24 – Assessment of Elements for Section I: Educational Outcomes			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
College or school's curriculum assessment plan(s)	ADFASI, DoA	Every 3rd Year	AAMS
Description of formative and summative assessments of student learning and professional development used by college or school	ADFASI, DPP, DoA	Every 3rd Year	AAMS
Description of standardized and comparative assessments of student learning and professional development used by college or school	ADFASI, DPP, DoA	Every 3rd Year	AAMS
Description of how the college or school uses information generated within the curriculum assessment plan(s) to advance quality within its Doctor of Pharmacy program	DPP, PEC, ADFASI, DoA	Every 3rd Year	AAMS
Standard 24, Graduating Student Survey, Question 12 The PharmD program prepared me to apply knowledge from the foundational pharmaceutical and biomedical sciences to the provision of patient care	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 13 The PharmD Program prepared me to apply knowledge from the clinical sciences to the provision of patient care	ADFASI, DoA	Annually, Spring	Executive Committee Faculty

Standard 24, Graduating Student Survey, Question 14 The PharmD program prepared me to evaluate scientific literature	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 15 The PharmD program prepared me to provide medication expertise as part of patient-centered care	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 16 The PharmD Program prepared me to optimize the safety and efficacy of medication use systems (e.g., dispensing, administration, effects monitoring) to manage patient healthcare needs.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 17 The PharmD Program prepared me to design strategies to manage chronic disease and improve health and wellness	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 18 The PharmD program prepared me to assess the health needs of a given patient population	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 19 The PharmD program prepared me to provide patient-centered care based on evidence-based best practices	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 20 The PharmD program prepared me to design, implement, and evaluate viable solutions to patient care problems	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 21 The PharmD program prepared me to use effective strategies to educate patients, healthcare professionals, and caregivers to improve patient care	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 22 The PharmD program prepared me to advocate for the patient's best interest.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 23 The PharmD program prepared me to engage as a member of an interprofessional healthcare team	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 24 The PharmD program prepared me to identify cultural disparities in healthcare	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 25 The PharmD program prepared me to recognize and	ADFASI, DoA	Annually, Spring	Executive Committee Faculty

address cultural disparities in access to and delivery of health care.			
Standard 24, Graduating Student Survey, Question 26 The PharmD program prepared me to effectively communicate (verbal, non-verbal, written) when interacting with individuals, groups, and organizations	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 27 The PharmD program prepared me to examine and reflect on how my behavior and choices affect my personal and professional growth.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 28 The PharmD program prepared me to accept responsibility for creating and achieving shared goals	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 29 The PharmD program prepared me to develop new ideas and approaches to practice	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Graduating Student Survey, Question 30 The PharmD Program prepared me to act in a manner consistent with the trust given to pharmacists by patients, other healthcare providers, and society.	ADFASI, DoA	Annually, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 26 The PharmD program prepared me to apply knowledge from the foundational pharmaceutical and biomedical sciences to the provision of patient care	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 27 The PharmD program prepared me to apply knowledge from the clinical sciences to the provision of patient care	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 28 The PharmD program prepared me to evaluate scientific literature.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 29 The PharmD program prepared me to provide medication expertise as part of patient-centered care	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 30 The PharmD program prepared me to optimize the safety and efficacy of medication use systems (e.g., dispensing, administration, effects monitoring) to manage patient healthcare needs.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty

Standard 24, Alumni Survey, Question 31 The PharmD program prepared me to design strategies to manage chronic disease and improve health and wellness	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 32 The PharmD program prepared me to assess the health needs of a given patient population	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 33 The PharmD program prepared me to provide patient-centered care based on evidence-based best practices	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 34 The PharmD program prepared me to design, implement, and evaluate viable solutions to patient care problems	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 35 The PharmD program prepared me to use effective strategies to educate patients, healthcare professionals, and caregivers to improve patient care	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 36 The PharmD program prepared me to advocate for the patient's best interest.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 37 The PharmD program prepared me to engage as a member of an interprofessional healthcare team	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 38 The PharmD program prepared me to identify cultural disparities in healthcare	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 39 The PharmD program prepared me to recognize and address cultural disparities in access to and delivery of health care	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 40 The PharmD program prepared me to effectively communicate (verbal, non-verbal, written) when interacting with individuals, groups, and organizations	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 41 The PharmD program prepared me to examine and reflect on how my behavior and choices affect my personal and professional growth.	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 42 The PharmD program prepared me to accept responsibility for creating and achieving shared goals	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty

Standard 24, Alumni Survey, Question 43 The PharmD program prepared me to develop new ideas and approaches to practice	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Alumni Survey, Question 44 The PharmD program prepared me to act in a manner consistent with the trust given to pharmacists by patients, other healthcare providers, and society	ADFASI, DoA, DAPA	Biennially, Spring	Executive Committee Faculty
Standard 24, Preceptor Survey, Question 19 The PharmD program prepares students to apply knowledge from the foundational pharmaceutical and biomedical sciences to the provision of patient care.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 20 The PharmD program prepares students to apply knowledge from the clinical sciences to the provision of patient care	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 21 The PharmD program prepares students to evaluate scientific literature	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 22 The PharmD program prepares students to provide medication expertise as part of patient-centered care	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 23 The PharmD program prepares students to optimize the safety and efficacy of medication use systems (e.g., dispensing, administration, effects monitoring) to manage patient healthcare needs	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 24 The PharmD program prepares students to design strategies to manage chronic disease and improve health and wellness.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 25 The PharmD program prepares students to assess the health needs of a given patient population	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 26 The PharmD program prepares students to provide patient-centered care based on evidence-based best practices	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 27 The PharmD program prepares students to design, implement, and evaluate viable solutions to patient care problems	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty

Standard 24, Preceptor Survey, Question 28 The PharmD program prepares students to use effective strategies to educate patients, healthcare professionals, and caregivers to improve patient care	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 29 The PharmD program prepares students to advocate for the patient's best interest	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 30 The PharmD program prepares students to engage as a member of an interprofessional healthcare team	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 31 The PharmD program prepares students to identify cultural disparities in healthcare	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 32 The PharmD program prepares students to recognize and address cultural disparities in access to and delivery of health care.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 33 The PharmD program prepares students to effectively communicate (verbal, non-verbal, written) when interacting with individuals, groups, and organizations	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 34 The PharmD program prepares students to examine and reflect on how their behavior and choices affect their personal and professional growth.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 35 The PharmD program prepares students to accept responsibility for creating and achieving shared goals.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 36 The PharmD program prepares students to develop new ideas and approaches to practice	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
Standard 24, Preceptor Survey, Question 37 The PharmD program prepares students to act in a manner consistent with the trust given to pharmacists by patients, other healthcare providers, and society.	ADFASI, DoA, EDCA	Biennially, Spring	Executive Committee EDCA, Faculty
OTHER DOCUMENTATION			

Standard 25 – Assessment Elements for Section II: Structure and Process

ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION *
The college or school's assessment plan (or equivalent)	ADFASI, DoA	Every 3rd Year	AAMS
List of the individual(s) and/or committee(s) involved in developing and overseeing the evaluation plan	ADFASI, DoA	Updated Annually	AAMS
Examples of instruments used in assessment and evaluation (for all mission-related areas)	ADFASI, DoA	Every 3rd Year	AAMS
Complete Data Set from the AACP Standardized Surveys	ADFASI, DoA	Every 3rd Year	AAMS
Responses to Open-Ended Questions on AACP Standardized Surveys	ADFASI, DoA	Every 3rd Year	AAMS
OTHER DOCUMENTATION			

HSOP ASSESSMENT FRAMEWORK – PART II

ASSESSMENTS RELATED TO HSOP VISION, MISSION & STRATEGIC PLAN

Section I: Vision & Mission

<i>Item</i>	<i>RESPONSIBLE PARTY</i>	<i>OCCURENCE</i>	<i>DISSEMINATION</i>
Vision: The Auburn University Harrison School of Pharmacy is a global destination for pharmacy education, renowned for its innovative curriculum, impactful research, and clinical practice models that transform patient and health system outcomes.	Dean's Office, ADFASI, DSO		
Data Point 1 – TBD	Dean's Office, ADFASI, DSO	Annually By July 1 st	
Data Point 2 – TBD	Dean's Office, ADFASI, DSO	Annually By July 1 st	
Mission: The Harrison School of Pharmacy serves the land-grant mission of Auburn University through education,	Dean's Office, ADFASI, DSO		

research, and patient care that has direct relevance to the citizens of Alabama and human health.			
Data Point 1 – TBD	Dean’s Office, ADFASI, DSO	Annually By July 1 st	
Data Point 2 – TBD	Dean’s Office, ADFASI, DSO	Annually By July 1 st	

Section II: Strategic Plan

Strategic Priority #1 - Harrison School of Pharmacy researchers will engage in cutting-edge research that improves peoples’ lives, addresses critical societal issues, creates new knowledge and products, and generates extramural funding			
<i>Focus Areas</i>	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION
Extramural Funding	ADR		
Goal 1 – Improve National ranking by growing the School’s extramural funding portfolio	ADR	Annually By July 1 st	
Goal 2 – Increase the number of research-active funded investigators	ADR, DRDS	Annually By July 1 st	
Scholarly Impact	ADR		
Goal 1 – Increase the number of high impact scholarly publications by HSOP faculty	ADR, DRDS, DSTL	Annually By July 1 st	
Goal 2 – Develop a “works in progress” forum to provide faculty with critical peer feedback that will improve the quality of publications	ADR, DRDS, DSTL	Annually By July 1 st	
Training & Career Development	ADR		
Goal 1 – Establish externally funded institutional career development programs	ADR, DRDS	Annually By July 1 st	
Goal 2 – Create formal infrastructure for faculty research development and grant writing	ADR, DRDS	Annually By July 1 st	
Critical Infrastructure	ADR		
Goal 1 – Develop a 5- and 10-year infrastructure plan that fuels innovative research	ADR, COO	Annually By July 1 st	
Goal 2 – Dynamically respond to pre-award and post-award needs of investigators.	ADR, DRDS	Annually By July 1 st	
Goal 3 – Grow the number of graduate students and post docs to support research funding	ADR, DGP	Annually By July 1 st	

Strategic Priority #2 - The Harrison School of Pharmacy will create a powerful and inspiring learning environment that establishes the School as the leading destination for outstanding Doctor of Pharmacy and Graduate Students			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION
Learning Culture	ADAP		
Goal 1 – Enhance student success through a dynamic and positive learning experience	ADAP, DPP, DGP, DSA	Annually By July 1 st	
Goal 2 – Create a culture of engagement for all students that fosters active involvement with other students, professional colleagues, and the community	ADAP, DPP, DGP, DSA	Annually By July 1 st	
Curriculum	ADAP		
Goal 1 – Implement and refine the Practice Ready Curriculum as the leading approach to pharmacy education	ADAP, DPP, EDCA	Annually By July 1 st	
Goal 2 – Develop a formalized, data-driven, and continual process to revise the Practice-Ready Curriculum including both instructional and assessment activities.	ADAP, DPP, EDCA, DoA	Annually By July 1 st	
Interprofessional Education	ADAP, ADCAO		
Goal 1 – Develop an innovative and flexible interprofessional education model through which all HSOP PharmD students can learn in a team-based setting alongside students and practitioners from other health-science and related fields	ADAP, EDCA, DIPE, DPP	Annually By July 1 st	
Co-Curricular Education	ADAP, ADCAO		
Goal 1 Develop and implement an innovative and flexible co-curricular education that supports development of the affective domain in all HSOP student pharmacists	ADAP, EDCA, DOECC	Annually By July 1 st	
Graduate Programs	ADAP, DGP		
Goal 1 – HSOP graduate programs will be a leading destination for graduate education in pharmacy	ADAP, DGP	Annually By July 1 st	
Goal 2 – Explore new graduate program degree tracks, including an MS/PhD in clinical and translational research	ADAP, DGP	Annually By July 1 st	
Admissions	ADAP		
Goal 1 – Develop and implement programs to facilitate recruitment of a qualified and diverse student body.	ADAP, DSA, DIPD, Admissions	Annually By July 1 st	
Goal 2 – Expand and promote international opportunities	ADAP, DSA, DGP, DIPD	Annually By July 1 st	
Goal 3 – Shorten time to degree and overall cost of pharmacy education	ADAP, DSA, COO	Annually By July 1 st	

Strategic Priority #3 – The Harrison School of Pharmacy will provide world-class pharmaceutical care to patients and develop innovative practice models and partnerships to transform the Health Care System.			
ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION
Clinical Affairs	ADCAO		
Goal 1 – Enhance relationships with HSOP alumni and stakeholders through development of innovative practice models	ADCAO, DAPA	Annually By July 1 st	
Practice Innovation	ADCAO		
Goal 1 – Develop, implement, and evaluate innovative, integrated, and interprofessional practice sites	ADCAO, EDCA, DOEECC, DIPE	Annually By July 1 st	
Goal 2 – Enhance collaborative programs with East Alabama Medical Center (EAMC)	ADCAO, EDCA, DOEECC	Annually By July 1 st	
Goal 3 – Implement and disseminate innovative use of technology in patient care	ADCAO, EDCA	Annually By July 1 st	
Goal 4 – Embrace Pharmacy Health Services as the flagship HSOP model for patient care, education, and research in the ambulatory setting.	ADCAO, EDCA, DAPA	Annually By July 1 st	
Interprofessional Education & Training	ADCAO		
Goal 1 – Strategically develop strong relationships with healthcare colleges and schools with which HSOP may partner to develop and implement exemplary interprofessional education (IPE) models	ADCAO, EDCA, DIPE	Annually By July 1 st	
Alumni Affairs	ADCAO		
Goal 1 – Increase alumni participation and engagement in didactic coursework, experiential education, student mentoring, and research	DAPA, DPP, DOEECC, DIPE	Annually By July 1 st	
Goal 2 – Offer continuing education that is timely and focused on advancing innovative practice among alumni.	DAPA	Annually By July 1 st	
Professional Development	ADCAO		
Goal 1 – Expand and increase professional development opportunities for pharmacists, other healthcare providers, and lay audiences provided through HSOP and/or by HSOP faculty and staff.	DAPA	Annually By July 1 st	
Service to the Profession	ADCAO		
Goal 1 – Provide support for professional advocacy within the state and the nation	ADCAO, DAPA	Annually By July 1 st	

Goal 2 – Develop and implement reimbursement models for clinical services to serve as a practice foundation for HSOP graduates and to generate clinical revenue	ADCAO, EDCA, DAPA	Annually By July 1 st	
Increase Outreach Visibility	ADCAO		
Goal 1 – Increase HSOP branding and public awareness of outreach provided through HSOP	ADCAO	Annually By July 1 st	

Strategic Priority #4 – The Harrison School of Pharmacy will establish a culture of community that empowers faculty and staff to become leaders, achieve professional excellence, and attain personal fulfillment.			
<i>ITEM</i>	<i>RESPONSIBLE PARTY</i>	<i>OCCURENCE</i>	<i>DISSEMINATION</i>
Faculty & Staff			
Goal 1 – Recruit, retain, reward, and recognize the best faculty and staff for every position within the School	ADFASI	Annually By July 1 st	
Goal 2 – Align incentives with expectations and objective productivity measures	ADFASI	Annually By July 1 st	
Goal 3 – Modify the workload process (workload document) to provide a better, clearer, and more accurate representation of actual tasks.	ADFASI	Annually By July 1 st	
Goal 4 – Develop a process for collecting and disseminating faculty activities and accomplishments on a weekly (or bi-weekly) basis	ADFASI	Annually By July 1 st	
Goal 5 – Provide ongoing training and mentoring and a clear career path for all faculty and staff	ADFASI	Annually By July 1 st	
Leadership			
Goal 1 – Provide leadership training for all personnel with administrative appointments	ADFASI	Annually By July 1 st	
Goal 2 – Provide formal leadership development pathways for faculty and staff with leadership aspirations	ADFASI	Annually By July 1 st	
Facilities			
Goal 1 – Develop a plan and fundraising goals to support the complete move of pharmacy to the Health Sciences sector of campus	ADFASI, COO, DO	Annually By July 1 st	
Goal 2 – Create a flexible, unique, and engaging student learning environment that positions the Harrison School of Pharmacy as THE destination for pharmacy education	ADFASI	Annually By July 1 st	

Goal 3 – Renovate existing space for programmatic needs while still occupying the Walker Building	ADFASI, COO	Annually By July 1 st	
Goal 4 – Create flexible and sharable workspaces, including informal meeting areas, within the Walker Building to foster innovative faculty work models and enable increased interaction and collaboration	ADFASI, COO	Annually By July 1 st	
Tell Our Story			
Goal 1 – Enhance communication and marketing around all HSOP programs	ADFASI, COO	Annually By July 1 st	
Goal 2 – Increase the number of contact points with alumni and key stakeholders to increase awareness of and engagement with programmatic activities	ADFASI, COO, DAPA	Annually By July 1 st	
Healthy Work-Life Balance			
Goal 1 – Explicitly identify and reward changes that improve operational efficiencies, foster flexibility, reduce burnout, and encourage active and healthy lifestyles.	ADFASI, ADACO, COO	Annually By July 1 st	

HSOP ASSESSMENT FRAMEWORK – PART III

CURRICULUM ASSESSMENT PLAN

Section 1: Course-Level Student Learning Outcomes

AUHSOP Ability Based Outcomes

1. Provide direct patient care to individual patients

- a. Identify patients for pharmacotherapy intervention
- b. Collect pertinent subjective information through patient interviews
- c. Collect pertinent objective data through chart review
- d. Perform physical assessments necessary for the evaluation of common conditions, drug- related problems, and monitoring response to drug therapy
- e. Utilize point of care testing
- f. Perform a comprehensive medication review
- g. Recognize and prioritize patient drug-related problems
- h. Develop an assessment and plan for drug-related problems
- i. Develop and implement evidence based pharmacotherapy plans taking into consideration patient specific social and cultural factors
- j. Assess and promote medication adherence
- k. Diagnose and treat acute self-limited illnesses
- l. Make appropriate referrals
- m. Recommend self-care, OTC and alternative therapies when appropriate
- n. Collaboratively prescribe, adjust and/or administer medication therapy
- o. Communicate treatment plans to patients
- p. Document patient interventions using appropriate medical language
- q. Monitor outcomes of care

2. Provide evidence-based pharmacotherapy services

- a. Provide evidence-based pharmacotherapy as a member of the healthcare team
- b. Access and utilize appropriate resources
- c. Identify and analyze appropriate medical literature
- d. Develop and maintain a plan for staying current with the medical literature

3. Serve as a health educator

- a. Identify stakeholders who would benefit from pharmacist-delivered education
- b. Assess the educational needs of stakeholders
- c. Identify barriers to learning
- d. Provide appropriate education to stakeholders
- e. Provide effective patient centered counseling/education considering health literacy, motivation, and readiness for change
- f. Assess stakeholder understanding

4. Optimize clinical, economic, and humanistic outcomes

- a. Advocate for patients
- b. Assist patients to ensure access to health care and services
- c. Utilize evidence based medicine to optimize pharmacoeconomic decisions
- d. Perform medication reconciliation
- e. Facilitate transitions of care throughout the healthcare system
- f. Manage and utilize a formulary
- g. Utilize appropriate technology to enhance patient care

5. Function within an interprofessional team

- a. Work with individuals of other professions to plan and deliver patient-/population-centered care, while maintaining a climate of mutual respect and shared values.
- b. Assess and address the healthcare needs of the patients and populations served with awareness of one's own role and those of other professions.
- c. Communicate, both in writing and verbally, with patients, caregivers and other health professionals in a manner that promotes a team-based approach to the maintenance of health and the treatment of disease.

6. Distribute medications safely and effectively

- a. Evaluate medication orders for drug-related problems using patient and drug specific information
- b. Provide safe, accurate and efficient distribution of medications
- c. Compound sterile and non-sterile drug products according to standards/regulations
- d. Recognize, resolve and report medication errors/safety related issues
- e. Report adverse drug events
- f. Utilize pharmaceutical product management distribution systems
- g. Perform functions required for emergency preparedness and management
- h. Identify, evaluate and recommend quality/performance improvement strategies

7. Manage Pharmacy Practice

- a. Manage human resources
- b. Manage pharmacy operations
- c. Manage information technology
- d. Manage inventory
- e. Manage finances
- f. Determine consequences of contracts with payers
- g. Develop and lead the implementation of new practices
- h. Develop collaborative drug therapy management agreements (CDTM)
- i. Plan, implement and assess a program to improve patient safety, patient outcomes, and attain financial goals
- j. Develop a strategic marketing plan
- k. Participate in accreditation processes
- l. Practice within state and federal laws, rules and regulations

8. Provide preventative health and wellness services

- a. Identify and prioritize public health needs
- b. Provide education to patients regarding health and wellness
- c. Conduct health screenings and provide recommendations and referrals
- d. Recommend and administer immunizations

9. Change Healthcare Environment/Advocacy

- a. Remain active and engaged in professional organizations
- b. Identify the need and advocate for change in the U.S. health care system in order to improve patient outcomes and decrease costs
- c. Facilitate the development of innovative practice models that provide opportunities for pharmacists to develop clinical and leadership skills
- d. Advocate formalized leadership training programs to advance the profession of pharmacy

10. Personal and Professional Development

- a. Demonstrate ethical and professional behaviors and values
- b. Create personal and professional goals
- c. Examine and reflect on personal factors and experiences that could enhance or limit achievement of personal and professional growth
- d. Develop and implement an individualized plan for continuous personal and professional development

Section 2: Benchmarking

Assessment	Description (Competency)
	#1 - Collect Information: Conduct a medication history
	#3 – Collect Information: Perform an interview utilizing systematic interview techniques – SCHOLAR-MAC, Quest
	#11 – Collect Information: Review medication lists/pertinent data to identify the presence of an indication utilizing appropriate resources
	#12 – Collect Information: Review medication lists/pertinent data to identify appropriate dose, route, frequency, duration
	#13 – Collect Information: Review medication lists/pertinent data to identify appropriate duration
	#14 – Collect Information: Review medication lists/pertinent data to identify allergies
	#15 – Collect Information: Review medication lists/pertinent data to identify drug Interactions – (disease, drug, and food)
	#16 – Collect Information: Review medication lists/pertinent data to identify duplicate therapy
	#17 – Collect Information: Review medication lists/pertinent data to identify efficacy parameters
	#18 – Collect Information: Review medication lists/pertinent data to identify safety parameters
	#23 – Assessment: Formulate an assessment using subjective and objective information
	#25 – Assessment: Identify medical/drug related problems
	#27 – Assessment: Distinguish between conditions amenable to self-treatment and those requiring referral
	#28 – Assessment: Assess pharmacotherapy to determine the presence of an indication
	#29 – Assessment: Assess pharmacotherapy to determine the appropriate dose
	#30 – Assessment: Assess pharmacotherapy to determine the appropriate route
	#31 – Assessment: Assess pharmacotherapy to determine the appropriate frequency
	#32 – Assessment: Assess pharmacotherapy to determine the appropriate duration
	#33 – Assessment: Assess pharmacotherapy for the presence of allergies
	#34 – Assessment: Determine the clinical relevance of a medication allergy
	#35 – Assessment: Assess pharmacotherapy for interactions – (disease, drug, and food)
	#37 – Assessment: Assess pharmacotherapy for duplication of therapy
	#38 – Assessment: Assess pharmacotherapy for efficacy
	#39 – Assessment: Assess pharmacotherapy for safety
	#40 – Assessment: Assess patients for non-adherence
	#41 – Assessment: Determine adherence interventions to address individual patient needs (pill boxes, calendars, transportation etc
	#42 – Assessment: Interpret lab values and physical findings
	#44 – Assessment: Identify critical zones and alarm situations requiring referral or further medical management

	#58 – Assessment: Analyze pharmacotherapy for cost-effectiveness
	#60 – Assessment: Conduct medication reconciliation
	#63 – Plan: Determine therapeutic goals
	#64 – Plan: Develop evidence-based therapeutic plans
	#65 – Plan: Implement evidence-based therapeutic plans
	#66 – Plan: Perform necessary pharmaceutical calculations
	#67 – Plan: Conduct pharmacokinetic dosing when indicated
	#68 – Plan: Select therapeutic substitutions
	#72 – Plan: Select drug therapy taking into consideration socioeconomic issues (consider formulary, generic, cost-saving recommendations)
	#78 – Plan: Develop monitoring /follow-up care plans
	#85 – Communication: Demonstrate appropriate communication skills with Patients/Caregivers
	#86 – Communication: Demonstrate appropriate communication skills with healthcare providers
	#89 – Communication: Communicate professionally (language, demeanor, social media)
	#96 – Communication: Conduct questions in a professional manner
	#97 – Communication: Counsel patients regarding assessments
	#98 – Communication: Educate patients about therapy
	#100 – Communication: Determine patient understanding of treatment plan
	#102 – Communication: Explain the results of health and wellness screenings to patient
	#104 – Communication: Demonstrate effective presentation skills
	#105 – Communication: Demonstrate organized and effective written communication
	#128 – ED_PH: Interpret the results of health and wellness screenings (standards of care and guidelines)
	#144 – DI_EBM: Utilize resources for drugs and diseases which are appropriate to the question or learning need
	#149 – DI_EBM: Select information resources
	#151 – DI_EBM: Construct an effective search of available literature (databases, primary literature)
	#152 – DI_EBM: Access information resources
	#153 – DI_EBM: Prioritize information resources
	#155 – DI_EBM: Analyze primary literature
	#163 – DI_EBM: Apply available guidelines to recommend care
	#173 – Distribution: Demonstrate understanding of all legal requirements for medication
	#175 – Distribution: Recognize the legal components (requirements for a prescription)
	#176 – Distribution: Interpret medication orders
	#177 – Distribution: Process medication orders using written, voicemail, and electronic orders
	#181 – Distribution: Perform appropriate calculations to determine ingredient amounts, day's supply, rates, concentrations
	#182 – Distribution: Prepare appropriate label
	#183 – Distribution: Verify prescriptions for inpatient and outpatient settings for errors and omissions including a visual inspection

	#193 – Distribution: Identify medication errors
	#194 – Distribution: Prevent medication errors
	#195 – Distribution: Resolve medication errors
	#205 – Management: Practice within the current laws and regulations
	#257 – Team Skills: Function as a member of a team
	#259 – Team Skills: Demonstrate positive team skills to solve problems
	#260 – Team Skills: Demonstrate respect for other healthcare professionals (disciplines)
	#261 – Team Skills: Function within scope of practice
	#262 – Team Skills: Demonstrate or model the worth/value of pharmacy to the team (practice)
	#267 – Professionalism: Classify decisions and behaviors as ethical and unethical
	#268 – Professionalism: Assess personal values and ethical norms and compare to societal/professional norms
	#270 - Evaluate decisions, recommendations, communication to apply and modify future actions
	#271 - Summarize the need for professional communication via social media

Section 3: Formative & Summative Assessments

Assessment	Description
Readiness Assessment	One diagnostic exam is given at the beginning of the Fall and Spring semesters of the P2 and P3 years; a total of four. The readiness assessment is designed to assess students' retention of knowledge related to previously taught disease states that will be repeated in the semester, as well as, core concepts that will be addressed at a more advanced level. Students are given the opportunity to review their results and faculty members use the results to inform their teaching during the semester.
Unit/Section Assessment	All experiences in the core curriculum have unit or section specific assessments that are used as formative assessments. A variety of graded assessments are used such as pre-class activities, pre and post quizzes, reflections, cases, SOAP notes, skills assessments, polls, worksheets, journal clubs, and other activities designed to measure achievement of learning objectives. Faculty review responses and give feedback before related summative assessments.
Lab Assessment	Formative assessments related to small group hands on experiences designed around learning specific skills. Assessments may be given prior to, during, or after these experiences. Faculty review responses and give feedback before related summative assessments.

End of Unit/Section Assessment	Each ILE consists of three biweekly formative assessment quizzes. Students are given the opportunity to review their results and faculty members address knowledge gaps through discussion forum postings, and at the end of the experience if further clarification is needed. All clarification occurs before students do their summative assessments.
Midterm Exam	Each Longitudinal experience consists of one midpoint exam. Students are given the opportunity to review their results and faculty members address knowledge gaps through discussion forum postings, and at the end of the experience if further clarification is needed. All clarification occurs before students do their summative assessments.
Final Exam	All experiences in the core curriculum have a cumulative/summative exam that addresses knowledge from the entire experience. Faculty review these results and use the information to inform course review and redesign.
Midpoint Performance-based Exam	At the midpoint of the first ILE students complete a formative practical performance-based exam in which each student is assessed on selected skills/competencies learned throughout the semester or course. The exam includes authentic simulations and scenarios related to professional practice. Students who score below a 70 percent on any station are required to attend a scheduled review. Faculty review these and address knowledge gaps before students do their summative assessments.
Performance-based Exam	At the end of all ILEs and some Longitudinal Experiences students complete a summative practical performance-based exam in which each student is assessed on selected skills/competencies learned throughout the semester or course. The exam includes authentic simulations and scenarios related to professional practice. Students who score below a 70 percent on any station are required to attend a scheduled review. Faculty review these results and use the information to inform course review and redesign.
Project-based Assessments	Most Longitudinal Experiences have a summative project-based assessment where students work individually or teams on an applied project. Most projects have a written and oral presentation component. Faculty address identified gaps before the semester ends as well as use the results to inform course review and redesign.
Professionalism/Participation	Attendance is mandatory for all courses. Throughout the courses students are given non-graded unit or section specific assessments that are used for student engagement and formative assessments. A variety of assessments are used such as pre-class activities, pre and post quizzes, reflections,

	cases, skills assessments, polls, worksheets, and other activities designed to measure students recall of prior knowledge and achievement of learning objectives. Students demonstrating lack of attendance, completion of assignments, class participation or other behavior found to be unprofessional, will have points deducted.
Team/Peer Evaluation	All student teams complete a team contract at the beginning of the semester. Students assess their peers regarding their role within the team, professionalism when working with other members of the team, and provide potential areas for improvement. Students are assessed on the quality of peer assessment and ability to provide adequate evidence for peer ratings.
Self-Evaluation	Students complete a self-assessment of communication skills and of their own ability to work with the team during an activity. Students also discuss what they learned over time regarding their role on the team and areas for improvement for working on teams in the future.
Reflections	Students are given specific topic areas to reflect on their experiences and express their opinions. These may be graded or non-graded.
Self-Study	Students are given resources to learn on their own, for example APhA Pharmacy-Based Immunization Delivery Course. At the end of the self-study students are given a summative exam with a minimum passing score of 70%.

Section 4: Standardized & Comparative Assessments

Assessment	Description
Pharmacy Curriculum Outcomes Assessment (PCOA)	Administered by HSOP to all P3s Each Year – results discussed at Executive Committee, Faculty Meeting, and Professional Education Committee, disseminated to Students
National Pharmacy Licensure Examination (NAPLEX)	Results discussed at Executive Committee, Faculty Meeting, and Professional Education Committee, disseminated to Students
Multistate Pharmacy Jurisprudence Examination (MPJE)	Results discussed at Executive Committee, Faculty Meeting, and Professional Education Committee, disseminated to Students

Section 5: Use of Assessments to Advance Quality (Assessment Loop)

Assessment Loop

Description of how the college or school uses information generated within the curriculum assessment plan(s) to advance quality within its Doctor of Pharmacy program



Step

Detailed Description

Step 1: Data aggregation and Analysis: LC Chair and OTLA	At the end of the semester, OTLA, the Curriculum Coordinator, and the responsible LC Chair examine findings from several qualitative and quantitative data sources for all experiences (ILEs, Workshop, and Longitudinal) and create a summary of findings. Examples of sources include course evaluation, faculty survey, student performance on formative and summative assessments, Learn Team, student responses regarding understandings they gained and the activities and assessments
Step 2: Discussion of findings with LC and Teaching Teams	The LC Chair shares a summary with the LC and all teaching team members for discussion and shared understanding. The group is given the opportunity to add to the summary and discuss possible focus areas for improvement.
Step 3: Selection of 3-5 core areas for Improvement	The LC finalizes the summary of successes and challenges and then comes to final consensus on core areas of emphasis for the review and possible solutions, including discussion of how changes may affect the global curriculum.
Step 4: Dissemination of findings and decisions to PEC and PRCT	The LC Chair presents a summary of the successes and challenges, top focus areas and solutions to PEC Steering and other stakeholders for feedback. Findings are also communicated across Learning Communities to facilitate a systems approach to improvement.
Step 5: Teaching Teams micro level review to address identified core areas	Each teaching team reviews their unit and decides on how they will address the macro level decisions as well as identify any unit specific improvements they would like to make. A detailed timeline guides this process from this point to implementation, and teaching teams are given a teaching outline designed explicitly for the course review process.

HSOP ASSESSMENT FRAMEWORK – PART IV

ASSESSMENTS RELATED TO OTHER SCHOOL-LEVEL ASSESSMENTS

ITEM	RESPONSIBLE PARTY	OCCURENCE	DISSEMINATION **
HSOP In-House Graduating Student Survey	ADFASI, DoA	Annually, Spring	Executive Committee, Faculty
Course Evaluations	ADFASI, DoA	Per Course	Department Heads, Individual Faculty
Instructor Evaluations	ADFASI, DoA	As needed *	Department Heads, Individual Faculty
Learn Team Evaluations	ADFASI, DoA	Per Course	Executive Committee, Individual Faculty

* Minimum number of required annual instructor evaluations varies by academic rank (See Instructor Evaluation Policy)

ASSESSMENT CALENDAR

January	February	March
<ol style="list-style-type: none"> 1. PCOA Assessment 2. Instructor/Course Evaluations 3. End of Fall Semester Course / Benchmarking / Milestone Data 	<ol style="list-style-type: none"> 1. NAPLEX Data (Last 3 Years) 2. MPJE Data (Last 3 year) 3. Instructor/Course Evaluations 	<ol style="list-style-type: none"> 1. AACP Graduating Student Survey (Send Out Annually) 2. AACP Faculty Survey (Send Out Annually) 3. AACP Preceptor Survey (Send out Biennially) 4. AACP Alumni Survey (Send out Biennially) 5. HSOP In-House Graduating Student Survey 6. Instructor/Course Evaluations
April	May **	June **
<ol style="list-style-type: none"> 1. Analyze PCOA Data 2. Instructor/Course Evaluations 	<ol style="list-style-type: none"> 1. Analysis of Academic Performance Throughout Program 2. Outcome Data – Didactic Coursework/Pre-APPE 3. Outcome Data – IPPE 4. Outcome Data – APPE 5. Outcome Data – IPE (Standards 3,4,11) 6. Outcome Data – Co-Curricular (Standard 3) 7. Outcome Data – Co-Curricular (Standard 4) 8. Outcome Assessment Data – Preparedness to Advance to APPE (Standard 12) 9. Outcome Assessment Data – Diverse Populations, Team-Based (Standard 12) 10. Instructor/Course Evaluations 	<ol style="list-style-type: none"> 1. Outcome Assessment Data Related to School's Strategic Plan (Vision/Mission/Goals) 2. Update Student Complaints in regard to ACPE Standards 3. End of Spring Semester Course / Benchmarking / Milestone Data
July	August	September
<ol style="list-style-type: none"> 1. Update of School's Strategic Planning (CQI) Documents 2. Update Annual Progression Data (Standard 17) 	<ol style="list-style-type: none"> 1. Analyze Results of AACP and In-House Surveys 2. Enrollment Data (Last 3 years and 3 year projections) 3. Update Annual Admissions Data (Standard 16) 4. Instructor/Course Evaluations 	<ol style="list-style-type: none"> 1. Update HSOP Organizational Chart 2. New Faculty Update AACP Profile 3. Updated 3 year faculty research output (Standard 19) 4. Instructor/Course Evaluations
October	November	December
<ol style="list-style-type: none"> 1. Update Grant Funding (Standard 23) 2. Tuition Comparison (Standard 23) 3. Salary Comparison (Standard 23) 4. Instructor/Course Evaluations 	<ol style="list-style-type: none"> 1. Instructor/Course Evaluations 	<ol style="list-style-type: none"> 1. Instructor/Course Evaluations

** Note: Assessment data to be collected in May and June should be collected earlier, if possible, to allow sufficient time to discuss the data and make any necessary revisions prior to the Fall Semester.

ASSESSMENTS BY RESPONSIBLE PARTIES

Responsible Party	Assessments
Chief Operating Officer	Standards 15, 21, 23, Part II Strategic Plan
Associate Dean for Academic Programs	Standards 10, 11, 12, 14, 15, 16, 17, 23, Part II Strategic Plan
Associate Dean of Clinical Affairs and Outreach	Part II Strategic Plan
Associate Dean for Faculty Affairs & Strategic Initiatives	Standards 1, 2, 3, 7, 8, 9, 10, 11, 12, 13, 14, 15, 18, 19, 20, 21, 23, 24, 25 Part II Vision & Mission, Strategic Plan, Strategic Plan. Part IV Other Assessments
Chair, Admissions Committee	Standards 16, 17, Part II Strategic Plan
Chair, Assessment Progression Team	Standards 3, 12
Associate Dean for Research	Standards 19, 21, 23, Part II Strategic Plan
Dean's Office	Standards 5, 6, 7, 8, 9, 10,
Director of Alumni and Professional Affairs	Standards 2, 3, 4, 9, 10, 12, 13, 14, 24, Part II Strategic Plan
Director of Graduate Programs	Standards 10, Part II Strategic Plan
Development Officer	Part II Strategic Plan
Director of Assessment	Standards 1, 2, 3, 4, 7, 8, 9, 10, 11, 12, 13, 14, 15, 18, 19, 20, 21, 23, 24, 25 Part II Vision & Mission, Strategic Plan, Part IV Other Assessments
Director, Drug Information Center	Standards 21
Director of International Programs & Diversity	Standards 3, 13,, Part II Strategic Plan
Director of Interprofessional Education	Standards 3, 9, 11,13, 21, Part II Strategic Plan
Director of Operations for Experiential Education and Co-Curriculum	Standards 3, 4, 10, 13, 20, 22. Part II Strategic Plan
Director of the Professional Program	Standards 2, 4, 10, 12, 21, 24, Part II Strategic Plan
Director of Research Development & Support	Part II Strategic Plan
Director, Scholarship of Teaching & Learning	Standards 19, Part II Strategic Plan
Director of Student Affairs	Standards 10, 11, 12, 14, 15, 16, 17, 23, Part II Strategic Plan
Director or Strategic Operations	Standards 7, Part II Vision & Mission
Executive Director of Clinical Affairs	Standards 1, 2, 3, 4, 9, 10, 11, 12, 13, 15, 20, 21, 22, 23, 24, Part II Strategic Plan
Experiential Learning Community	Standards 12,
Introductory Pharmacy Practice Experience Coordinator	Standards 13, 22
Manager, Information and Instructional Technology	Standards 8, 15,
Chair, Professional Education Committee	Standards 10, 12, 24