UNIVERSITY OF WISCONSIN-MADISON
SCHOOL OF PHARMACY
MADISON, WISCONSIN

THE EVALUATION TEAM REPORT
OF THE
PROFESSIONAL PROGRAM LEADING TO THE
DOCTOR OF PHARMACY DEGREE
NOVEMBER 14-16, 2011
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DOCTOR OF PHARMACY PROGRAM

THE EVALUATION TEAM REPORT

I. INTRODUCTION

A. Purpose The on-site evaluation is a component of the accreditation review that results in the Evaluation Team Report to be used for purposes of considering the continued accreditation of the Doctor of Pharmacy program. The evaluation process on this comprehensive review gave particular attention to the progress made and the changes that have occurred since the last comprehensive on-site evaluation in 2006, as well as to the plans for continuing development. In addition to the School’s self-study, the evaluation team reviewed the Accreditation Council for Pharmacy Education (ACPE) responses to the School’s interim reports submitted since the last comprehensive visit (see accreditation history below).

B. Accreditation History

- Date of Last Comprehensive Review: April 5-7, 2006.
- Focused Visits since Last Review: None.
- Interim Reports since Last Review: October 18, 2007; October 15, 2009.
- Special Conditions/Status: None.
- Standards Requiring Monitoring (as of last Board action): No. 7: College or School Organization and Governance; No. 15: Assessment and Evaluation of Student Learning and Curricular Effectiveness; No. 28: Practice Facilities; No. 30: Financial Resources.

C. Evaluation Team The evaluation team members were:

- Kem Krueger, PharmD, PhD, Associate Professor, University of Wyoming School of Pharmacy, Laramie, Wyoming;
- Lauren Schlesselman, PharmD, Director of Assessment and Accreditation, University of Connecticut School of Pharmacy, Storrs, Connecticut;
- Jerry Siegel, PharmD, FASHP, Practitioner, Gahanna, Ohio;
• Craig Svensson, PharmD, PhD, Dean and Professor, Purdue University College of Pharmacy, West Lafayette, Indiana; and
• Robert Elenbaas, PharmD, FCCP, ACPE Evaluation Consultant, Phoenix, Arizona.

Observing the work of the evaluation team was Timothy Boehmer, RPh, Board Member, Wisconsin State Board of Pharmacy, Neenah, Wisconsin.

D. **Evaluation Procedure** The accreditation review was based upon the Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree, adopted January 15, 2006, and implemented July 1, 2007 (“Standards 2007”). As a component of this evaluation, the School of Pharmacy provided a self-study the School and the Doctor of Pharmacy program, as well as other materials that describe the pharmacy program and how to access public information about the program available on the Internet. The schedule of the evaluation team visit is enclosed (Appendix I). The evaluation team validates the program’s self-study, providing the perspective of an independent external peer review. A summary of the evaluation team’s findings and recommendations was presented at the conclusion of the on-site evaluation to the Dean and then to the University of Wisconsin – Madison Chancellor and Provost. A written Evaluation Team Report (ETR) presenting the findings of the evaluation team is sent to the chief executive officer and the dean of the program following the conclusion of the on-site evaluation. The ETR is not an accreditation action but is an evaluative step in the accreditation process. The dean of the program is given the opportunity (through an email to the dean) to correct factual errors and to comment on the draft ETR prior to finalization and distribution of the ETR to the Board. The chief executive officer of the institution and the dean of the program may also provide supplemental materials related to the facts and conclusions presented in the ETR prior to the time the ETR is reviewed by the Board of action. Any such materials must be received by ACPE no later than 21 days prior to the start of the Board meeting at which action on the ETR will be taken. The Evaluation Team Report, the School’s self-study, and any additional communications and/or information received from the School will be considered by the ACPE Board of Directors at its January 18-22, 2012, meeting. The Accreditation Action and Recommendations of the Board will be transmitted to the institution as soon as is feasible following this meeting.
II. FINDINGS AND RECOMMENDATIONS

A. College or School’s Overview

The college or school was invited to provide an overview of changes and developments related to the program and the college or school since the last comprehensive on-site evaluation. The summary should have been organized by the six sections of the Standards.

Comments: Please comment on anything that is notable from the college or school’s overview.

- Items of special note are described and discussed as they relate to individual standards within the body of this report.
B. Summary of the College or School's Self-Study Process

Please use the following form to evaluate the college or school's self-study process and the organization, clarity and completeness of the report, and provide feedback to assist the college or school to improve the quality of future reports.

<table>
<thead>
<tr>
<th>Participation in the Self-Study Process</th>
<th>Commendable</th>
<th>Meets Expectations</th>
<th>Needs Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>The self-study report was written and reviewed with broad-based input from students, faculty, preceptors, staff, administrators and a range of other stakeholders, such as, patients, practitioners, and employers.</td>
<td>Commend ✓</td>
<td>Meets □</td>
<td>Needs Improvement □</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Knowledge of the Self-Study Report</th>
<th>Commend □</th>
<th>Meets ✓</th>
<th>Needs Improvement □</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students, faculty, preceptors, and staff are conversant in the major themes of the report and how the program intends to address any deficiencies.</td>
<td>Students, faculty, preceptors, and staff are aware of the report and its contents.</td>
<td>Students, faculty, preceptors, and staff have little or no knowledge of the content of the self-study report or its impact on the program.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Completeness and Transparency of the Self-Study Report</th>
<th>Commend ✓</th>
<th>Meets □</th>
<th>Needs Improvement □</th>
</tr>
</thead>
<tbody>
<tr>
<td>All narratives and supporting documentation are thorough, clear and concise. The content appears thoughtful and honest. Interviews match the self-study findings.</td>
<td>All narratives and supporting documentation are present. The content is organized and logical.</td>
<td>Information is missing or written in a dismissive, uninformative or disorganized manner. Portions of the content appear biased or deceptive.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Relevance of Supporting Documentation</th>
<th>Commend □</th>
<th>Meets ✓</th>
<th>Needs Improvement □</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supporting documentation of activities is informative and used judiciously.</td>
<td>Supporting documentation is present when needed.</td>
<td>Additional documentation is missing, irrelevant, redundant, or uninformative.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Evidence of Continuous-Quality Improvement</th>
<th>Commend □</th>
<th>Meets ✓</th>
<th>Needs Improvement □</th>
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</thead>
<tbody>
<tr>
<td>The program presents thoughtful, viable plans to not only address areas of deficiency, but also to further advance the quality of the program beyond the requirements of the Standards.</td>
<td>The program proactively presents plans to address areas where the program is in need of improvement.</td>
<td>No plans are presented or plans do not appear adequate or viable given the issues and the context of the program.</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Organization of the Self-Study Report</th>
<th>Commend ✓</th>
<th>Meets □</th>
<th>Needs Improvement □</th>
</tr>
</thead>
<tbody>
<tr>
<td>All sections of the report are complete and organized or hyper-linked to facilitate finding information, e.g., pages are numbered and sections have labeled or tabbed dividers.</td>
<td>The reviewer is able to locate a response for each standard and the supporting documentation with minimal difficulty.</td>
<td>Information appears to be missing or is difficult to find. Sections are not well labeled.</td>
<td></td>
</tr>
</tbody>
</table>

**Additional Comments on the Self-Study**
• The self-study process began in summer 2010 with an all-school retreat. The overall process was overseen and guided by the Self-Study Steering Committee, which included broad faculty, staff, and student participants, as well as representatives from the University Ombuds office, Pharmacy Alumni Association, and the School’s Board of Visitors.

• Six Area Committees that corresponded to the six sections of the accreditation standards were established and were responsible for addressing the standards within their respective sections. Collectively, these committees included broad faculty, staff, student, and external representatives. Student members of the Steering Committee held open forums to obtain input from their peers. Similarly, each of the Area Committees held open forums to gain input from the School’s faculty. The final self-study document was approved at an All-School retreat in summer 2011.

• The faculty are commended and thanked for their willingness to serve as a beta site for implementation of the Assessment and Accreditation Management System (AAMS). Doing so obviously added to the work of the self-study preparation, and this extra effort is appreciated very much.

• The School also is thanked for agreeing to move its reaccreditation review from Spring 2012 to Fall 2011 to accommodate ACPE workload issues. This obviously compressed the time available for completing the self-study. The School’s willingness to assist ACPE in this way also is appreciated very much.
C. Summary of the Evaluation of All Standards

<table>
<thead>
<tr>
<th>Standards</th>
<th>Compliant</th>
<th>Partially Compliant</th>
<th>Non-Compliant</th>
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<tbody>
<tr>
<td>MISSION, PLANNING, AND EVALUATION</td>
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<tr>
<td>1. College or School Mission and Goals</td>
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<tr>
<td>2. Strategic Plan</td>
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<tr>
<td>3. Evaluation of Achievement of Mission and Goals</td>
<td>✔ ✔</td>
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<tr>
<td>ORGANIZATION AND ADMINISTRATION</td>
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<tr>
<td>4. Institutional Accreditation</td>
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<tr>
<td>5. College or School and University Relationship</td>
<td>✔</td>
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<tr>
<td>6. College or School and other Administrative Relationships</td>
<td>✔</td>
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<tr>
<td>7. College or School Organization and Governance</td>
<td>✔</td>
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<tr>
<td>8. Qualifications and Responsibilities of the Dean</td>
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<tr>
<td>CURRICULUM</td>
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<tr>
<td>9. The Goal of the Curriculum</td>
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<tr>
<td>10. Curricular Development, Delivery, and Improvement</td>
<td>✔</td>
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<tr>
<td>11. Teaching and Learning Methods</td>
<td>✔</td>
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<tr>
<td>12. Professional Competencies and Outcome Expectations</td>
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<tr>
<td>13. Curricular Core—Knowledge, Skills, Attitudes, and Values</td>
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<tr>
<td>14. Curricular Core—Pharmacy Practice Experiences</td>
<td>✔ ✔</td>
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<tr>
<td>15. Assessment and Evaluation of Student Learning and Curricular Effectiveness</td>
<td>✔ ✔</td>
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<tr>
<td>STUDENTS</td>
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<tr>
<td>16. Organization of Student Services</td>
<td>✔</td>
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<td>17. Admission Criteria, Policies, and Procedures</td>
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<td>18. Transfer of Credits and Waiver of Requisites for Admission with Advanced Standing</td>
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<td>19. Progression of Students</td>
<td>✔</td>
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<td>20. Student Complaints Policy</td>
<td>✔</td>
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<tr>
<td>21. Program Information</td>
<td>✔</td>
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<tr>
<td>22. Student Representation and Perspectives</td>
<td>✔</td>
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<tr>
<td>23. Professional Behavior and Harmonious Relationships</td>
<td>✔ ✔</td>
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<tr>
<td>FACULTY AND STAFF</td>
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<tr>
<td>24. Faculty and Staff—Quantitative Factors</td>
<td>✔</td>
<td></td>
<td></td>
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<tr>
<td>25. Faculty and Staff—Qualitative Factors</td>
<td>✔</td>
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<tr>
<td>26. Faculty and Staff Continuing Professional Development and Performance Review</td>
<td>✔</td>
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<td>FACILITIES AND RESOURCES</td>
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<tr>
<td>27. Physical Facilities</td>
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<td>28. Practice Facilities</td>
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<tr>
<td>29. Library and Educational Resources</td>
<td>✔</td>
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<td>30. Financial Resources</td>
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1 Findings of the Evaluation Team serve as advisory to the ACPE Board of Directors and should not be viewed as an expression of the Board’s determination of compliance or non-compliance with any ACPE accreditation standard.
SECTION ONE: MISSION, PLANNING, AND EVALUATION

Standard No. 1: College or School Mission and Goals: The college or school of pharmacy (hereinafter “college or school”) must have a published statement of its mission, its goals in the areas of education, research and other scholarly activities, service, and pharmacy practice, and its values. The statement must be compatible with the mission of the university in which the college or school operates.² These goals must include fundamental commitments of the college or school to the preparation of students who possess the competencies necessary for the provision of pharmacist-delivered patient care, including medication therapy management services, the advancement of the practice of pharmacy and its contributions to society, the pursuit of research and other scholarly activities, and the assessment and evaluation of desired outcomes.

Documentation and Data:

Use a check ☑ to indicate the documentation and data provided by the college or school and used to assess this standard:

Required Documentation and Data:

☑ The current mission statement, goals, objectives, and core values for the college or school of pharmacy
☑ The mission statement and goals of the parent institution (if applicable)

Required Documentation for On-Site Review:

(None required for this Standard)

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table.

☑ AACP Standardized Survey: Students – Questions 85 – 87
☑ AACP Standardized Survey: Faculty – Question 16
☑ AACP Standardized Survey: Alumni – Questions 42 - 44

Optional Documentation and Data:

☑ Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include extracts from committee meeting minutes, faculty meeting minutes, evidence of initiatives that document the mission in action, etc.)

<table>
<thead>
<tr>
<th>The college or school has a published statement of its mission; its long-term goals in the areas of education, research and other scholarly activities, service, and pharmacy practice; and its values.</th>
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<tr>
<th>The mission statement is compatible with the mission of the university in which the college or school operates.</th>
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<tr>
<th>The college or school’s vision includes the development of pharmacy graduates who are trained with other health professionals to provide patient care services as a team.</th>
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<th>The college or school’s vision and long-term goals include fundamental commitments of the program to the preparation of students who possess the competencies necessary for the provision of pharmacist-delivered patient care, including medication therapy management services, the advancement of the practice of pharmacy and its contributions to society, the pursuit of research and other scholarly activities, innovation, quality assurance and continuous quality improvement, and the assessment and evaluation of desired outcomes.</th>
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<th>The college or school’s vision and goals provide the basis for strategic planning on how the vision and goals will be achieved.</th>
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<th>For new college or school initiatives, e.g., branch campus, distance learning, or alternate pathways to degree completion, the college or school ensures that:</th>
<th>S</th>
<th>N.I.</th>
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<tr>
<td>• the initiatives are consistent with the university’s and the college or school’s missions and goals</td>
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</table>

² The term “university” includes independent colleges and schools.
the same commitment to the instillation of institutional mission and academic success is demonstrated to all
students, irrespective of program pathway or geographic location
resources are allocated in an equitable manner

N/A (no applicable initiatives)

Comments on the Standard:
a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ How the college or school’s mission is aligned with the mission of the institution
☑ How the mission and associated goals address education, research/scholarship, service, and practice and provide the basis for strategic planning
☑ How the mission and associated goals are developed and approved with the involvement of various stakeholders, such as, faculty, students, preceptors, alumni, etc.
☑ How and where the mission statement is published and communicated
☑ How the college or school promotes initiatives and programs that specifically advance its stated mission
☑ How the college or school supports postgraduate professional education and training of pharmacists and the development of pharmacy graduates who are trained with other health professionals to provide patient care as a team
☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
☐ Any other notable achievements, innovations or quality improvements.
☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The School's mission and vision statements were reviewed and updated in 2009 as part of its most recent strategic planning process. A set of guiding principles (values) that anchor the School’s activities also was created at that time: professionalism, community, collaboration, innovation, and excellence.

- The School’s mission includes to “educate, train, and provide life-long learning opportunities for students, pharmacists, and scientists, while creating, disseminating and applying new knowledge based on research in the biomedical, pharmaceutical, social, and clinical sciences...”
No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.

- No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance
- Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.
- Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated
- Adequate information was not provided to assess compliance

☐ Compliant  □ Compliant with Monitoring  □ Partially Compliant  □ Non Compliant

Recommended Monitoring:

- None.

Standard No. 2: Strategic Plan: The college or school must develop, implement, and regularly revise a strategic plan to facilitate the advancement of its mission and goals. The strategic plan must be developed through an inclusive process that solicits input and review from faculty, students, staff, administrators, alumni, and other stakeholders as needed, have the support of the university administration, and be disseminated in summary form to key stakeholders.

Documentation and Data:

Use a check ☑ to indicate the documentation and data provided by the college or school and used to assess this standard:

Required Documentation and Data:

☑ The college or school's strategic plan for achieving its mission and goals

Required Documentation for On-Site Review:

☑ The strategic plan of the parent institution (if applicable)

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table.

☑ Questions 31 - 32 from Faculty Survey
Optional Documentation and Data:

☑ Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include extracts from committee meeting minutes, faculty meeting minutes, communications between the college or school and the parent institution.

<table>
<thead>
<tr>
<th>The program is in the process of or has developed, implemented, and regularly revises a strategic plan to advance its mission and long-term goals.</th>
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<tr>
<th>The strategic planning process is inclusive, soliciting input and review from faculty, students, staff, administrators, alumni, and other stakeholders as needed, has the support of the university administration, and is disseminated in summary form to key stakeholders.</th>
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<tr>
<th>The strategic plan of the college or school is aligned with the university's strategic plan</th>
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<th>Substantive changes are addressed through the strategic planning process, taking into consideration all resources (including financial, human, and physical) required to implement the change and the impact of the change on the existing program.</th>
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<thead>
<tr>
<th>Consultation with ACPE occurred at least six months before recruiting students into new pathways or programs.</th>
<th>S</th>
<th>N.I.</th>
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<tbody>
<tr>
<td>N/A (no new pathways or programs) ☑</td>
<td></td>
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<thead>
<tr>
<th>The college or school monitors, evaluates and documents progress toward achievement of strategic goals, objectives, and the overall efficacy of the strategic plan.</th>
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Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ How the college or school’s strategic plan was developed, including evidence of the involvement of various stakeholder groups, such as, faculty, students, preceptors, alumni, etc.

☑ How the strategic plan facilitates the achievement of mission-based (long-term) goals

☑ How the college or school’s strategic plan incorporates timelines for action, measures, responsible parties, identification of resources needed, mechanisms for ongoing monitoring and reporting of progress

☑ How the college or school monitors, evaluates and documents progress in achieving the goals and objectives of the strategic plan

☑ How the support and cooperation of University administration for the college or school plan was sought and achieved, including evidence of support for resourcing the strategic plan

☑ How the strategic plan is driving decision making in the college or school, including for substantive changes to the program

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

☑ Any other notable achievements, innovations or quality improvements

☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms
b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The School is commended on the strength of its strategic planning process and general content of the strategic plan. The 2010-2015 plan includes six strategic priorities: provide exemplary educational experiences; advance the research mission; recruit, develop, and retain outstanding faculty, staff, and trainees; increase diversity among students, trainees, staff, and faculty; identify new resources and be responsible stewards of all resources; and foster a commitment to the “Wisconsin Idea.”

- The published strategic plan (“Prescription for Excellence”) identifies several goals relevant to each of these six areas of priority. On an annual basis, the School identifies specific initiatives or action plans (objectives) for addressing each of its strategic priorities. This not only articulates tactical initiatives to achieve strategic objectives but also identifies accountability to specific individuals or groups and provides an indication of resources likely to be required for success. Progress on these action items is then assessed at the end of the year as part of the process to identify the subsequent year’s strategic initiatives.

- The overall planning process appears to involve faculty and other stakeholders broadly. The strategic plan is clearly being used as a tool for helping the School identify its priorities and focus efforts to areas of need.
Compliant

No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.

Compliant with Monitoring

• No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance
• Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.

Partially Compliant

Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented; sufficient evidence already exists that the plan is addressing the factors and will bring the program into full compliance.

Non Compliant

• Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance does not exist or has not yet been initiated
• Adequate information was not provided to assess compliance

Recommended Monitoring:

• None.

Standard No. 3: Evaluation of Achievement of Mission and Goals: The college or school must establish and implement an evaluation plan that assesses achievement of the mission and goals. The evaluation must measure the extent to which the desired outcomes of the professional degree program (including assessments of student learning and evaluation of the effectiveness of the curriculum) are being achieved. Likewise, the extent to which the desired outcomes of research and other scholarly activities, service, and pharmacy practice programs are being achieved must be measured. The program must use the analysis of process and outcome measures for continuous development and improvement of the professional degree program.

Documentation and Data:

Use a check ☑ to indicate the documentation and data provided by the college or school and used to assess this standard:

Required Documentation and Data:

☑ The college or school’s evaluation plan (or equivalent)
☑ List of the individual(s) and/or committee(s) involved in developing and overseeing the evaluation plan
☑ Examples of instruments used in assessment and evaluation (for all mission-related areas)
na Performance of graduates (passing rates of first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years broken down by campus/branch/pathway (only required for multi-campus and/or multi-pathway programs) [SAME DATA ARE USED FOR STANDARD 3, 9, AND 15]
☑ Performance of graduates (passing rate of first-time candidates) on Multistate Pharmacy Jurisprudence Examination® (MPJE®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
☑ Performance of graduates (passing rate of first-time candidates) on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
Performance of graduates (Competency Area 1 scores for first-time candidates) on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]

Performance of graduates (Competency Area 2 scores for first-time candidates) on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]

Performance of graduates (Competency Area 3 scores for first-time candidates) on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]

PCAT Composite Percentile Scores (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years (if applicable) [NOTE: SAME DATA FOR STANDARDS 3 & 17]

GPA (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA FOR STANDARDS 3 & 17]

Math GPA (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA FOR STANDARDS 3 & 17]

Science GPA (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA FOR STANDARDS 3 & 17]

Complete Data Set from the AACP Standardized Surveys:

Note: Data related to specific standards are also presented under the applicable standard. Composite data are provided under this standard for additional reference.

Graduating Student Survey Report (all questions)
Faculty Survey Report (all questions)
Preceptor Survey Report (all questions)
Alumni Survey Report (all questions)

Responses to Open-Ended Questions on AACP Standardized Surveys:

Graduating Student Survey: Responses to Open-Ended Question 88
Faculty Survey: Responses to Open-Ended Question 66
Preceptor Survey: Responses to Open-Ended Question 42
Alumni Survey: Responses to Open-Ended Question 45

Required Documentation for On-Site Review:

(None required for this Standard)

Data Views and Standardized Tables:

Note: PCAT, GPA, Math GPA and Science GPA data views listed below are provided in the Assessment and Accreditation Management System (AAMS) for colleges and schools that participate in PharmCAS. For colleges and schools that do not participate in PharmCAS, the charts and tables must be created from the college or school's own data (see Required Data and Documentation above).

---

Competency Area 1 = Assess Pharmacotherapy to Assure Safe and Effective Therapeutic Outcomes; Area 2 = Assess Safe and Accurate Preparation and Dispensing of Medications; Area 3 = Assess, Recommend, and Provide Health care Information that Promotes Public Health
It is optional for the college or school to provide brief comments about each chart or table.

- Enrollment data by gender for the first professional year of the program for the past 5 years [NOTE: SAME DATA VIEW AS FOR STANDARD 17]
- Enrollment data by race/ethnicity for the first professional year for the past 5 years [NOTE: SAME DATA VIEW AS FOR STANDARD 17]
- PCAT Composite Percentile Scores (Mean, Maximum and Minimum) for the admitted first professional year class for the past 5 years (if applicable) [NOTE: SAME DATA VIEW FOR STANDARDS 3 & 17]
- GPA (Mean, Maximum and Minimum) for the admitted first professional year class for the past 5 years [NOTE: SAME DATA VIEW FOR STANDARDS 3 & 17]
- Math GPA (Mean, Maximum and Minimum) for the admitted first professional year class for the past 5 years [NOTE: SAME DATA VIEW FOR STANDARDS 3 & 17]
- Science GPA (Mean, Maximum and Minimum) for the admitted first professional year class for the past 5 years [NOTE: SAME DATA VIEW FOR STANDARDS 3 & 17]
- Question 17 from Alumni Survey

Optional Documentation and Data:

- Mean PCAT Composite Percentile Scores for the admitted first professional year class for the past 5 years compared to peer schools (if applicable) [NOTE: SAME DATA FOR STANDARDS 3 & 17]
- Mean GPA for the admitted first professional year class for the past 5 years compared to peer schools [NOTE: SAME DATA FOR STANDARDS 3 & 17]
- Mean Math GPA for the admitted first professional year class for the past 5 years compared to peer schools [NOTE: SAME DATA FOR STANDARDS 3 & 17]
- Mean Science GPA for the admitted first professional year class for the past 5 years compared to peer schools [NOTE: SAME DATA FOR STANDARDS 3 & 17]
- Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include extracts from committee or faculty meeting minutes; analyses/evaluation findings/reports generated as a result of assessment and evaluation activities

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<tr>
<td>The evaluation plan describes a continuous and systematic process of evaluation covering all aspects of the college or school and the accreditation standards. The plan is evidence-based and embraces the principles and methodologies of continuous quality improvement.</td>
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<td></td>
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<tr>
<td>Individuals have been assigned specific responsibilities in the evaluation plan.</td>
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<td>The evaluation plan uses surveys of graduating students, faculty, preceptors, and alumni from the American Association of Colleges of Pharmacy (AACP).</td>
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<tr>
<td>The evaluation plan includes assessments to compare and establish comparability of alternative program pathways to degree completion, including geographically dispersed campuses and distance-learning activities. N/A (no distance activities)</td>
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<td>The program assesses achievement of the mission and long-term goals.</td>
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<td>The analysis of process and outcome measures is used for continuous development and improvement of the professional degree program.</td>
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<tr>
<td>The program measures the extent to which the desired outcomes of the professional degree program (including assessments of student learning and evaluation of the effectiveness of the curriculum) are being achieved.</td>
<td>☑</td>
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<tr>
<td>The program measures the extent to which the desired outcomes of research and other scholarly activities, service, and pharmacy practice programs are being achieved.</td>
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<tr>
<td>The evaluation plan includes the college or school's periodic self-assessment using the accreditation standards and guidelines to assure ongoing compliance.</td>
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Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ✓ to indicate that the topic has been adequately addressed to assess this standard):

✓ How all components of the program’s mission and goals are being followed and assessed
✓ How the college or school periodically self-assesses its program using the accreditation standards and guidelines to assure ongoing compliance.
✓ A description of the instruments used in assessment and evaluation of all components of the program’s mission (e.g. in the areas of education, research and other scholarly activity, service, and pharmacy practice.
✓ How assessments have resulted in improvements in all mission-related areas
✓ Innovations and best practices implemented by the college or school
✓ Description of the members of the Assessment Committee (or equivalent structure/accountable person), charges and major accomplishments in the last academic year
✓ How the college or school makes available to key stakeholders the major findings and actions resulting from its evaluation plan
✓ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
✓ Any other notable achievements, innovations or quality improvements

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The School has created separate Assessment and Curriculum Committees and hired a Director of Assessment since the previous reaccreditation review in 2006. The School is complimented on its efforts to grow a solid culture of assessment among faculty, staff, and students. Continued efforts to concisely communicate and demonstrate the benefits of a robust assessment program to faculty, students, and other stakeholders will help to solidify such a culture.

- During 2010, the Assessment Committee developed and faculty approved the School’s Programmatic Evaluation and Educational Assessment Plan (PEEAP; self-study Appendix 3.1.1). This general plan is supplemented by two other key documents: the Core Functions Evaluation Plan (self-study Appendix 3.18.1), and the Outcomes Tracker (self-study Appendix 12.5.2). The Core Functions Evaluation Plan identifies planned methods to assess the School’s educational programs as well as broader programmatic aspects such as research and scholarship, financial resources, and external relations. In addition to identifying who and what is to be assessed, this document identifies accountable
individuals or committees, the metrics to be measured, and target goals for each metric. The Core Functions Evaluation Plan was completed in Summer 2011 and is in the process of being implemented. The Outcomes Tracker will be discussed within the context of Standard No.15. The School is commended for incorporating many direct rather than indirect measures of key outcomes into its plan.

- The evaluation team agreed with the School’s self-study that several aspects of its assessment program “need improvement” in that they are still in the process of implementation. The School’s plan to address these areas of need is very appropriate. Time and continued effort are required for its full implementation.

- Based on the documents provided to the evaluation team, it appeared that the School’s written Assessment Plan is a somewhat piecemeal series of documents (some of which were labeled as being in draft form) that were developed over a period of time. This made it more difficult to understand and appreciate the scope of work being undertaken and with whom accountabilities for some aspects of the assessment program rest. The School would benefit from pulling these documents (e.g., PEEAP description, Core Functions Evaluation Plan, and Outcomes Tracker) into a single source written plan that accurately reflects and communicates current initiatives and future plans.

- In cohesively articulating a comprehensive programmatic and curricular assessment plan, it is suggested that the School include and define the largely uncompleted section of the Core Functions Evaluation Plan titled “Support Services.” These do represent important aspects of determining how well the School is achieving its overall mission and goals. The School also should assure that the written plan clearly identifies accountabilities for all elements of the assessment program and considers the resource requirements for its implementation.

- While the School is encouraged to outline a comprehensive programmatic and curricular assessment plan, it also is encouraged to identify and prioritize those assessment-related initiatives of greatest importance to it at this time. The School should assure that these initiatives are developed and implemented successfully, with effective communication of results and/or subsequent quality or process enhancements to concerned stakeholders.
The scope of work can be expanded as experience is gained and as possible additional resources are added to the assessment area.

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<tr>
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☐ Compliant ✔ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant
Recommended Monitoring:

- A copy of the School’s updated written Assessment Plan.
- A description of the continued implementation of the School’s Assessment Plan, including evidence that knowledge gained is being used to drive consideration of programmatic and curricular enhancements.
SECTION TWO: ORGANIZATION AND ADMINISTRATION

Standard No. 4: Institutional Accreditation: The institution housing the college or school, or the independent college or school, must have or, in the case of new programs, achieve full accreditation by a regional/institutional accreditation agency recognized by the U.S. Department of Education.

Documentation and Data:

Use a check ✔ to indicate the documentation and data provided by the college or school and used to assess this standard:

Required Documentation and Data:

✔ Document(s) verifying institutional accreditation.

☐ Relevant extract(s) from accreditation report that identifies any deficiencies from institutional accreditation that impact or potentially impact the college, school or program.

✔ Or check here if no applicable deficiencies.

Required Documentation for On-Site Review:

✔ Complete institutional accreditation report (only if applicable, as above)

Data Views and Standardized Tables:

(None apply to this Standard)

Optional Documentation and Data:

☐ Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include extracts from institutional, college or school committee meeting minutes.

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<td>The institution housing the program, or the independent college or school, has full</td>
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<td>accreditation by a regional/institutional accreditation agency recognized by the U.S.</td>
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<td>Department of Education or it is in the process of seeking accreditation within the</td>
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<td>prescribed timeframe.</td>
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<td>The college or school reports to ACPE, as soon as possible, any issue identified in</td>
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<td>regional/institutional accreditation actions that may have a negative impact on the</td>
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<td>quality of the professional degree program and compliance with ACPE standards.</td>
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<tr>
<td>Not Applicable ☑</td>
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Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ✔ to indicate that the topic has been adequately addressed to assess this standard):

✔ Any deficiencies from institutional accreditation that impact or potentially impact the college, schools or program (if applicable)

✔ Measures taken or proposed by the college or school to address any issues arising from institutional accreditation (if applicable)

✔ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the
quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The University of Wisconsin-Madison is accredited by The Higher Learning Commission of the North Central Association of College and Schools. The University’s most recent reaccreditation review was in 2009.

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<td>Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated /or Adequate information was not provided to assess compliance</td>
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Recommended Monitoring:

- None.

**Standard No. 5: College or School and University Relationship:** The college or school must be an autonomous unit within the university structure and must be led by a dean. To maintain and advance the professional degree program, the university president (or other university officials charged with final responsibility for the college or school) and the dean must collaborate to secure adequate financial, physical (teaching and research), faculty, staff, student, practice site, preceptor, library, technology, and administrative resources to meet all of the ACPE accreditation standards.

**Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑ University organizational chart depicting the reporting relationship(s) for the Dean of the college or school.

**Required Documentation for On-Site Review:**

*(None required for this Standard.)*

**Data Views and Standardized Tables:**

*(None apply to this Standard)*

**Optional Documentation and Data:**

21
Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include extracts from institutional, college or school committee meeting minutes and communications between the college or school and the parent institution.

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<td>The university president (or other university officials charged with final responsibility for the college or school) and the dean collaborate to secure adequate financial, physical (teaching and research), faculty, staff, student, practice site, preceptor, library, technology, and administrative resources to meet all of the ACPE accreditation standards.</td>
<td>✓</td>
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<td>The college or school participates in the governance of the university, in accordance with its policies and procedures.</td>
<td>✓</td>
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<tr>
<td>The college or school has autonomy, within university policies and procedures and state and federal regulations, in all the following areas:</td>
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<tr>
<td>• programmatic evaluation</td>
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<td>• definition and delivery of the curriculum</td>
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<td>• development of bylaws, policies, and procedures</td>
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<tr>
<td>• student enrollment, admission and progression policies</td>
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<td>✓</td>
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<tr>
<td>• faculty and staff recruitment, development, evaluation, remuneration, and retention</td>
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<tr>
<td>The college or school’s reporting relationship(s) is depicted in the university’s organizational chart.</td>
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<td>✓</td>
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### Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ✓ to indicate that the topic has been adequately addressed to assess this standard):

- ✓ How the college or school participates in the governance of the university (if applicable)
- ✓ How the autonomy of the college or school is assured and maintained
- ✓ How the college or school collaborates with university officials to secure adequate resources to effectively deliver the program and comply with all accreditation standards
- ✓ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

- □ Any other notable achievements, innovations or quality improvements

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- Consistent with University policies, the School’s faculty are members of either the Legal Faculty or the Academic Staff. Legal Faculty include those who are in a tenure track. Academic Staff includes both instructional faculty and non-instructional academic staff. Instructional faculty may be either Center for Health Sciences (CHS) faculty or clinical track faculty and currently include all members of the Division of Pharmacy Practice. Only Legal Faculty are represented in the Faculty Senate or are eligible for tenure. Although there are opportunities for non-tenure track faculty to participate in graduate education, only Legal
Faculty are automatically members of the graduate faculty. There do not appear to be any degree restrictions that preclude non-PhD degreed individuals from holding a tenure-track position. CHS faculty have a significant expectation for original research productivity, whereas clinical track faculty are principally clinician educators. This same structure operates within all of the health professions schools.

- By University policy, only Legal Faculty may serve as department chairs or as voting members of certain University- or School-level committees. This includes the School’s Executive Committee. Rather than being a committee composed of the School’s administrative leadership, as is typical in most schools of pharmacy, the Executive Committee is composed of all tenured Associate and Full Professors. Its responsibilities include key roles in faculty hiring, annual review, and promotion and tenure recommendations. The stipulation that only tenured faculty can serve as department chairs is one reason why the School is organized into three divisions rather than departments.

- The School’s efforts since the previous reaccreditation review to more fully incorporate the talents and perspectives of the CHS and clinical faculty into the School’s governance are acknowledged, although some work yet remains to be done. It is unfortunate that University policies have necessitated that time and resources be spent to create ways for these individuals to participate more fully as citizens of the School.

- For the most part, it appears that most CHS and clinical faculty are not being impacted adversely by the fact that they are defined as Academic Staff rather than Faculty. However, it was described to the evaluation team that CHS faculty are not eligible for some campus-level research development support, even though their positions carry a significant research expectation. Also, certain campus-level funds to enhance faculty salaries as part of a retention package or to address salary compression may not be applied to CHS or clinical track positions. Further, it appears that at least some tenured or tenure-track faculty may be required to assume heavier administrative or committee responsibilities that cannot be held by CHS or clinical faculty. As discussed more fully within Standard No. 23, the evaluation team could not help but wonder whether these distinctions between Faculty and Academic Staff had a negative impact on faculty relationships within the School in the past and whether some remnants of this legacy still persist.
The University is encouraged to continue to work with the School of Pharmacy and the other health profession schools to assure that all faculty, regardless of their appointment title, have access to University resources needed to help assure their success and continued professional development.

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☑️ Compliant ☐ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant
Recommended Monitoring:

- None.

**Standard No. 6: College or school and other Administrative Relationships:** The college or school, with the full support of the university, must develop suitable academic, research, and other scholarly activity; practice and service relationships; collaborations; and partnerships, within and outside the university, to support and advance its mission and goals.

1) **Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑ Example of affiliation agreements for practice or service relationships (other than experiential education agreements; for the latter, refer to Standard 28)

☑ Example of affiliation agreements for the purposes of research collaboration

☑ Example of affiliation agreements for academic or teaching collaboration

**Required Documentation for On-Site Review:**

*(None required for this Standard)*

**Data Views and Standardized Tables:**

*(None apply to this Standard)*

**Optional Documentation and Data:**

☐ Other documentation or data that provides supporting evidence of compliance with the standard.

<table>
<thead>
<tr>
<th>Description</th>
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<tbody>
<tr>
<td>The college or school, with the full support of the university, develops</td>
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<td>suitable academic, research, and other scholarly activity; practice and</td>
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<tr>
<td>service relationships; collaborations; and partnerships, within and outside</td>
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<td>the university, to support and advance its mission and goals.</td>
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<td>Formal signed agreements that codify the nature and intent of the</td>
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<td>relationship, the legal liability of the parties, and applicable financial</td>
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<tr>
<td>arrangements are in place for collaborations and partnerships.</td>
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<tr>
<td>The relationships, collaborations, and partnerships advance the desired</td>
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<tr>
<td>outcomes of the professional degree program, research and other scholarly</td>
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<tr>
<td>activities, service and pharmacy practice programs.</td>
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</table>

**Comments on the Standard:**

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ The number and nature of affiliations external to the college or school

☑ Details of academic research activity, partnerships and collaborations outside the college or school

☑ Details of alliances that promote and facilitate interprofessional or collaborative education

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- Both the School and University are commended for their efforts to identify opportunities for interprofessional education. This has included working with the School of Nursing to design interprofessional patient simulation facilities in the new nursing building and working with the Schools of Medicine, Nursing, and Veterinary Medicine to define interprofessional learning outcomes and begin to develop a system for progressive interprofessional experiences. The School and University are encouraged to continue to place a priority on creating meaningful opportunities for interprofessional educational for their students.

### Compliant
No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.

### Compliant with Monitoring
- No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance
- Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into full compliance.

### Partially Compliant
Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.

### Non Compliant
- Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated
- Adequate information was not provided to assess compliance

#### Recommended Monitoring:
- None.

**Standard No. 7: College or School Organization and Governance:** The college or school must be organized and staffed to facilitate the accomplishment of its mission and goals. The college or school administration must have defined lines of authority and responsibility, foster organizational unit development and collegiality, and allocate resources appropriately. The college or school must have published, updated governance documents, such as bylaws and policies and procedures, which have been generated by faculty consensus under the leadership of the dean in accordance with university regulations.

**Documentation and Data:**
Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

Required Documentation and Data:

☑ College or school organizational chart
☑ Job descriptions for college or school administrators
☑ List of committees with their members and designated charges
☑ List of full time staff within each department/division and their areas of responsibility (e.g. administrative support, telecommunication, audiovisual, and computer personnel) [NOTE: SAME REPORT FOR STANDARD 7 & 24]
☑ The college, school, or university policies and procedures that address systems failures, data security and backup, and contingency planning

Required Documentation for On-Site Review:

☑ Written bylaws and policies and procedures of college or school
☑ Faculty Handbook

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ AACP Standardized Survey: Faculty – Questions 1 – 4, 6 – 13, 19, 20
☑ AACP Standardized Survey: Alumni – Question 14
☑ AACP Standardized Survey: Preceptor – Questions 15, 37
☑ AACP Standardized Survey: Student – Question 58
☑ Table: Distribution of Full-Time faculty by Department and Rank

Optional Documentation and Data:

☐ Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include extracts from college or school committee meeting minutes.

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<tr>
<td>The college or school is organized and staffed to facilitate the accomplishment of its mission and goals.</td>
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<tr>
<td>The college or school administrative leaders working with the dean have credentials and experience that prepare them for their respective roles.</td>
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<tr>
<td>The college or school administration has defined lines of authority and responsibility, fosters organizational unit development and collegiality, and allocates resources appropriately.</td>
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<tr>
<td>The college or school has established mechanisms to foster unity of purpose, effective communication, and collaboration among administrators.</td>
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<tr>
<td>The college or school’s administrative leaders – individually or collectively – are developing and evaluating interprofessional education and practice opportunities</td>
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<tr>
<td>The college or school has published, updated governance documents, such as bylaws and policies and procedures, which have been generated by faculty consensus under the leadership of the dean in accordance with university regulations.</td>
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<tr>
<td>If the college or school organizes its faculty into subunits, such as departments or divisions, subunit goals and objectives align with the mission and goals of the college or school.</td>
<td>☑</td>
<td>N/A (no subunits)</td>
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<tr>
<td>The effectiveness of each organizational unit is evaluated on the basis of its goals and objectives and its contribution to the professional program.</td>
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<td>Programs are in place to hone leadership and management skills of college or school administrators, including department/division chairs (if applicable).</td>
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<tr>
<td>Faculty meetings and committees established to address key components of the mission and goals are part of the system of governance of the college or school.</td>
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<tr>
<td>Where appropriate, faculty committees include staff, students, preceptors, alumni, and pharmacy practitioners.</td>
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Minutes of faculty meetings and committee actions are maintained and communicated to appropriate parties. ☑

The college or school has policies and procedures that address potential systems failures, whether such failures are technical, administrative, or curricular. ☑

Contingency planning includes creating secure backups of critical applications and systems data, providing mechanisms for making up lost course work and academic credit, securing alternate means for communication and information delivery, and creating exit strategies to protect students if part or all of a program loses viability. ☑

The college or school maintains an effective system of communication with internal and external stakeholders. ☑

Alternate program pathways are integrated into the college or school’s regular administrative structures, policies, and procedures (including planning, oversight, and evaluation), and are supervised by an administrator who is part of the college or school. N/A (no alternate pathways)

The college or school ensures that workflow and communication among administration, faculty, staff, preceptors, and students engaged in distance-learning activities are maintained. N/A (no distance-learning activities)

The college or school retains ultimate responsibility for the academic quality and integrity of distance-learning activities and the achievement of expected and unexpected outcomes, regardless of any contractual arrangements, partnerships, or consortia for educational or technical services. N/A (no distance-learning activities)

Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☐ A description of the college or school’s organization and administration and the process for ongoing evaluation of the effectiveness of each operational unit

☐ A self-assessment of how well the organizational structure and systems of communication and collaboration are serving the program and supporting the achievement of the mission and goals

☐ How college or school bylaws, policies and procedures are developed and modified

☐ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

☐ How the college or school’s administrative leaders are developing and evaluating interprofessional education and practice opportunities

☐ How the credentials and experience of college or school administrative leaders working with the dean have prepared them for their respective roles.

☐ Any other notable achievements, innovations or quality improvements

☐ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The School is organized around three divisions: Pharmaceutical Sciences, Pharmacy Practice, and Social and Administrative Sciences. Each is led by a chair who is elected by his/her division members to serve a three-year term, with a maximum of two consecutive
terms. In addition, Extension Services in Pharmacy (e.g., continuing education) is in many respects like the other divisions but is a financially self-sustaining unit.

- Advisory committees to the Dean include the Dean’s Advisory Council and the Academic Planning Council. The Dean’s Advisory Council is composed of the Associate Deans and division chairs. Two faculty members elected from each of the three divisions comprise the Academic Planning Council. Both of these groups have important roles in the development and assessment of the School’s strategic plan. Division chairs are not responsible for the annual review of their respective division members. In accord with University guidelines, the Executive Committee has delegated this responsibility to the Faculty Activities Review Committee, on which the division chairs serve as members. Although at first glance this structure and organization, mandated largely by University policy, may appear unwieldy, it does appear to work effectively within the School. Its success depends in part on effective communication, mutual respect, and trust among faculty and between faculty and administration.
### Standard No. 8: Qualifications and Responsibilities of the Dean

The dean must be qualified to provide leadership in pharmacy professional education and practice, including research, scholarly activities, and service. The dean must be the chief administrative and academic officer and have direct access to the university president or other university officials delegated with final responsibility for the college or school. The dean must unite and inspire administrators, faculty, staff, preceptors, and students toward achievement of the mission and goals. The dean is responsible for ensuring that all accreditation requirements of the ACPE are met, including the timely submission of all reports and notices of planning for substantive changes.

#### Documentation and Data:

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

- Synopsis of Curriculum Vitae of the Dean
- Desired qualifications and responsibilities of the Dean (from job description or position announcement)

**Required Documentation for On-Site Review:**

*(None required for this standard)*

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

- AACP Standardized Survey: Faculty – Questions 1 – 2, 5
- AACP Standardized Survey: Alumni – Questions 15 - 16

**Optional Documentation and Data:**

- Other documentation or data that provides supporting evidence of compliance with the standard

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### Recommended Monitoring:

- None.
The dean is the chief administrative and academic officer and has direct access to the university president or other university officials delegated with final responsibility for the college or school. ☑

The dean unites and inspires administrators, faculty, staff, preceptors, and students to achieve the mission and goals. ☑

The dean is responsible for ensuring that all accreditation requirements of the ACPE are met, including the timely submission of all reports and plans for substantive changes. ☑

The dean has the assistance and full support of the administrative leaders of the college or school’s organizational units and adequate staff support. In instances where the dean is assigned other substantial administrative responsibilities within the university, arrangements for additional administrative support to the office of the dean are made to ensure effective administration of the affairs of the college or school. ☑

The qualifications and characteristics of the dean relate well to those called for in the standards, i.e.:
- a degree in pharmacy or a strong understanding of contemporary pharmacy and health care systems
- a scholarly concern for the profession, generally, and for the diverse aspects of pharmacy science and practice, in particular
- publications in pharmacy and biomedical literature in areas relevant to the mission and goals of the college or school
- appropriate leadership and managerial skills and experience in the academic (preferred) or health care sectors
- recognition for career accomplishments by pharmacy or other health profession educators, researchers, and practitioners
- strong written and interpersonal communication skills
- experience with and a commitment to systematic planning, assessment, and continuous programmatic improvement
- a thorough understanding of and a commitment to teaching and student learning, including pedagogy
- evidence of a commitment to the advancement of research and scholarship
- the ability and willingness to provide assertive advocacy on behalf of the college or school to the university administration
- the ability and willingness to provide assertive advocacy on behalf of the college or school and the profession of pharmacy in community, state, and national health care initiatives
- a record of and willingness to continue active participation in the affairs of pharmacy’s professional and scientific societies

The dean has the authority and accepts ultimate responsibility for ensuring:
- development, articulation, and implementation of the mission and goals
- acceptance of the mission and goals by the stakeholders
- development, implementation, evaluation, and enhancement of the educational, research, service, and pharmacy practice programs
- collaborative efforts to develop, implement, evaluate, and enhance interprofessional education, practice, service, and research programs
- development and progress of the strategic plan and the evaluation plan, including assessment of outcomes
- recruitment, development, remuneration, and retention of competent faculty and staff
- initiation, implementation, and management of programs for the recruitment and admission of qualified students
- establishment and implementation of standards for academic performance and progression
- resource acquisition and mission-based allocation
- continuous enhancement of the visibility of the college or school on campus and to external stakeholders
- the effective use of resources to meet the needs and mission of the college or school

The dean has ensured that ACPE has been notified in advance of the implementation of any substantive change, allowing sufficient time for evaluation of compliance with standards or the need for additional monitoring. N/A (no changes since last comprehensive visit) ☑

The dean is responsible for compliance with ACPE’s accreditation standards, policies, and procedures. In the event that remedial action is required to bring the college or school into compliance, the dean takes the necessary steps to ensure compliance in a timely and efficient manner. ☑
Comments on the Standard:

a. The college or school's descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ How the dean provides leadership for the college or school and program and how the qualifications and characteristics of the dean support the achievement of the mission and goals
☑ The authority and responsibility of the dean to ensure all expectations of the standard and guidelines are achieved
☑ How the dean interacts with and is supported by the other administrative leaders in the college or school
☑ How the dean is providing leadership to the academy at large, and advancing the pharmacy education enterprise on local, regional, and national levels.
☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
☑ Any other notable achievements, innovations or quality improvements
☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The evaluation team received very positive comments from faculty about the Dean’s leadership of the School. Her efforts to break down silos and build community within the School are recognized and respected. Introduction of ways to acknowledge and thank faculty for their innovations and contributions to the School during a time when merit salary increases have not been possible also are recognized and respected (e.g., seed money to support interdivisional collaborative research, teaching innovation award).

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<th>Partially Compliant</th>
<th>Non Compliant</th>
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<tr>
<td>No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.</td>
<td>- No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance or - Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance; the plan has been fully implemented; sufficient evidence already exists that the plan is addressing the factors and will bring the program into full compliance.</td>
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☑ Compliant ☐ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant
Recommended Monitoring:

- None.
Standard No. 9: The Goal of the Curriculum: The college or school’s professional degree program curriculum must prepare graduates with the professional competencies to enter pharmacy practice in any setting to ensure optimal medication therapy outcomes and patient safety, satisfy the educational requirements for licensure as a pharmacist, and meet the requirements of the university for the degree.

The curriculum must develop in graduates knowledge that meets the criteria of good science; professional skills, attitudes, and values; and the ability to integrate and apply learning to both the present practice of pharmacy and the advancement of the profession. Graduates must be able to identify and implement needed changes in pharmacy practice and health care delivery.

Documentation and Data:

Use a check ✓ to indicate the information provided by the college or school and used to self-assess this standard:

Required Documentation and Data:

✓ List of the professional competencies and outcome expectations for the professional program in pharmacy (SAME DOCUMENT FOR STANDARDS 9 AND 12)
✓ An overview of the curriculum and degree requirements
✓ Performance of graduates (passing rates of first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years broken down by campus/branch/pathway (only required for multi-campus and/or multi-pathway programs) [SAME DATA ARE USED FOR STANDARD 3, 9, AND 15]
✓ Performance of graduates (passing rate of first-time candidates on Multistate Pharmacy Jurisprudence Examination® (MPJE®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
✓ Performance of graduates (passing rate of first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
✓ Performance of graduates (Competency Area 1 scores for first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
✓ Performance of graduates (Competency Area 2 scores for first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
✓ Performance of graduates (Competency Area 3 scores for first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]

Required Documentation for On-Site Review:

(None required for this standard)

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

✓ AACP Standardized Survey: Student – Question 36
✓ AACP Standardized Survey: Alumni – Question 20

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4 “Good science” implies having the following characteristics: evidence-based, logical, convincing, explanatory, honest, testable, and systematic.
Optional Documentation and Data:

☑ Other documentation or data that provides supporting evidence of compliance with the standard

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<td>The curriculum prepares graduates with the professional competencies to enter pharmacy practice in any setting to ensure optimal medication therapy outcomes and patient safety, satisfies the educational requirements for licensure as a pharmacist, and meets the requirements of the university for the degree.</td>
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<tr>
<td>The curriculum develops in graduates knowledge that meets the criteria of good science; professional skills, attitudes, and values; and the ability to integrate and apply learning to both the present practice of pharmacy and the advancement of the profession.</td>
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<td>The curriculum fosters the development of students as leaders and agents of change. The curriculum helps students embrace the moral purpose that underpins the profession and develop the ability to use tools and strategies needed to affect positive change in pharmacy practice and health care delivery.</td>
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<td>In developing knowledge, skills, attitudes, and values in students, the college or school ensures that the curriculum fosters the development of professional judgment and a commitment to uphold ethical standards and abide by practice regulations.</td>
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<tr>
<td>The college or school ensures that the curriculum addresses patient safety, cultural competence, health literacy, health care disparities, and competencies needed to work as a member of or on an interprofessional team.</td>
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<td>Curricular content, instructional processes, course delivery, and experiential education are documented, aligned, and integrated where appropriate.</td>
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Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ A description of the college or school’s curricular philosophy

☑ A description of how the curriculum fosters the development of students as leaders and agents of change and helps students to embrace the moral purpose that underpins the profession and develop the ability to use tools and strategies needed to affect positive change in pharmacy practice and health care delivery

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

☑ Any other notable achievements, innovations or quality improvements

☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The faculty recently completed a review of its overall desired educational outcomes and curriculum. This resulted in a new set of educational outcomes (see Standard No. 12) and modest curricular revisions that were implemented in Fall 2011. The goals of instituting these curricular revisions included to increase the direct pharmacy emphasis of the DPH-1 year and decrease student stress in the DPH-2 year. The School is encouraged to incorporate an assessment of whether these goals are achieved and whether courses are
sequenced and integrated appropriately into its plan for ongoing systematic curricular review.

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<td>• No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance</td>
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</table>

☑ Compliant ☐ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant

Recommended Monitoring:

- None.

**Standard No. 10: Curricular Development, Delivery, and Improvement:** The college or school’s faculty must be responsible for the development, organization, delivery, and improvement of the curriculum. The curriculum must define the expected outcomes and be developed, with attention to sequencing and integration of content and the selection of teaching and learning methods and assessments. All curricular pathways must have both required and elective courses and experiences and must effectively facilitate student development and achievement of the professional competencies.

The curriculum for the professional portion of the degree program must be a minimum of four academic years or the equivalent number of hours or credits. The curriculum must include didactic course work to provide the desired scientific foundation, introductory pharmacy practice experiences (not less than 5% of the curricular length) and advanced pharmacy practice experiences (not less than 25% of the curricular length).  

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5 Refer to Standards 13 and 14 and Appendices B and C for additional detail and guidance.
Documentation and Data:

Use a check ✓ to indicate the information provided by the college or school and used to self-assess this standard:

Required Documentation and Data:

✓ A list of the members of the Curriculum Committee (or equivalent) with details of their position/affiliation to the college or school
✓ A list of the charges or assignments and major accomplishments of the Curriculum Committee in the last academic year

Required Documentation for On-Site Review:

(None required for this standard)

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

✓ AACP Standardized Survey: Faculty – Questions 40 - 46
✓ AACP Standardized Survey: Student – Questions 30, 34, 35
✓ AACP Standardized Survey: Alumni – Questions 22, 27

Optional Documentation and Data:
✓ Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include a curricular overview, the college or school's curricular map, and data that link teaching-and-learning methods with curricular outcomes.

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<tr>
<td>The college or school’s faculty is responsible for the development, organization,</td>
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<td>delivery, and improvement of the curriculum.</td>
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<td>The curriculum defines the expected outcomes and is developed with attention to</td>
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<td>sequencing and integration of content and the selection of teaching and learning</td>
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<td>methods and assessments.</td>
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<td>All curricular pathways have both required and elective courses and experiences and</td>
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<td>effectively facilitate student development and achievement of the professional</td>
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<td>competencies.</td>
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<td>The curriculum for the professional portion of the degree program is a minimum of</td>
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<td>four academic years or the equivalent number of hours or credits.</td>
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<td>Introductory pharmacy practice experiences are not less than 5% (300 hours) of the</td>
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<td>curricular length.</td>
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<tr>
<td>The advanced pharmacy practice experiences are not less than 25% (1440 hours) of the</td>
<td>✓</td>
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<tr>
<td>curricular length.</td>
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<tr>
<td>On behalf of the faculty, the Curriculum Committee (or equivalent) manages curricular</td>
<td>✓</td>
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<tr>
<td>development, evaluation, and improvement to ensure that the curriculum is consistent</td>
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<tr>
<td>with the collective vision of the faculty and administration.</td>
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<tr>
<td>Learning outcomes for curricular courses and pharmacy practice experiences are</td>
<td>✓</td>
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<tr>
<td>mapped to the desired competencies and gaps and inappropriate redundancies identified</td>
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<tr>
<td>inform curricular revision.</td>
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<tr>
<td>Curricular design allows for students to be challenged with increasing rigor and</td>
<td>✓</td>
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<tr>
<td>expectations as they matriculate through the program to achieve the desired</td>
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<tr>
<td>competencies. The curriculum design enables students to integrate and apply all</td>
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<tr>
<td>competency areas needed for the delivery of holistic patient care.</td>
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<tr>
<td>The Curriculum Committee (or equivalent) is constituted to provide balanced</td>
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<tr>
<td>representation from all departments, divisions, and/or disciplines within the college</td>
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<tr>
<td>or school.</td>
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<tr>
<td>Faculty members are aware of the content, competencies, and learning outcomes for</td>
<td>✓</td>
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<tr>
<td>each other’s courses and use that information to optimize these elements within</td>
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<tr>
<td>their own courses.</td>
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<tr>
<td>The curriculum complies with university policies and procedures and the</td>
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<td>accreditation standards.</td>
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<tbody>
<tr>
<td>Student representation and feedback are integral parts of curricular development</td>
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<tr>
<td>and improvement.</td>
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<tr>
<td>The Curriculum Committee (or equivalent) has adequate resources to serve as the</td>
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<tr>
<td>central body for the</td>
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</table>
Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ A description of the curricular structure, including a description of the elective courses and experiences available to students

☑ How both the didactic and experiential components comply with Standards for core curriculum and IPPE and APPEs in regard to percentage of curricular length

na Any nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable)

☑ Data that link teaching-and-learning methods with curricular outcomes

☑ How the results of curricular assessments are used to improve the curriculum

☑ How the components and contents of the curriculum are linked to the expected competencies and outcomes through curricular mapping and other techniques and how gaps in competency development or inappropriate redundancies identified inform curricular revision

☑ How the curricular design allows for students to be challenged with increasing rigor and expectations as they matriculate through the program to achieve the desired competencies and how the curriculum design enables students to integrate and apply all competency areas needed for the delivery of holistic patient care.

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

☑ Any other notable achievements, innovations or quality improvements

☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The evaluation team supports the School’s plans to implement a structured, ongoing, systematic process for proactive management of the curriculum. This will allow systematic review of courses to assure that their content remains appropriate and that effective vertical and horizontal coordination and integration occurs across the curriculum.
Recommended Monitoring:

- None.

**Standard No. 11: Teaching and Learning Methods:** The college or school, throughout the curriculum and in all program pathways, must use and integrate teaching and learning methods that have been shown through curricular assessments to produce graduates who become competent pharmacists by ensuring the achievement of the stated outcomes, fostering the development and maturation of critical thinking and problem-solving skills, meeting the diverse learning needs of students, and enabling students to transition from dependent to active, self-directed, lifelong learners.

**Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

*(None required for this standard)*

**Required Documentation for On-Site Review:**

- ☐ Examples of instructional tools, such as portfolios, used by students to assist them in assuming responsibility for their own learning and for measuring their achievement
- ☑ Examples of instructional methods employed by faculty to stimulate higher order thinking and problem-solving skills in learners
- ☑ Examples of instructional methods employed by faculty to address/accommodate the various learning styles of students
Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ AACP Standardized Survey: Faculty – Questions 38, 39
☑ AACP Standardized Survey: Student – Questions 28, 29, 31 - 33
☑ AACP Standardized Survey: Alumni – Questions 21, 23
☑ AACP Standardized Survey: Preceptor – Question 23

Optional Documentation and Data:

☑ Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include data that link teaching-and-learning methods with curricular outcomes and extracts from minutes of meetings of the curriculum and/or assessment committees.

| The program, throughout the curriculum and in all pathways, uses and integrates teaching and learning methods that have been shown through curricular assessments to meet the diverse learning needs of students and produce the desired professional competencies and outcomes, including the development and maturation of critical thinking, problem-solving, and self-directed, lifelong learning skills. | S | N.I. | U |
| Faculty members use a variety of teaching and learning techniques (e.g., active learning, case studies, etc.) that have been thoughtfully selected, designed, and/or tailored to help students achieve the learning outcomes articulated for their courses. | ☑ | | |
| The college or school evaluates the effectiveness of its curricular innovations through its assessment activities. | ☑ | | |
| The outcomes of the distance-learning activities are appropriate for the student population and achievable through distance study. | N/A (no distance-learning activities) ☑ | | |
| Teaching and learning methods used assure that learning experiences, opportunities, and outcomes are comparable for all pathways, branches or campuses. | N/A (single geographic location or no alternate pathways) ☑ | | |

Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ A description of teaching and learning methods and strategies employed in the delivery of the curriculum, including nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable), and how those methods are expected to advance meaningful learning in the courses in which they are employed.

☑ Efforts of the college or school to address the diverse learning needs of students

☑ The formative and summative assessments used to evaluate teaching and learning methods used in the curriculum, including nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable)

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

☑ Any other notable achievements, innovations or quality improvements

☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms
b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- None.

<table>
<thead>
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<th>Compliant</th>
<th>Compliant with Monitoring</th>
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<td>No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.</td>
<td>No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance /or</td>
<td>Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.</td>
<td>Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated /or</td>
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<td>☐ Compliant with Monitoring</td>
<td>☐ Partially Compliant</td>
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</table>

**Recommended Monitoring:**

- None.

**Standard No. 12: Professional Competencies and Outcome Expectations:** Professional pharmacist competencies that must be achieved by graduates through the professional degree program curriculum are the ability to:

1. Provide patient care in cooperation with patients, prescribers, and other members of an interprofessional health care team based upon sound therapeutic principles and evidence-based data, taking into account relevant legal, ethical, social, cultural, economic, and professional issues, emerging technologies, and evolving biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences that may impact therapeutic outcomes.

2. Manage and use resources of the health care system, in cooperation with patients, prescribers, other health care providers, and administrative and supportive personnel, to promote health; to provide, assess, and coordinate safe, accurate, and time-sensitive medication distribution; and to improve therapeutic outcomes of medication use.

3. Promote health improvement, wellness, and disease prevention in cooperation with patients, communities, at-risk populations, and other members of an interprofessional team of health care providers.

These professional competencies must be used to guide the development of stated student learning outcome expectations for the curriculum. To anticipate future professional competencies, outcome statements must incorporate the development of the skills necessary to become self-directed lifelong learners.

**Documentation and Data:**

Use a check ☒ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**
List of the professional competencies and outcome expectations for the professional program in pharmacy (SAME DOCUMENT FOR STANDARDS 9 AND 12)

A map/cross-walk of the curriculum (didactic and experiential) to the professional competencies and outcome expectations of the program

Examples of didactic and experiential course syllabi, including stated outcomes related to desired competencies

Required Documentation for On-Site Review:

All course syllabi (didactic and experiential)

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

AACP Standardized Survey: Faculty – Questions 47 - 57

AACP Standardized Survey: Student – Questions 10 – 29, 84

AACP Standardized Survey: Alumni – Questions 20, 31 - 41

AACP Standardized Survey: Preceptor – Question 25 - 35

Optional Documentation and Data:

Other documentation or data that provides supporting evidence of compliance with the standard

<table>
<thead>
<tr>
<th>Professional Competencies 1, 2 and 3 guide the development of stated student learning outcome expectations for the curriculum.</th>
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<tr>
<td>✓</td>
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<tr>
<th>The curriculum prepares graduates to provide patient care in cooperation with patients, prescribers, and other members of an interprofessional health-care team based upon sound scientific and therapeutic principles and evidence-based data.</th>
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<th>N.I.</th>
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<td>✓</td>
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<tr>
<th>The curriculum fosters an understanding of, and an appreciation for, the legal, ethical, social, cultural, economic, and professional issues, emerging technologies, and evolving biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences that may impact therapeutic outcomes.</th>
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<td>✓</td>
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<tr>
<th>The curriculum prepares graduates to manage and use resources of the health care system, in cooperation with patients, prescribers, other health care providers, and administrative and supportive personnel, to promote health; to provide, assess, and coordinate safe, accurate, and time-sensitive medication distribution; and to improve therapeutic outcomes of medication use.</th>
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<tr>
<th>The curriculum prepares graduates to promote health improvement, wellness, and disease prevention in cooperation with patients, communities, at-risk populations, and other members of an interprofessional team of health care providers.</th>
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Outcome statements include developing skills to become self-directed lifelong learners.

The curriculum prepares graduates to independently seek solutions to practice-based problems in the scientific and clinical literature.

Graduates possess the knowledge, skills, attitudes, and values needed to enter practice pharmacy independently by graduation.
Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ✓ to indicate that the topic has been adequately addressed to assess this standard):

✓ A description of the professional competencies of the curriculum
✓ A description of the assessment measures and methods used to evaluate achievement of professional competencies and outcomes along with evidence of how feedback from the assessments is used to improve outcomes
✓ How the curriculum is preparing graduates to work as members of an interprofessional team, including a description of the courses that focus specifically on interprofessional education
✓ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
✓ Any other notable achievements, innovations or quality improvements
✓ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- Faculty have developed a set of educational outcomes that define the PharmD curriculum. These are clearly consistent with both the professional competencies expected by the accreditation standards and the AACP CAPE outcomes.
- The evaluation team found it especially noteworthy that these outcome statements are written to reflect increasing expectations for students’ development of knowledge, skills, and attitudes as they progress through successive years of the curriculum. This concept was identified as a “Noteworthy Practice” by the evaluation team and will be forwarded to AACP for sharing with other schools of pharmacy as a quality improvement initiative.
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<tbody>
<tr>
<td>No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.</td>
<td>No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance /or/ Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance; the plan has been fully implemented; sufficient evidence already exists that the plan is addressing the factors and will bring the program into full compliance.</td>
<td>Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.</td>
<td>Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated /or/ Adequate information was not provided to assess compliance</td>
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☑ Compliant ☐ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant

Recommended Monitoring:

- None.

**Standard No. 13: Curricular Core—Knowledge, Skills, Attitudes, and Values:** To provide the thorough scientific foundation necessary for achievement of the professional competencies, the curriculum of the professional degree program must contain the following:
  - biomedical sciences
  - pharmaceutical sciences
  - social/behavioral/administrative sciences
  - clinical sciences

Knowledge, practice skills, and professional attitudes and values must be integrated and applied, reinforced, and advanced throughout the curriculum, including the pharmacy practice experiences.

**Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑ A map/cross-walk of the curriculum to Appendix B of the ACPE Standards

**Required Documentation for On-Site Review:**

(None required for this Standard)
Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

- AACP Standardized Survey: Student – Questions 34, 47

Optional Documentation and Data:

- Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include assessments and documentation of student performance and the attainment of desired core knowledge, skills and values.

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<tr>
<td>The curriculum contains at an appropriate breadth and depth the necessary elements within the following areas as outlined in Appendix B of the Standards:</td>
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<tr>
<td>• biomedical sciences</td>
<td>✓</td>
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<td></td>
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<tr>
<td>• pharmaceutical sciences</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• social/behavioral/administrative sciences</td>
<td>✓</td>
<td></td>
<td></td>
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<tr>
<td>• clinical sciences</td>
<td>✓</td>
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<tr>
<td>The content of curricular courses is mapped to Appendix B to assess where specific content foundations are addressed in the curriculum. Gaps in curricular content and inappropriate redundancies identified in the mapping process inform curricular revision.</td>
<td>✓</td>
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<tr>
<td>The didactic course work provides a rigorous scientific foundation appropriate for the contemporary practice of pharmacy.</td>
<td>✓</td>
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<tr>
<td>Knowledge, practice skills, and professional attitudes and values are integrated and applied, reinforced, and advanced throughout the didactic and experiential curriculum.</td>
<td>✓</td>
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<tr>
<td>The biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences are of adequate depth, scope, timeliness, quality, sequence, and emphasis to provide the foundation and support for the intellectual and clinical objectives of the professional degree program and the practice of pharmacy.</td>
<td>✓</td>
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<tr>
<td>The sciences provide the basis for understanding the development and use of medications and other therapies for the treatment and prevention of disease.</td>
<td>✓</td>
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<tr>
<td>Courses and other formal learning experiences are coordinated and integrated across disciplines.</td>
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<tr>
<td>Where instruction is provided by academic units of the university other than the pharmacy program, these areas are developed in accordance with the professional degree program’s curricular goals and objectives; and assessment liaison mechanisms ensure effective instructional delivery and achievement of the educational objectives of the program.</td>
<td>✓</td>
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N/A (no outside instruction) □

Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ✓ to indicate that the topic has been adequately addressed to assess this standard):

- The curricular structure and content of all curricular pathways
- A description of the breadth and depth of the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences components of the didactic curriculum, and the strategies utilized to integrate these components
- How the curricular content for all curricular pathways is linked to Appendix B of Standards 2007 through mapping and other techniques and how gaps in curricular content or inappropriate redundancies identified inform curricular revision
- Examples of assessment and documentation of student performance and the attainment of desired core knowledge, skills and values
- Evidence that knowledge, practice skills and professional attitudes and values are integrated, reinforced and advanced throughout the didactic and experiential curriculum
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
☑ Any other notable achievements, innovations or quality improvements
☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- None.

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<td>Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into full compliance.</td>
<td>Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated</td>
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**Recommended Monitoring:**

- None.
**Standard No. 14: Curricular Core—Pharmacy Practice Experiences:** The college or school must provide a continuum of required and elective pharmacy practice experiences throughout the curriculum, from introductory to advanced, of adequate scope, intensity, and duration to support the achievement of the professional competencies presented in Standard 12. The pharmacy practice experiences must integrate, apply, reinforce, and advance the knowledge, skills, attitudes, and values developed through the other components of the curriculum. The objectives for each pharmacy practice experience and the responsibilities of the student, preceptor, and site must be defined. Student performance, nature and extent of patient and health care professional interactions, where applicable, and the attainment of desired outcomes must be documented and assessed.

In aggregate, the pharmacy practice experiences must include direct interaction with diverse patient populations in a variety of practice settings and involve collaboration with other health care professionals. Most pharmacy practice experiences must be under the supervision of qualified pharmacist preceptors licensed in the United States.

**Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑ The objectives for each introductory and advanced pharmacy practice experience with the responsibilities of the student, preceptor, and site, as applicable
☑ A map/crosswalk of all pharmacy practice experiences (introductory and advanced) against the activities listed in Appendix C of the Standards. (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 C.)

**Required Documentation for On-Site Review:**

☑ Introductory and advanced pharmacy practice experience manuals, including assessment forms
☑ List of current preceptors with details of credentials (including licensure) and practice site

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ AACP Standardized Survey: Student – Questions 37, 38, 40 – 46, 48 - 52
☑ AACP Standardized Survey: Alumni – Questions 25, 27
☑ AACP Standardized Survey: Preceptor – Questions 11, 12, 18 – 21, 23, 24, 36, 38

**Optional Documentation and Data:**

☐ Other documentation or data that provides supporting evidence of compliance with the standard Examples could include assessments and documentation of student performance, nature and extent of patient and health care professional interactions, and the attainment of desired outcomes; aggregate data from students about the type (diversity) and number of patients, problems encountered, and interventions; evidence of assuring, measuring, and maintaining the quality of site used for practice experiences; and quality improvements resulting from practice site assessments.

<table>
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<tr>
<th>Statement</th>
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<tbody>
<tr>
<td>The college or school provides a continuum of required and elective pharmacy practice experiences throughout the curriculum, from introductory to advanced, of adequate scope, intensity, and duration to support the achievement of the professional competencies presented in Standard 12.</td>
<td>☑</td>
<td></td>
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<tr>
<td>The pharmacy practice experiences integrate, apply, reinforce, and advance the knowledge, skills, attitudes, and values developed through the other components of the curriculum.</td>
<td>☑</td>
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<tr>
<td>Pharmacy practice experiences include periods for preparation and guided reflection.</td>
<td>☑</td>
<td></td>
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<tr>
<td>The objectives for each pharmacy practice experience and the responsibilities of the student, preceptor, and site are defined.</td>
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**UNIVERSITY OF WISCONSIN-MADISON**  
**SCHOOL OF PHARMACY**

Goals and outcomes for each pharmacy practice experience are mapped to activities listed in Appendix C to ensure that students’ experience will cover, at a minimum, all the listed activities.

<table>
<thead>
<tr>
<th>Goals and outcomes</th>
<th>Checklist</th>
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<tbody>
<tr>
<td>Student performance, nature and extent of patient and health care professional interactions, where applicable, and the attainment of desired outcomes are documented and assessed.</td>
<td>✔</td>
</tr>
<tr>
<td>In aggregate, the pharmacy practice experiences include direct interaction with diverse patient populations in a variety of practice settings and involve collaboration with other health care professionals.</td>
<td>✔</td>
</tr>
<tr>
<td>Most pharmacy practice experiences are under the supervision of qualified pharmacist preceptors licensed in the United States.</td>
<td>✔</td>
</tr>
<tr>
<td>The college or school ensures that all preceptors (especially first-time preceptors prior to assuming their responsibilities) receive orientation regarding the outcomes expected of students and the pedagogical methods that enhance learning, ongoing training, and development.</td>
<td>✔</td>
</tr>
<tr>
<td>A quality assurance procedure is in place that facilitates standardization and consistency of experiences and outcomes while allowing for individualization of instruction, guidance, and remediation by the preceptor based on student needs.</td>
<td>✔</td>
</tr>
<tr>
<td>Students do not receive remuneration for any pharmacy practice experiences (introductory or advanced) for which academic credit is assigned.</td>
<td>✔</td>
</tr>
<tr>
<td>The introductory pharmacy practice experiences involve actual practice experiences in community and institutional settings and permit students, under appropriate supervision and as permitted by practice regulations, to assume direct patient care responsibilities.</td>
<td>✔</td>
</tr>
<tr>
<td>Introductory pharmacy practice experiences account for not less than 300 hours over the first three professional years. The majority of students' time (minimum 150 hours) is balanced between community pharmacy and institutional health system settings.</td>
<td>✔</td>
</tr>
<tr>
<td>The length of the advanced pharmacy practice experiences is not less than 1440 hours (36 weeks) during the last academic year and after all pre-advanced pharmacy practice experience requirements (i.e., introductory pharmacy practice experiences and required core didactic course work) are completed.</td>
<td>✔</td>
</tr>
<tr>
<td>All required advanced pharmacy practice experiences in all program pathways are conducted in the United States or its territories and possessions (including the District of Columbia, Guam, Puerto Rico, and U.S. Virgin Islands).</td>
<td>✔</td>
</tr>
</tbody>
</table>
| Required experiences include primary, acute, chronic, and preventive care among patients of all ages and develop pharmacist-delivered patient care competencies in the following settings:  
- community pharmacy  
- hospital or health-system pharmacy  
- ambulatory care  
- inpatient/acute care general medicine | ✔ |
| Simulation is used appropriately as a component of introductory pharmacy practice experiences; it does not account for greater than 20% of total introductory pharmacy practice experience time and does not substitute for the hours devoted to actual experiences in community pharmacy and institutional health system settings. N/A (simulation does not count toward the required minimum number of hours for introductory pharmacy practice experiences) | ✔ |

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6 A professional degree program in an institution that meets the definition and characteristics of “cooperative education” (www.co-op.edu) may apply to ACPE for a waiver of this requirement.
Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ✓ to indicate that the topic has been adequately addressed to assess this standard):

✓ How student performance is assessed and documented, including the nature and extent of patient and health care professional interactions, and the attainment of desired outcomes
✓ How, in aggregate, the practice experiences assure that students have direct interactions with diverse patient populations in a variety of health care settings
✓ How the college or school ensures that the majority of students’ IPPE hours are provided in and balanced between community pharmacy and institutional health system settings
✓ How the college or school uses simulation in the curriculum
✓ How the college or school establishes objectives and criteria to distinguish introductory from advanced practice experiences.
✓ How the college or schools assures, measures, and maintains the quality of sites used for practice experiences
✓ How quality improvements are made based on assessment data from practice sites
✓ How the goals and outcomes for each pharmacy practice experience are mapped to the activities listed in Appendix C of Standards 2007 to ensure that students’ experience will cover, at a minimum, all the listed activities
✓ How the college or school is applying the guidelines for this standard, and the additional guidance provided in Appendix C, in order to comply with the intent and expectation of the standard
✓ Any other notable achievements, innovations or quality improvements
✓ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The School’s experiential education is structured such that it provides a total of 315 hours of IPPEs and at least 1520 hours of APPEs. The number of hours and distribution of IPPEs are summarized in the following table:
<table>
<thead>
<tr>
<th></th>
<th>Community Pharmacy</th>
<th>Institutional</th>
<th>Elective Institutional or Community</th>
<th>Other</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>DPH-1</td>
<td>24</td>
<td>4</td>
<td></td>
<td>76 e.g., community outreach, senior care, reflection</td>
<td>104</td>
</tr>
<tr>
<td>DPH-2</td>
<td>24</td>
<td>16</td>
<td>12</td>
<td>55 e.g., community outreach, health literacy, career fair, reflection</td>
<td>103</td>
</tr>
<tr>
<td>DPH-3</td>
<td>40</td>
<td>40</td>
<td>24</td>
<td>4 e.g., career fair</td>
<td>108</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>84</strong></td>
<td><strong>60</strong></td>
<td><strong>36</strong></td>
<td><strong>135</strong></td>
<td><strong>315</strong></td>
</tr>
</tbody>
</table>

- Students complete a minimum of five APPE rotations that are either seven weeks in length if conducted during the summer, or eight weeks in length if conducted in the fall and spring semesters. Required rotations include Acute Pharmaceutical Care and Ambulatory Pharmaceutical Care. Students complete at least three elective rotations, two of which must involve direct patient care. About half of the students complete a fourth elective rotation.

- The goal of the Acute Pharmaceutical Care Clerkship is to incorporate both the inpatient/acute care general medicine and the hospital/health-system pharmacy practice settings that are required by the accreditation standards. Similarly, the goal of the Ambulatory Care rotation is to incorporate both the community pharmacy and the ambulatory care practice settings. This structure does not include unique rotations that directly align with the four required APPE practice settings specifically called for by the accreditation standards. Hence, the evaluation team reviewed APPE course syllabi closely and queried preceptors, students, and the Experiential Learning Program Committee in some depth to determine whether the advance practice rotations as structured provide experiences in (1) community pharmacy, (2) hospital/health-system pharmacy, (3) ambulatory care, and (4) inpatient/acute care general medicine that are of sufficient scope, intensity, and duration to accomplish the level of student proficiency intended by the accreditation standards.
• The evaluation team does not disagree with the School’s desire to model integrated pharmacy practice or of attempting to integrate direct patient care and institutional pharmacy operations within the Acute Pharmaceutical Care Clerkship. Indeed, the accreditation standards do not mandate that students have unique rotations in each of the four practice settings identified above. However, students’ rotations must be structured to assure that the practice experiences as defined in Appendix C of the accreditation standards are of sufficient scope, intensity, and duration, and that students are assessed in such a way that it can be reasonably assured that all students will achieve the level of practice proficiency intended by the standards.

• The evaluation team was not concerned that the acute care general medicine expectations are being met. However, the team was concerned that that there appears to be too much variability between institutional practice sites in the degree to which students are actively engaged in the hospital/health-system practice experiences identified on pages xviii-xix of Appendix C for a sufficient duration to develop a reasonable level of practice proficiency. Also, the evaluation rubric for this rotation does not appear to assess students’ performance in these areas.

• The Ambulatory Pharmaceutical Care Clerkship is scheduled in two practice environments: an independent or chain community pharmacy and a clinic setting. Students dedicate four and a half days per week to the community pharmacy setting and one-half day per week to the clinic. This rotation does provide community pharmacy-based experiences that are of adequate scope, intensity, and duration. The half-day per week (i.e., 40 hours total) that students spend in a clinic setting as part of this rotation appears to meet the definition of an ambulatory care experience (e.g., interprofessional, includes direct patient assessment and responsibility for active management of drug therapy). However, the evaluation team questioned whether the ambulatory care (i.e., clinic) experience is of adequate intensity and duration to allow all students to develop and demonstrate reasonable competency in this area and to satisfy the intent of the standard, especially when accomplished as seven or eight half-day experiences spread across seven or eight weeks.
No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.

- No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance
  - Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.

- Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance; the plan has been fully implemented; sufficient evidence already exists that the plan is addressing the factors and will bring the program into full compliance.

- Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.

- Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.

- Adequate information was not provided to assess compliance

Recommended Monitoring:

- Evidence that the APPEs provide all students with Advanced Pharmacy Practice Experiences in the (1) Hospital/Health-System and (2) Ambulatory Care settings that are of appropriate scope, intensity, and duration, and are assessed in such a way that assures all students achieve the level of practice proficiency intended by the accreditation standards.
Standard No. 15: Assessment and Evaluation of Student Learning and Curricular Effectiveness: As a component of its evaluation plan, the college or school must develop and carry out assessment activities to collect information about the attainment of desired student learning outcomes. The assessment activities must employ a variety of valid and reliable measures systematically and sequentially throughout the professional degree program. The college or school must use the analysis of assessment measures to improve student learning and the achievement of the professional competencies.

The college or school must systematically and sequentially evaluate its curricular structure, content, organization, and outcomes. The college or school must use the analysis of outcome measures for continuous improvement of the curriculum and its delivery.

Documentation and Data:

Use a check ✓ to indicate the information provided by the college or school and used to self-assess this standard:

Required Documentation and Data:

- Performance of graduates (passing rates of first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX©) for the last 5 years broken down by campus/branch/pathway (only required for multi-campus and/or multi-pathway programs) [SAME DATA ARE USED FOR STANDARD 3, 9, AND 15]
- Performance of graduates (passing rate of first-time candidates) on Multistate Pharmacy Jurisprudence Examination® (MPJE®) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
- Performance of graduates (passing rate of first-time candidates) on North American Pharmacist Licensure Examination™ (NAPLEX©) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
- Performance of graduates (Competency Area 1 scores for first-time candidates) on North American Pharmacist Licensure Examination™ (NAPLEX©) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
- Performance of graduates (Competency Area 2 scores for first-time candidates) on North American Pharmacist Licensure Examination™ (NAPLEX©) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]
- Performance of graduates (Competency Area 3 scores for first-time candidates) on North American Pharmacist Licensure Examination™ (NAPLEX©) for the last 5 years [NOTE: THIS DATA VIEW IS USED WITH STANDARDS 3, 9, 15]

Required Documentation for On-Site Review:

- Examples of instructional tools, such as portfolios, used by students to assist them in assuming responsibility for their own learning and for measuring their achievement

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

- AACP Standardized Survey: Faculty – Question 46
- AACP Standardized Survey: Student – Question 28
- AACP Standardized Survey: Alumni – Question 17
- AACP Standardized Survey: Preceptor – Question 22, 24

Optional Documentation and Data:

- Other documentation or data that provides supporting evidence of compliance with the standard Examples of assessment and documentation of student performance, nature and extent of patient and health care professional interactions, and the attainment of desired outcomes; examples of how assessment data has been used to improve student learning and curricular effectiveness
| The college or school develops and carries out assessment activities to collect information about the attainment of desired student learning outcomes. The assessment activities employ a variety of valid and reliable measures systematically and sequentially throughout the professional degree program. | ✔️ |
| The college or school’s evaluation of student learning determines student achievement at defined levels of the professional competencies, in aggregate and at the individual student level | ✔️ |
| The college or school uses the analysis of assessment measures to improve student learning and the achievement of the professional competencies. | ✔️ |
| The college or school systematically and sequentially evaluates its curricular structure, content, organization, pedagogy, and outcomes. | ✔️ |
| The college or school uses the analysis of outcome measures for continuous improvement of the curriculum and its delivery. | ✔️ |
| The college or school has developed a system to evaluate curricular effectiveness. | ✔️ |
| The college or school ensures the credibility of the degrees it awards and the integrity of student work. | ✔️ |
| The college or school has mechanisms to assess and correct underlying causes of ineffective learning experiences. | ✔️ |
| The college or school’s assessments include measurement of perceived stress in faculty, staff, and students, and evaluate the potential for a negative impact on programmatic outcomes and morale. | ✔️ |

**Comments on the Standard:**

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ✔️ to indicate that the topic has been adequately addressed to assess this standard):

- ✔️ A description of formative and summative assessments and measures used to evaluate teaching and learning methods and curricular effectiveness, including nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable)
- ✔️ A description of the assessment measures and methods used to evaluate student learning and achievement at defined levels of the professional competencies and educational outcomes, both in aggregate and at the individual student level
- ✔️ How achievement of required competencies by all students is assessed and assured on completion of the program
- ✔️ Comparisons with national data and selected peer-group programs (include a description of the basis for the peer-group selection) and trends over time
- ✔️ How feedback from the assessments is used to improve student learning, outcomes, and curricular effectiveness
- ✔️ The mechanisms in place to assess and correct causes of ineffective learning experiences, including the measurement of perceived stress in faculty, staff, and students and evaluation of the potential for a negative impact on programmatic outcomes and morale
- ✔️ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- ✔️ Any other notable achievements, innovations or quality improvements
- ✔️ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms
b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- See also Standard No. 3.

- The School is in the process of developing and implementing an “Outcome Tracker.” In part, this is being done to fulfill the expectations of Appendix D to the accreditation standards regarding assessment of student capabilities before entering the APPEs. The Outcome Tracker is a portfolio-type approach that will document each student’s progress in achieving the School’s overall educational outcomes as determined through a variety of assessment mechanisms that are imbedded in courses throughout the curriculum.

- The evaluation team was impressed by the Outcomes Tracker initiative. When fully implemented, it should be a powerful tool for both individual student and curricular assessment. Much of the School’s success in evaluating student learning and curricular effectiveness will depend on the success of the Outcome Tracker.

<table>
<thead>
<tr>
<th>Compliant</th>
<th>Compliant with Monitoring</th>
<th>Partially Compliant</th>
<th>Non Compliant</th>
</tr>
</thead>
<tbody>
<tr>
<td>No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.</td>
<td>No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance.</td>
<td>Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.</td>
<td>Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated.</td>
</tr>
</tbody>
</table>

Recommended Monitoring:

- Provide an update on implementation of the Outcomes Tracker, including an indication of any course or curricular modifications made as a result of assessment data derived there from.
**SECTION FOUR: STUDENTS**

**Standard No. 16: Organization of Student Services:** The college or school must have an organizational element(s) devoted to student services. The administrative officer responsible for this organizational element must oversee and coordinate the student services of the college or school.

**Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑ Synopsis of the Curriculum Vitae of the student affairs administrative officer

☑ An organizational chart depicting student services and the corresponding responsible person(s)

☑ Professional Technical Standards for the school, college and/or university (as they relate to the professional degree program in pharmacy) (if available)

**Required Documentation for On-Site Review:**

☑ The Student Handbook

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ AACP Standardized Survey: Student – Questions 53 – 59, 63

☑ AACP Standardized Survey: Alumni – Question 26

**Optional Documentation and Data:**

☐ Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include documents used for student orientation, guidance and counseling.

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<table>
<thead>
<tr>
<th>Statement</th>
<th>S</th>
<th>N.I.</th>
<th>U</th>
</tr>
</thead>
<tbody>
<tr>
<td>The college or school has an organizational element(s) devoted to student services.</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The organizational element(s) devoted to student services has an administrative officer responsible for overseeing and coordinating them.</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The budget assigned to student services is sufficient to provide needed services.</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The college or school has an ordered, accurate, and secure system of student records which are confidential and maintained in compliance with the Family Educational Rights and Privacy Act (FERPA).</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student services personnel are knowledgeable regarding FERPA law and its requirements.</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The college or school provides students with financial aid information and guidance, academic advising, career-pathway and other personal counseling, and information about post-graduate education and training opportunities, e.g., residencies, fellowships, and graduate school.</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The college or school offers access to adequate health and counseling services for students. Appropriate immunization standards exist, along with the means to ensure that such standards are satisfied.</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The college or school has policies in place so that students who have off-campus classes or pharmacy practice experiences fully understand their insurance coverage and where and how to access health and counseling services.</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The college or school has a policy on student services, including admissions and progression, that ensures nondiscrimination as defined by state and federal laws and regulations, such as on the basis of race, religion, gender, lifestyle, sexual orientation, national origin, or disability.</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The college or school ensures that students in all degree program pathways and geographic locations have equal</td>
<td>☑</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ✔ to indicate that the topic has been adequately addressed to assess this standard):

✔ A description of student services offered and, if applicable, how the college or school ensures that students in all degree program pathways and geographic locations have equal access to and a comparable system of individualized student services (e.g., tutorial support, faculty advising, counseling)

✔ A description of the sections of the student handbook that deal with specific requirements of the standard and guidelines

✔ How the college or school provides students with financial aid information and guidance, academic advising, career-pathway and other personal counseling, and information about post-graduate education and training opportunities

✔ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

✔ Any other notable achievements, innovations or quality improvements

✔ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- Students with whom the evaluation team met were very complimentary of the support they receive from the Student Affairs group.
Recommended Monitoring:

- None.

**Standard No. 17: Admission Criteria, Policies, and Procedures:** The college or school must produce and make available to students and prospective students criteria, policies, and procedures for admission to the professional degree program. Admission materials must clearly state academic expectations, required communication skills, types of personal history disclosures that may be required, and professional standards for graduation. As a component of its evaluation plan, the college or school must regularly assess the criteria, policies, and procedures to ensure the selection of students who have the potential for academic success in the professional degree program and the ability to achieve the professional competencies and to practice in culturally diverse environments.

Student enrollment must be managed in alignment with available physical, financial, faculty, staff, practice site, preceptor, and administrative resources. The dean and a duly constituted committee of the college or school must share the final responsibility for enrollment and selection of students.

**Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

*Note:* PCAT, GPA, Math GPA and Science GPA data requested below are provided as data views in the Assessment and Accreditation Management System (AAMS) for colleges and schools that participate in PharmCAS. For colleges and schools that do not participate in PharmCAS, the charts and tables must be created from the college or school’s own data.

- ☑ The list of preprofessional requirements for admission into the professional degree program
- ☑ Copies of instruments used during the admissions interview process
- ☑ Copies of Early Assurance Program agreement(s) between the college or school and the associated institution(s) or student (if applicable)
- ☑ Enrollment projections for the next five years (if applicable, broken down by branch/campus and by pathway)
- ☑ Enrollment data for the past five years by year and branch/campus (*only applicable to multi-campus programs*)
- ☑ Enrollment data for the past five years by year and program pathway (*only applicable to multi-pathway programs*)
- ☑ PCAT Scores (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [Note: Same data for Standards 3 & 17]
GPA (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA FOR STANDARDS 3 & 17]

Math GPA (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA FOR STANDARDS 3 & 17]

Science GPA (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA FOR STANDARDS 3 & 17]

Required Documentation for On-Site Review:

(No required for this standard)

Data Views and Standardized Tables:

Note: PCAT, GPA, Math GPA and Science GPA data views listed below are provided as data views in the Assessment and Accreditation Management System (AAMS) for colleges and schools that participate in PharmCAS. For colleges and schools that do not participate in PharmCAS, the charts and tables must be created from the college or school’s own data (see Required Data and Documentation above).

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

- Application and admissions/enrollments for the past 5 years
- Enrollment data for the past five years by year and gender [NOTE: SAME DATA VIEW AS FOR STANDARD 3]
- Enrollment data for the past five years by year and race/ethnicity [NOTE: SAME DATA VIEW AS FOR STANDARD 3]
- PCAT Scores (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA VIEW FOR STANDARDS 3 & 17]
- GPA (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA VIEW FOR STANDARDS 3 & 17]
- Math GPA (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA VIEW FOR STANDARDS 3 & 17]
- Science GPA (Mean, Maximum and Minimum) for Admitted Class for Past 5 Years [NOTE: SAME DATA VIEW FOR STANDARDS 3 & 17]
- AACP Standardized Survey: Student – Question 64

Optional Documentation and Data:

- Mean PCAT Scores for Admitted Class for Past 5 Years Compared to Peer Schools [NOTE: SAME DATA FOR STANDARDS 3 & 17]
- Mean GPA for Admitted Class for Past 5 Years Compared to Peer Schools [NOTE: SAME DATA FOR STANDARDS 3 & 17]
- Mean Math GPA for Admitted Class for Past 5 Years Compared to Peer Schools [NOTE: SAME DATA FOR STANDARDS 3 & 17]
- Mean Science GPA for Admitted Class for Past 5 Years Compared to Peer Schools [NOTE: SAME VIEW FOR STANDARDS 3 & 17]
- Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include recruitment aids, extracts from the college or school’s catalog, brochures, screenshots from the college or school website; data on student employment after graduation; and curricular outcomes data correlated with admissions data.

<table>
<thead>
<tr>
<th></th>
<th>S</th>
<th>N.I.</th>
</tr>
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<tbody>
<tr>
<td>The college or school produces and makes criteria, policies, and procedures for admission to the professional degree program available to students and prospective students.</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>Admission materials clearly state academic expectations, required communication skills, types of personal history disclosures that may be required, and professional technical standards for graduation.</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>As a component of its evaluation plan, the college or school regularly assesses the criteria, policies, and procedures to ensure the selection of students who have the potential for academic success in the professional degree program, the ability to achieve the professional competencies, and the disposition to practice in culturally diverse</td>
<td>✔</td>
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</tr>
</tbody>
</table>
The dean and a duly constituted committee of the college or school share the final responsibility for enrollment and selection of students.

Written and verbal communication skills are assessed for student admissions in a standardized manner.

Interviews are structured to consistently address key admission criteria for each applicant.

Interviewers have appropriate credentials and are trained in successful interview strategies and techniques.

Evaluation of professional attitudes and behaviors is a component of the student selection process.

The college or school develops and employs admission criteria that set performance expectations for admission tests, evaluations, and interviews used in selecting students who have the potential for success in the professional degree program and the profession.

The admission evaluation of students is documented and records are maintained by the college or school.

Admission criteria, policies, and procedures are not compromised regardless of the size and quality of the applicant pool.

In accordance with United States Department of Education regulations, the college or school has a process in place through which the college or school establishes that the student who registers in a distance education course or program is the same student who participates in and completes all course or program requirements and receives academic credit.

Consultation with ACPE occurs at least six months before recruiting students into new pathways or programs.

The college or school ensures that early assurance students are at least as well qualified as students accepted for direct entry into the first professional year. Early assurance agreements and policies allow the college or school to manage student enrollment in alignment with physical, financial, faculty, staff, practice site, preceptor, and administrative resources.

Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ✓ to indicate that the topic has been adequately addressed to assess this standard):

✓ Admissions and enrollment Information, highlighting how specific requirements of the standards and guidelines are met, including those for early admission agreements or policies, if applicable
✓ How admission evaluations of students is documented and how records are maintained.
✓ A description of the college or school’s recruitment methods
✓ A description of methods used to assess verbal and written communication skills of applicants to the program
✓ How enrollment is managed in alignment with available physical, financial, staff, faculty, practice site, preceptor and administrative resources
✓ How curricular outcomes data are correlated with admissions data
✓ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
✓ Any other notable achievements, innovations or quality improvements
✓ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the
quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The School currently admits 140 students to its DPH-1 class. There are no plans to increase enrollment beyond this level. The School is encouraged in its efforts to expand the diversity of its student body.

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Recommended Monitoring:

- None.
Standard No. 18: Transfer of Credits and Waiver of Requisites for Admission with Advanced Standing: The college or school must produce and make available to students and prospective students transfer credit and course-waiver policies, based on rational procedures and defensible assessments.

Documentation and Data:

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

Required Documentation and Data:

☑ Student transfer credit and course waiver policies

Required Documentation for On-Site Review:

(None required for this standard)

Data Views and Standardized Tables:

(None required for this standard)

Optional Documentation and Data:

☐ Other documentation or data that provides supporting evidence of compliance with the standard

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<td>The college or school produces transfer credit and course-waiver policies, based on rational procedures and defensible assessments and makes that information available to students and prospective students.</td>
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<td>The college or school implements policies and procedures for the evaluation of the equivalency of educational courses (preprofessional or professional) prior to admission or transfer to the professional degree program.</td>
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<td>Requisites are only waived based upon an educationally sound assessment of the professional competencies (as set forth in Standard 12) that have been achieved through, for example, continuing pharmacy education, other education and training, and previous pharmacy practice experience.</td>
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<td>The college or school has established and implemented policies and procedures for students who request to transfer credits or who wish to change from one program pathway to another.</td>
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Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ The number of transfer students, including (if applicable) international students or graduates of other professional degree programs admitted with advanced standing, and an assessment of the correlation between the criteria in the transfer policy and success in the program. If applicable, comparative performance data should be provided.

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

☑ Any other notable achievements, innovations or quality improvements

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.
- None.

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**Recommended Monitoring:**
- None.

**Standard No. 19: Progression of Students:** The college or school must produce and make available to students and prospective students criteria, policies, and procedures for academic progression, academic probation, remediation, missed course work or credit, dismissal, readmission, rights to due process, and appeal mechanisms.

1) **Documentation and Data:**

Use a check ☒ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☒ The policy(ies) that address student progression, academic probation, remediation, missed course work or credit, dismissal, readmission, due process and appeals

☒ Section of the student handbook that covers the student progression policy

**Required Documentation for On-Site Review:**

*(None required for this standard)*

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☒ On-time graduation rates for past five years (compared to national rate)

☒ Percentage total attrition rate for past five years (compared to national rate)

☒ Percentage academic dismissals for past five years (compared to national rate)

☒ PharmD degrees conferred for past five years

☒ AACP Standardized Survey: Faculty – Question 61

**Optional Documentation and Data:**

64
Other documentation or data that provides supporting evidence of compliance with the standard

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<td>The college or school produces and makes available to students and prospective students criteria, policies, and procedures for academic progression, academic probation, remediation, missed course work or credit, dismissal, readmission, rights to due process, and appeal mechanisms.</td>
<td>☑</td>
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<tr>
<td>The college or school’s system of monitoring student performance, based on formative assessments of learning outcomes provides for the early detection of academic difficulty.</td>
<td>☑</td>
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<tr>
<td>The college or school maintains a record of student retention, attrition, and on-time graduation, identifies and analyzes trends, and makes programmatic adjustments as needed.</td>
<td>☑</td>
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<tr>
<td>The college or school ensures that all students have comparable access to individualized student services such as comprehensive academic success counseling, tutoring and faculty advising.</td>
<td>N/A (single pathway and geographic location)</td>
<td>☑</td>
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Comments on the Standard:

a. The college or school's descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ How student matriculation, progression and graduation rates correlate to admission and transfer policies and the college or school's mission
☑ The academic counseling and/or student support staff available to work with students seeking to retain or regain good academic standing, and how extensively they are utilized
☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
☑ Any other notable achievements, innovations or quality improvements
☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- None.
Compliant

No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.

Compliant with Monitoring

• No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance
  /or
• Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance; the plan has been fully implemented; sufficient evidence already exists that the plan is addressing the factors and will bring the program into full compliance.

Partially Compliant

Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.

Non Compliant

• Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated /or
• Adequate information was not provided to assess compliance

Recommended Monitoring:

• None.

Standard No. 20: Student Complaints Policy: The college or school must produce and make available to students a complaints policy that includes procedures to be followed in the event of a written complaint related to one of the accreditation standards, student rights to due process, and appeal mechanisms. Students must receive information on how they can submit a complaint to ACPE for unresolved issues on a complaint related to the accreditation standards.7

Documentation and Data:

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

Required Documentation and Data:

☑ Copy of policy and procedures for handling complaints related to ACPE Standards

Required Documentation for On-Site Review:

☑ The Student Complaints File

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ AACP Standardized Survey: Student – Question 61

Optional Documentation and Data:

☐ Other documentation or data that provides supporting evidence of compliance with the standard

7 Refer also to ACPE Complaints Policy at http://www.acpe-accredit.org/complaints/default.asp
The college or school produces and makes available to students a complaints policy that includes procedures to be followed in the event of a written complaint related to one of the accreditation standards, student rights to due process, and appeal mechanisms.

Students receive information on how they can submit a complaint to ACPE for unresolved issues on a complaint related to the accreditation standards.8

The college or school includes information about the complaint policy during student orientation.

The college or school maintains a chronological record of student complaints related to matters covered by the accreditation standards and allows inspection of the records during on-site evaluation visits by ACPE.

The college or school informs ACPE during an on-site evaluation if any of the student complaints related to the accreditation standards have led to legal proceedings, and the outcomes of such proceedings.

Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ How the complaint policy is communicated to students
☑ The number of complaints since the last accreditation visit and the nature of their resolution
☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
☑ Any other notable achievements, innovations or quality improvements
☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- A student complaints policy is in place, and there are currently no student complaints related to the ACPE accreditation standards on file.

8 Refer also to ACPE Complaints Policy at http://www.acpe-accredit.org/complaints/default.asp
Recommended Monitoring:

- None.

**Standard No. 21: Program Information:** The college or school must produce and make available to students and prospective students a complete and accurate description of the professional degree program, including its current accreditation status.

**Documentation and Data:**

Use a check ☑️ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑️ URL or link to program information on the college or school’s website

**Required Documentation for On-Site Review:**

☑️ College or school’s Catalog
☑️ Recruitment brochures
☑️ Student Handbook

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑️ AACP Standardized Survey: Student – Questions 58, 70

**Optional Documentation and Data:**

☑️ Other documentation or data that provides supporting evidence of compliance with the standard

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☑️ Compliant ☐ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant

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The college or school produces and makes available to students and prospective students a complete and accurate description of the professional degree program, including its current accreditation status.
Admissions policies, procedures, and practices fully and clearly represent the conditions and requirements related to distance learning, including full disclosure of any requirements that cannot be completed at a distance.

N/A (no distance pathways)

Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

☑ Any other notable achievements, innovations or quality improvements

☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- None.

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☑ Compliant ☐ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant
Recommended Monitoring:

- None.

**Standard No. 22: Student Representation and Perspectives:** The college or school must consider student perspectives and include student representation, where appropriate, on committees, in policy-development bodies, and in assessment and evaluation activities.

**Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑ A list of committees involving students and the names and professional years of students involved on committees

**Required Documentation for On-Site Review:**

*(None required for this standard)*

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ AACP Standardized Survey: Student – Questions 60 – 62, 65, 66

**Optional Documentation and Data:**

☐ Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include extracts from committee meeting minutes that demonstrate active participation by students.

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<td>The college or school considers student perspectives and includes student representation, where appropriate, on committees, in policy-development bodies, and in assessment and evaluation activities.</td>
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<td>The college or school involves student representatives on appropriate program committees, as well as in accreditation self-studies and strategic planning activities.</td>
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<td>The pharmacy students feel their perspectives are heard, respected, and acted upon in a fair and just manner.</td>
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<td>A clear process exists for students to follow to raise issues with the college or school administration.</td>
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<tr>
<td>The college or school administration responds to problems and issues of concern to the student body.</td>
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**Comments on the Standard:**

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ The participation and contribution of students on college or school committees
☑ The organization, empowerment, and implementation of a student government association or council
☑ The other methods (e.g., focus groups, meetings with the Dean or other administrators, involvement in self-study activities, review of student complaints) used to gather student perspectives
☑ Examples of quality improvements in the college or school that have been made as a result of student representation and perspectives
How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

Any other notable achievements, innovations or quality improvements

Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- Student representatives from the DPH-1 through DPH-4 classes are appointed as members of appropriate School committees (e.g., Assessment, Curriculum, Student/Faculty/Staff Relations). A reasonable effort is made to schedule committee meetings at times to accommodate students' class schedules and facilitate their participation. Student members of the committees with whom the evaluation team met appeared to be actively engaged in the work of the committees, and their perspectives appeared to be sought out and valued by faculty.

- Beginning in Fall 2011, eight to ten person Class Councils have been formed for the DPH-1 through DPH-3 classes as a means to enhance communication and student input to the faculty and administration. Each council will meet regularly with its respective class academic advisor and the School's Ombuds.
Compliant

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Non Compliant

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Recommended Monitoring:

• None.

Standard No. 23: Professional Behavior and Harmonious Relationships: The college or school must provide an environment and culture that promotes professional behavior and harmonious relationships among students, faculty, administrators, preceptors, and staff. Faculty, administrators, preceptors, and staff must be committed to developing professionalism and fostering leadership in students and to serving as mentors and positive role models for students.

Documentation and Data:

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

Required Documentation and Data:

☑ The college or school's code of conduct addressing professional behavior and harmonious relationships.

Required Documentation for On-Site Review:

(None required for this standard)

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ AACP Standardized Survey: Faculty – Questions 58-60
☑ AACP Standardized Survey: Student - Questions 59, 67, 68, 70 - 75
☑ AACP Standardized Survey: Alumni – Questions 18, 19, 30
☑ AACP Standardized Survey: Preceptor – Questions 13, 14

Optional Documentation and Data:

☑ Other documentation or data that provides supporting evidence of compliance with the standard

The college or school provides an environment and culture that promotes professional behavior and harmonious relationships

☑
relationships among students, faculty, administrators, preceptors, and staff.

Faculty, administrators, preceptors, and staff are committed to developing professionalism and fostering leadership in students and to serving as mentors and positive role models for students.

The college or school develops, via a broadly based process, a policy consistent with university policies on student, faculty, preceptor, and staff professionalism that defines expected behaviors and consequences for deviation from the policy, as well as due process for appeals.

The activities undertaken by the college or school to promote professional behavior are effective.

The activities undertaken by the college or school to promote harmonious relationships are effective.

The activities undertaken by the college or school to promote student mentoring and leadership development are effective.

Faculty receive support from peers to participate in student mentoring and leadership development activities, and these efforts are viewed favorably by college or school administration.

The college or school supports students, faculty, administrators, preceptors, and staff participation, where appropriate, in pharmacy, scientific and other professional organizations.

Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ Strategies that the college or school has used to promote professional behavior, and the outcomes
☑ Strategies that the college or school has used to promote harmonious relationships among students, faculty, administrators, preceptors, and staff; and the outcomes
☑ Strategies that the college or school has used to promote student mentoring and leadership development, and the outcomes
☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
☑ Any other notable achievements, innovations or quality improvements
☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

• The School indicated several areas in need of improvement related to this standard in its self-study and even suggested that it was Partially Compliant with the standard. Thus, the evaluation team explored issues of faculty-student and faculty-faculty relationships in some depth with many of the groups and individuals with whom it met. Almost to a person, faculty stated that they felt the self-study was not an accurate representation of the current state of affairs within the School. Although there were a few students that had issues with an instructor or two, most students spoke very highly of their relationships with and the support they receive from faculty. Results from AACP survey data generally indicate positive trends on those questions of relevance to this issue.
• It thus appeared to the evaluation team that recent steps taken by the School to further encourage professional behavior among students and effective faculty-student relationships are yielding positive results (e.g., class-generated honor codes, formation of Class Councils, further clarifying for students how to effectively communicate their concerns/complaints.)

• Although it appeared to the evaluation team that activities undertaken to further enhance effective faculty-faculty relationships also are yielding positive results, some remnants of disharmony between at least some faculty members still appear to remain.

• The School is encouraged to continue to place a priority on enhancing faculty-student and faculty-faculty relationships, including means to enhance general faculty participation in student co-curricular or extracurricular activities. Regression in this area would be detrimental to the School and its stakeholders.
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Recommended Monitoring:

- Description of initiatives undertaken by the School to foster an environment and culture that promotes professional behavior and harmonious relationships among students, faculty, administrators, preceptors, and staff.
SECTION FIVE:
FACULTY AND STAFF

Standard No. 24: Faculty and Staff—Quantitative Factors: The college or school must have a sufficient number of qualified full-time faculty and staff to effectively deliver and evaluate the professional degree program, while providing adequate time for faculty development, research and other scholarly activities, service, and pharmacy practice.

1) Documentation and Data:

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

Required Documentation and Data:

☑ List of full time staff within each department/division and their areas of responsibility (e.g. administrative support, telecommunication, audiovisual, and computer personnel) [NOTE: SAME REPORT FOR STANDARD 7 & 24]
☑ List of part time paid faculty (< 0.5FTE) and staff with (as applicable) academic title, credentials, department/division, and areas of responsibility
☑ ACPE Faculty Resource Report
☑ List of faculty turnover for the last 5 years, by department/division, with reasons for leaving and timing of replacements
☑ List of staff turnover for the last 5 years, by department/division, with reasons for leaving and timing of replacements

Required Documentation for On-Site Review:

☑ List of voluntary faculty, with academic title/status and practice site; specify IPPE and/or APPE

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ List of key university and college or school administrators, and full-time and part-time (≥ 0.5FTE) faculty, including a summary of their current academic rank, primary discipline, title/position, credentials, post-graduate training, and licensure (if applicable) [Faculty Addendum Template]
[Download template from http://www.acpe-accredit.org/pdf/ACPEFacultyAddendum_REV411.doc]
☑ AACP Standardized Survey: Faculty – Questions 14, 20, 27, 28, 62 - 65
☑ AACP Standardized Survey: Student – Question 69
☑ Table: Allocation of Faculty Effort (total for all faculty with ≥ 0.5FTE) [see example table at http://www.acpe-accredit.org/pdf/Excel%20Documents/AllocationFacultyEffort.xls]
☑ Table: Distribution of Full-Time Pharmacy Faculty by Rank and Years in Rank

Optional Documentation and Data:

☐ Other documentation or data that provides supporting evidence of compliance with the standard.

<table>
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<tr>
<th>The college or school has a sufficient number of qualified full-time faculty to effectively deliver and evaluate the professional degree program, while providing adequate time to ensure that the following are achieved:</th>
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<td>☑ effective organization and delivery of the curriculum through classroom, small group, laboratory, practice simulation, service learning, and oversight and provision of experiential education</td>
<td>☑</td>
<td>☑</td>
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<td>☑ faculty mentoring</td>
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<td>☑ student advising and mentoring</td>
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<td>☑ research and other scholarly activities</td>
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<td>☑ faculty development as educators and scholars</td>
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Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ A description of the process and interval for conducting faculty workload and needs assessments
☑ An analysis of teaching load of faculty members, including commitments outside the professional degree program
☑ The rational for hiring any part-time faculty, and the anticipated duration of their contract
☑ Evidence of faculty and staff capacity planning and succession planning
☑ A discussion of the college or school’s student-to-faculty ratio and how the ratio ties in with the college or school’s mission and goals for the program
☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
☑ Any other notable achievements, innovations or quality improvements
☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The School currently has four vacant faculty positions among its approximately 71 faculty FTEs: three in Pharmaceutical Sciences and one in Pharmacy Practice. Most faculty hires over the past five years have been to replace faculty who retired or resigned, and open positions generally have been filled in a timely manner.

- Even though faculty have experienced salary reductions in recent years caused by cuts in the University’s state allocation, faculty turnover does not appear to have been a special problem to this point. Faculty morale has probably been impacted, and further salary reductions could prove problematic for the School.
Recommended Monitoring:

- None.

Standard No. 25: Faculty and Staff—Qualitative Factors: The college or school must have qualified faculty and staff who, individually and collectively, are committed to its mission and goals and respect their colleagues and students. Faculty must possess the required professional and academic expertise, have contemporary knowledge and abilities in current educational philosophy and techniques, and be committed to the advancement of the profession and the pursuit of research and other scholarly activities. Faculty whose responsibilities include the practice of pharmacy must satisfy all professional licensure requirements that apply to their practice. The college or school must foster the development of its faculty and staff, commensurate with their responsibilities in the program.

1) Documentation and Data:

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

Required Documentation and Data:

- Extract from the faculty handbook relevant to policies and procedures for faculty recruitment, promotion, tenure (if applicable), and retention
- A list of full and part-time paid faculty with pharmacy practice responsibilities, the nature of their practice, their percent effort in practice, and their pharmacy licensure status

Required Documentation for On-Site Review:

- Copy of the Faculty Handbook
- Faculty Member Profiles
- CVs of administrators, faculty and staff

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

- AACP Standardized Survey: Faculty – Questions 11, 33, 34
- AACP Standardized Survey: Student – Question 69
AACP Standardized Survey: Alumni – Questions 29, 30
AACP Standardized Survey: Preceptor – Question 37
Table: Distribution of Full-Time Pharmacy Faculty by Rank, Gender and Race/Ethnicity
Table: Distribution of Full-Time Pharmacy Faculty by Rank and Highest Degree Earned
Table: Distribution of Full-Time Pharmacy Faculty by Rank and Tenure Status
Table: Distribution of Full-Time Pharmacy Faculty by Department and Tenure Status

Optional Documentation and Data:

☐ Other documentation or data that provides supporting evidence of compliance with the standard. Examples could include job descriptions, recruitment advertisements, faculty and staff policies and procedures, and extracts from committee meeting minutes.

<table>
<thead>
<tr>
<th>The college or school has qualified faculty who, individually and collectively, are committed to its mission and goals and respect their colleagues and students.</th>
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<th>The college or school has qualified staff who, individually and collectively, are committed to its mission and goals and respect their colleagues and students.</th>
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<th>Faculty possess the required professional and academic expertise, have contemporary knowledge and abilities in current educational philosophy and techniques, and are committed to the advancement of the profession and the pursuit of research and other scholarly activities.</th>
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<th>Faculty generate and disseminate knowledge through scholarship. Scholarship by faculty members, including the scholarship of teaching, is evident and demonstrated by productive research and other scholarly activities.</th>
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<th>Faculty whose responsibilities include the practice of pharmacy satisfy all professional licensure requirements that apply to their practice.</th>
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<th>Pharmacy practice faculty possess additional professional training (residency, fellowship, or equivalent experience).</th>
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<th>Pharmacy practice faculty either have or are working toward additional credentials (for example, specialty certification) relevant to their practice and teaching responsibilities.</th>
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<th>The college or school ensures that policies and procedures for faculty recruitment, promotion, tenure (if applicable), remuneration and retention are established and applied in a consistent manner.</th>
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<th>The college or school ensures that the faculty composition, including any contributions from internal and external relationships, encompasses the relevant disciplines within the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences to meet the education and research needs as defined by the mission statement.</th>
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<th>Faculty, regardless of their discipline, have or are developing a conceptual understanding of current and proposed future pharmacy practice in a variety of settings.</th>
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<th>Faculty members have the capability and continued commitment to be effective teachers. Effective teaching requires knowledge of the discipline, effective communication skills, and an understanding of pedagogy, including construction and delivery of the curriculum, and a commitment to learning outcomes assessment.</th>
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<th>The college or school provides, or is affiliated with institutions that provide, postgraduate education and training, including accredited residency and fellowship programs.</th>
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<th>The college or school fosters an environment that encourages contributions by the faculty to the development and transmission of knowledge.</th>
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Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ The process used to assess and confirm the credentials of faculty and staff, and to assure that faculty credentials are appropriate for their assigned teaching responsibilities
How the college or school ensures that the faculty composition, including any contributions from internal and external relationships, encompasses the relevant disciplines within the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences to meet the education and research needs as defined by the mission statement

How the college or school ensures that faculty members, regardless of their discipline, have a conceptual understanding of current and future trends in the scientific basis of the biomedical, pharmaceutical social/administrative and clinical sciences

How the college or school ensures that faculty members, regardless of their discipline, have a conceptual understanding of contemporary pharmacy practice and future trends in a variety of settings

A description of the college or school’s policy or expectations regarding research productivity for faculty, including timeline for new faculty

Evidence that faculty are generating and disseminating knowledge through productive research and scholarship, including the scholarship of teaching

A description, if applicable, of how faculty, instructors, and teaching assistants involved in distance education are qualified through training or experience to manage, teach, evaluate, and grade students engaged in distance learning

How the college or school provides, or is affiliated with institutions that provide, postgraduate education and training, including accredited residencies and fellowship programs

How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

Any other notable achievements, innovations or quality improvements

Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- Faculty is commended on the success of their research and scholarship and for their commitment to teaching excellence. As evidence of the faculty's research productivity, the School ranks 22nd nationally among schools of pharmacy in its NIH research funding.

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<tr>
<td>No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.</td>
<td>No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance /or</td>
<td>Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.</td>
<td>Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated /or</td>
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☐ Compliant ☐ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant
Recommended Monitoring:

- None.

**Standard No. 26: Faculty and Staff Continuing Professional Development and Performance Review:** The college or school must have an effective continuing professional development program for full-time, part-time, and voluntary faculty and staff consistent with their responsibilities. The college or school must review the performance of faculty and staff on a regular basis. Criteria for performance review must be commensurate with the responsibilities of the faculty and staff in the professional degree program.

**Documentation and Data:**

Use a check ✓ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

- Examples of faculty and staff development programs and opportunities offered or supported by the college or school
- Faculty Activity Report forms used officially in goal setting/performance evaluation meetings

**Required Documentation for On-Site Review:**

na If utilized, examples of faculty portfolios, documenting teaching, research and service activities

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

- AACP Standardized Survey: Faculty – Questions 12, 13, 15 – 18, 33, 37
- AACP Standardized Survey: Preceptor – Questions 15 – 17, 39
- Table: Research and Scholarly Activity of Full-Time Faculty by Department
- Table: Research and Scholarly Activity by Department: Number of Full-Time Faculty with No Activity in a Category

**Optional Documentation and Data:**

- Other documentation or data that provides supporting evidence of compliance with the standard

---

| The college or school fosters the development of its faculty and has an effective continuing professional and career development program for full-time, part-time, and voluntary faculty consistent with their responsibilities. | ✓ |
| The college or school fosters the development of its staff and has an effective continuing professional and career development program for full-time and part-time staff consistent with their responsibilities. | ✓ |
| Faculty and staff are assisted in goal setting by their administrative reporting authority | ✓ |
| The college or school reviews the performance of faculty and staff on a regular basis. | ✓ |
| Criteria for performance review are commensurate with the responsibilities of the faculty and staff in the professional degree program. | ✓ |
| The college or school has or provides support for programs and activities for faculty and preceptor continuing professional development as educators, researchers, scholars, and practitioners commensurate with their responsibilities in the program. | ✓ |
| Faculty receive adequate guidance and support on career development. | ✓ |
| Faculty are able to attend one or more scientific or professional association meetings per year. | ✓ |
| Faculty development programs are available to enhance a faculty member’s academic skills and abilities. | ✓ |
| The performance criteria for faculty are clear. | ✓ |
| Expectations on faculty for teaching, scholarship and service are appropriate and commensurate with academic and | ✓ |
Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ A description of the performance review process for full-time, part-time and voluntary faculty (including preceptors) and staff
☑ A description of the relationship between faculty, preceptor, and staff continuing professional development activities and their performance review
☑ A description of faculty development programs and opportunities offered or supported by the college or school
☑ A description of staff development programs and opportunities offered or supported by the college or school
☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
☑ Any other notable achievements, innovations or quality improvements
☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

• None.

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Recommended Monitoring:

• None.
**Standard No. 27: Physical Facilities:** The college or school must have adequate and appropriate physical facilities to achieve its mission and goals. The physical facilities must facilitate interaction among administration, faculty, and students. The physical facilities must meet legal standards and be safe, well maintained, and adequately equipped.

**Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑ Plans/architectural drawings of the physical facilities (if not feasible, please provide for on-site review)  
☑ A statement attesting that the facilities meet legal and other standards as appropriate (e.g., animal facilities)  
☑ Supporting documentation for the above, e.g., Office of Laboratory Animal Welfare (OLAW), U.S. Department of Agriculture (USDA) and/or Association for Assessment and Accreditation of Laboratory Animal Care International (AAALAC)

**Required Documentation for On-Site Review:**

☑ Plans/architectural drawings of the physical facilities (if not feasible to provide as part of Self-Study Report)

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ AACP Standardized Survey: Faculty – Questions 21 – 24, 26, 28 – 30, 39  
☑ AACP Standardized Survey: Student – Questions 76 - 81

**Optional Documentation and Data:**

☑ Other documentation or data that provides supporting evidence of compliance with the standard

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<th>Requirement</th>
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<td>The college or school has adequate and appropriate physical facilities to achieve its mission and goals.</td>
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<td>The physical facilities facilitate interaction among administration, faculty, and students.</td>
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<td>The physical facilities meet legal standards and are safe, well maintained, and adequately equipped.</td>
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<td>Physical facilities provide a safe and comfortable environment for teaching and learning.</td>
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<td>For colleges and schools that use animals in their professional course work or research, proper and adequate animal facilities are maintained in accordance with acceptable standards for animal facilities.</td>
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<td>Animal use conforms to Institutional Animal Care and Use Committee (or equivalent) requirements. Accreditation of the laboratory animal care and use program is encouraged.</td>
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<td>Space within colleges and schools dedicated for human investigation comply with state and federal statutes and regulations.</td>
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N/A (no animal use) □
All human investigations performed by college or school faculty, whether performed at the college or school elsewhere, are approved by the appropriate Institutional Review Board(s) and meet state and federal research standards.  


Students, faculty, preceptors, instructors, and teaching assistants have access to appropriate resources to ensure equivalent program outcomes across all program pathways, including access to technical, design, and production services to support the college or school’s various program initiatives.  


Commensurate with the numbers of students, faculty and staff, and the activities and services provided, branch or distance campuses have or have access to physical facilities of comparable quality and functionality as those of the main campus.  


Faculty have office space of adequate size and with an appropriate level of privacy.  


Faculty have adequate laboratory resources and space for their research and scholarship needs.  


Computer resources are adequate.  


Laboratories and simulated environments (e.g. model pharmacy) are adequate.  


Facilities encourage interprofessional interactions (e.g., simulation laboratories)  


Access to quiet and collaborative study areas is adequate.  


Common space for relaxation, professional organization activities and events, and/or socialization is adequate.  


Comments on the Standard:  


a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):  

☑ A description of physical facilities, including available square footage for all areas outlined by research facilities, lecture halls, offices, laboratories, etc.  

☑ A description of the equipment for the facilities for educational activities, including simulation areas  

☑ A description of the equipment for the facilities for research activities  

☑ A description of facility resources available for student organizations  

☑ A description of facilities available for student studying, including computer and printing capabilities  

☑ How the facilities encourage and support interprofessional interactions  

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard  

☑ Any other notable achievements, innovations or quality improvements  

☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms  


b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.  

- The School is complimented on its physical facilities. They provide excellent support for the School's teaching and research missions. The School's close physical proximity to the School of Medicine and to the planned School of Nursing building is an asset in the future development of opportunities for interprofessional education.
• The ability and willingness of the University and School to support capital improvements during a time of general state budget austerity is quite notable. A significant remodeling project was underway at the time of the evaluation team’s visit. This will yield expanded, more accessible space for the Student Affairs group, as well as expanded individual and small-group study space for students.

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<td>No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.</td>
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Recommended Monitoring:

• None.

Standard No. 28: Practice Facilities: To support the introductory and advanced pharmacy practice experiences (required and elective) and to advance collaboratively the patient care services of pharmacy practice experience sites (where applicable), the college or school must establish and implement criteria for the selection of an adequate number and mix of practice facilities and secure written agreements with the practice facilities.

Documentation and Data:

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:
Required Documentation and Data:

- Examples of affiliation agreements or “statements of understanding” with practice affiliates
- ACPE IPPE Capacity Chart
- ACPE APPE Capacity Chart
- Criteria used for selection of various types of practice facilities

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.)

Data Views and Standardized Tables:

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

- AACP Standardized Survey: Faculty – Questions 22, 28
- AACP Standardized Survey: Student – Questions 39, 40, 49, 51, 52
- AACP Standardized Survey: Alumni – Question 28
- AACP Standardized Survey: Preceptor – Questions 15, 37, 40

Optional Documentation and Data:

- Other documentation or data that provides supporting evidence of compliance with the standard

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<tr>
<td>The college or school collaboratively advances the patient-care services of its practice sites.</td>
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<td>The college or school establishes and implements criteria for the selection of an adequate number and mix of practice facilities.</td>
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<tr>
<td>The college or school establishes and implements criteria to secure written agreements with the practice facilities.</td>
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<tr>
<td>Before assigning students to a practice site, the college or school screens potential sites and preceptors to ensure that the educational experience would afford students the opportunity to achieve the required competencies.</td>
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<td>At a minimum, for all sites for required pharmacy practice experiences and for frequently used sites for elective pharmacy practice experiences, a written affiliation agreement between the site and the college or school is secured before students are placed.</td>
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<td>The college or school identifies a diverse mixture of sites for required and elective pharmacy practice experiences.</td>
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<td>The college or school has sites that provide students with positive experiences in interprofessional team-based care.</td>
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<td>The academic environment at practice sites is favorable for faculty service and teaching.</td>
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<td>There is adequate oversight of practice sites and efficient management and coordination of pharmacy practice experiences.</td>
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<td>The college or school periodically assesses the quality of sites and preceptors in light of curricular needs and identifies additional sites when needed. The college or school discontinues relationships that do not meet preset quality criteria.</td>
<td>✓</td>
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Comments on the Standard:

a. The college or school's descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ Capacity assessment (surplus or shortage) of the required and elective introductory pharmacy practice experiences (IPPEs) and advanced pharmacy practice experiences (APPEs) sites and preceptors for present and, if applicable, proposed future student enrollment

☑ Strategies for the ongoing quantitative and qualitative development of sites and preceptors and formalization of affiliation agreements

☑ How the college or school is collaborating with practice sites to advance patient care services

☑ How the college or school assesses the quality of sites and preceptors in light of curricular needs and discontinues relationships that do not meet preset quality criteria

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

☑ Any other notable achievements, innovations or quality improvements

☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

• None.

<table>
<thead>
<tr>
<th>Compliant</th>
<th>Compliant with Monitoring</th>
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<tbody>
<tr>
<td>No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.</td>
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<td>Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.</td>
<td>Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated /or Adequate information was not provided to assess compliance.</td>
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</table>

☑ Compliant ☐ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant
Recommended Monitoring:

- None.

**Standard No. 29: Library and Educational Resources:** The college or school must ensure access for all faculty, preceptors, and students to a library and other educational resources that are sufficient to support the professional degree program and to provide for research and other scholarly activities in accordance with its mission and goals. The college or school must fully incorporate and use these resources in the teaching and learning processes.

**Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑ Data on the use of library resources by pharmacy students and faculty
☑ Library Collection Development Policy
☑ The list of search databases available to faculty and students
☑ The list of full text journals electronically available

**Required Documentation for On-Site Review:**

☑ CV of the librarian(s) who act as primary contacts for the pharmacy program

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ AACP Standardized Survey: Faculty – Questions 25, 28
☑ AACP Standardized Survey: Student – Questions 82, 83
☑ AACP Standardized Survey: Preceptor - Question 41

**Optional Documentation and Data:**

☐ Other documentation or data that provides supporting evidence of compliance with the standard

<table>
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<tr>
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<tbody>
<tr>
<td>The college or school ensures access for all faculty, preceptors, and students to a library and other educational resources that are sufficient to support the professional degree program and to provide for research and other scholarly activities in accordance with its mission and goals.</td>
<td>☑</td>
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<tr>
<td>The college or school fully incorporates and uses library and other educational resources in the teaching and learning process.</td>
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89
Comments on the Standard:

a. The college or school’s descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ The relationship that exists between the college or school and their primary library, including the level of responsiveness of the Director and staff to faculty, student, staff needs, and any formal mechanisms (e.g., committee assignments) that promote dialog between the college or school and the library.

☑ A description of how the college or school identifies materials for the library collection that are appropriate to its programs and curriculum and assesses how well the collection meets the needs of the faculty and students

☑ A description of computer technology available to faculty and students

☑ A description of courses/activities throughout the curriculum in which students learn about the available educational resources

☑ A description of library orientation and support for faculty and preceptors

☑ A description of how remote access technologies and mechanisms that promote use of library information from off-campus sites by faculty, students, and preceptors compare with on-campus library resources

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

☑ Any other notable achievements, innovations or quality improvements

☑ Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

• None.

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<tr>
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<td>• No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance /or • Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance; the plan has been fully implemented; sufficient evidence already exists that the plan is addressing the factors and will bring the program into full compliance.</td>
<td>Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated; the plan has not been fully implemented and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.</td>
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☑ Compliant ☐ Compliant with Monitoring ☐ Partially Compliant ☐ Non Compliant

Recommended Monitoring:
**Standard No. 30: Financial Resources:** The college or school must have the financial resources necessary to accomplish its mission and goals. The college or school must ensure that student enrollment is commensurate with its resources.

1) **Documentation and Data:**

Use a check ☑ to indicate the information provided by the college or school and used to self-assess this standard:

**Required Documentation and Data:**

☑ A financial summary including an analysis of actual or projected revenues and expenses for the past year, current year, and next year.

**Required Documentation for On-Site Review:**

*(None required for this standard)*

**Data Views and Standardized Tables:**

It is optional for the college or school to provide brief comments about each chart or table (see Directions).

☑ In-state tuition for past five years
☑ Out-of-state tuition for past five years
☑ NIH funding for past five years

**Optional Documentation and Data:**

☑ In-state tuition for past five years, with peer school comparisons
☑ Out-of-state tuition for past five years, with peer school comparisons
☑ NIH funding for past five years, with peer school comparisons

☐ Faculty salaries by academic rank expressed as a percentile against a selected peer group of colleges and schools. *(Note: This report is available from AACP on request.)*

☐ Other documentation or data that provides supporting evidence of compliance with the standard

<table>
<thead>
<tr>
<th>Description</th>
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<tbody>
<tr>
<td>The college or school has the financial resources necessary to accomplish its mission and goals.</td>
<td>☑</td>
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<tr>
<td>The college or school ensures that student enrollment is commensurate with its resources. Enrollment is planned and managed in line with resource capabilities, including tuition and professional fees.</td>
<td>☑</td>
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<tr>
<td>Tuition for pharmacy students is not increased to support unrelated educational programs.</td>
<td>☑</td>
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</tr>
<tr>
<td>The college or school has input into the development of and operates with a budget that is planned, developed, and managed in accordance with sound and accepted business practices.</td>
<td>☑</td>
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</tbody>
</table>
Financial resources are deployed efficiently and effectively to:
- support all aspects of the mission, goals, and strategic plan
- ensure stability in the delivery of the program
- allow effective faculty, administrator, and staff recruitment, retention, remuneration, and development
- maintain and improve physical facilities, equipment, and other educational and research resources
- enable innovation in education, interprofessional activities, research and other scholarly activities, and practice
- measure, record, analyze, document, and distribute assessment and evaluation activities
- ensure an adequate quantity and quality of practice sites and preceptors to support the curriculum

The dean reports to ACPE, in a timely manner, any budget cuts or other financial factors that could negatively affect the quality of the professional degree program or other aspects of the mission of the college or school.

Business plans, including revenue and expense pro forma for the time period over which the change will occur and beyond, are developed to provide for substantive changes in programmatic scope or student numbers.

The college or school ensures that funds are sufficient to maintain equivalent facilities (commensurate with services and activities) across all program pathways.

<table>
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<tr>
<th>Standards</th>
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<tbody>
<tr>
<td>Support all aspects of the mission, goals, and strategic plan</td>
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<td>Ensure stability in the delivery of the program</td>
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<td>Allow effective faculty, administrator, and staff recruitment, retention, remuneration, and development</td>
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<td>Maintain and improve physical facilities, equipment, and other educational and research resources</td>
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<td>Enable innovation in education, interprofessional activities, research and other scholarly activities, and practice</td>
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<tr>
<td>Ensure an adequate quantity and quality of practice sites and preceptors to support the curriculum</td>
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<tr>
<td>The dean reports to ACPE, in a timely manner, any budget cuts or other factors that could negatively affect the quality of the professional degree program or other aspects of the mission of the college or school.</td>
<td>☑</td>
<td></td>
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<tr>
<td>Business plans, including revenue and expense pro forma for the time period over which the change will occur and beyond, are developed to provide for substantive changes in programmatic scope or student numbers.</td>
<td>N/A (no substantive changes)</td>
<td>☑</td>
<td></td>
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<tr>
<td>The college or school ensures that funds are sufficient to maintain equivalent facilities (commensurate with services and activities) across all program pathways.</td>
<td>N/A (no alternate pathways)</td>
<td>☑</td>
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Comments on the Standard:

a. The college or school's descriptive text and supporting evidence have specifically addressed the following (use a check ☑ to indicate that the topic has been adequately addressed to assess this standard):

☑ How the college or school and university develop annual budgets (including how the college or school has input into the process) and an assessment of the adequacy of financial resources to efficiently and effectively deliver the program and support all aspects of the mission and goals.

☑ An analysis of federal and state government support (if applicable), tuition, grant funding, and private giving.

☑ A description of how enrollment is planned and managed in line with resource capabilities, including tuition and professional fees.

☑ A description of how the resource requirements of the college or school's strategic plan have been or will be addressed in current and future budgets.

☑ How business plans were developed to provide for substantive changes in the scope of the program or student numbers, if applicable.

☑ An assessment of faculty generated external funding support in terms of its contribution to total program revenue.

☑ How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

☑ Any other notable achievements, innovations or quality improvements.

b. Summary of areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; any areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should have provided evidence that the plan is working.

- The School is complimented on the success of its “People and Programs” capital campaign. Established with a seven-year goal to raise $18 million to double the size of the School's endowment, the campaign was concluded at the end of 2009 after raising a total
of $22.6 million. The endowment allows the School to support student scholarships, fellowships, faculty professorships and chairs, research, and special initiatives.

- State support for the University has declined in each of the past ten years to the point where it now accounts for less than 20% of the total UW-Madison budget. During its visit, the evaluation team was informed of the likely prospect for additional budget reductions. While the School is commended on its ability to develop new revenue streams to help offset these reductions in state allocations, at some point significant concern is likely regarding the School’s ability to continue to offer the professional program at an appropriate level of quality.

- The School is reminded of the need to notify ACPE in a timely way of any budget cuts that could negatively affect the quality of the professional degree program or other aspects of its mission.

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Recommended Monitoring:

- None.
**APPENDIX I: EVALUATION TEAM VISIT SCHEDULE**

**Site Team Members**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title/Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Craig K. Svensson, PharmD, PhD</td>
<td>Dean and Professor</td>
</tr>
<tr>
<td>Purdue University College of Pharmacy</td>
<td>Gahanna, Ohio</td>
</tr>
<tr>
<td>Dr. Jerry Siegel, PharmD</td>
<td>Pharmacy Practitioner</td>
</tr>
<tr>
<td>Dr. Lauren Schlesselman, PharmD</td>
<td>Director of Assessment and Accreditation</td>
</tr>
<tr>
<td>University of Connecticut School of Pharmacy</td>
<td>Accreditation Council for Pharmacy Education</td>
</tr>
<tr>
<td>Dr. Robert Elenbaas, PharmD</td>
<td>ACPE Staff Member</td>
</tr>
<tr>
<td>Dr. Kem Krueger, PharmD, PhD</td>
<td>Associate Professor</td>
</tr>
<tr>
<td>University of Wyoming School of Pharmacy</td>
<td>Wisconsin Pharmacy Examining Board</td>
</tr>
<tr>
<td>Mr. Timothy Boehmer, RPh</td>
<td>Observer</td>
</tr>
</tbody>
</table>

**DAY 1: November 14 (M)**

**Team arrives mid-day**  
Airport transportation to campus (Arranged by the School; each Site Team member will be contacted with transportation details)

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>3:00 pm – 3:30 pm</td>
<td><strong>Site Team Orientation</strong> (Room 1128 RH)</td>
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<td>(Site Team members only)</td>
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<tr>
<td>3:30 pm – 4:30 pm</td>
<td><strong>Document Review</strong> (Room 1128 RH)</td>
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<td>(Site Team members only)</td>
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<tr>
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<td><em>Purpose: Review of curricular map, assessment plan, course syllabi, faculty CVs, etc.</em></td>
</tr>
<tr>
<td>4:30 pm – 6:00 pm</td>
<td><strong>Meeting with the Dean</strong> (Room 1128 RH)</td>
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<td>(Entire Site Team; Chair – Elenbaas)</td>
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<tr>
<td></td>
<td><em>Purpose: To orient the team to the Doctor of Pharmacy program and to provide the Dean’s view on the program’s strengths and challenges</em></td>
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</table>
UNIVERSITY OF WISCONSIN-MADISON
SCHOOL OF PHARMACY

6:00 pm  Transport Team to hotel (arranged by the School)
          Doubletree Hotel Madison
          525 W. Johnson St., Madison, WI 53703
          608-251-5511

7:30 pm  **Site Team Dinner** (Harvest, 21 N. Pinckney Street, Madison; 608-255-6075)
          (Site Team members only)

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**DAY 2: November 15 (T)**

6:45 am – 7:30 am  **Site Team Breakfast** (venue arranged by ACPE)

7:30 am  Pickup and transport to School (arranged by the School)

8:00 am – 8:45 am  **Meeting with the Dean’s Advisory Council** (Room 1128 RH)
                    (Entire Site Team; Chair: Svensson)
                    *Purpose: To discuss the challenges facing the college/school, to gain insight into the Dean’s leadership, to understand the committee’s role and function.*

8:45 am – 9:15 am  **Meeting with the Academic Planning Council** (Room 1128 RH)
                    (Entire Site Team; Chair: Elenbaas)

9:15 am – 9:45 am  **Meeting with the Self-Study Steering Committee** (Room 1128 RH)
                    (Entire Site Team; Chair – Schlesselman)
                    *Purpose: To review self-study preparation, to understand the level of engagement across the program, and to determine level of dissemination and acceptance of self-study finding.*

9:45 am – 10:00 am  Break

10:00 am – 11:00 am  **Survey of Physical Facilities**
                      Review classroom, teaching & research laboratories, student study space, library, and special resource

11:00 am – 12:00 pm  **Meeting with the Curriculum Committee** (Room 1128 RH)
                      (Entire Site Team; Chair – Krueger)
                      *Purpose: To review workings of the Curriculum Committee, to discuss recent curricular changes, to highlight curricular strengths/challenges, etc. Both the pre-professional requirements and the professional curriculum will be considered*
12:00 pm – 1:30 pm **Working Luncheon with Students** (Room 2121 RH) (Entire Site Team; Chair – Svensson)

*Purpose: To discuss the Doctor of Pharmacy program with a wide variety of students. Student leaders as well as students who are randomly selected should be invited. Representation from all professional years of the program is needed.*

1:30 pm – 2:30 pm **Meeting with the Assessment Committee** (Room 2121 RH) (Entire Site Team; Chair – Schlesselman)

*Purpose: To review the program’s evaluation plan, to discuss recent assessment findings, to highlight assessment opportunities and challenges, and to discuss quality improvements that resulted from assessment efforts.*

2:30 pm – 2:40 am Break

2:40 pm – 3:40 pm **Individual Faculty Interviews**

(Twenty minutes session with one or two members of the Evaluation Team, to be Assigned by the ACPE Staff Member)

*Purpose: To allow any faculty member time to discuss any strengths/issues one-on-one with a site team members. Faculty members should be involved in the delivery of the Doctor of Pharmacy curriculum, and should volunteer to be interviewed or be selected by a random process. The interviewees should represent senior and junior faculty from all departments/division.*

<table>
<thead>
<tr>
<th>Time</th>
<th>Team Member:</th>
<th>Team Member:</th>
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<tbody>
<tr>
<td>2:40 pm – 3:00 pm</td>
<td><strong>Krueger</strong></td>
<td><strong>Schlesselman</strong></td>
<td><strong>Siegel</strong></td>
<td><strong>Svensson</strong></td>
</tr>
<tr>
<td>1042 RH</td>
<td>1409 RH</td>
<td>4103 RH</td>
<td>7103 RH</td>
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<tr>
<td><strong>2:40 pm – 3:00 pm</strong></td>
<td><strong>Paul Hutson</strong></td>
<td><strong>Chuck Lauhon</strong></td>
<td><strong>Connie Kraus</strong></td>
<td><strong>Mary Hayney</strong></td>
</tr>
<tr>
<td>Associate Professor (CHS) Pharmacy Practice</td>
<td>Associate Professor and Asst Dean, Grad Studies Pharmaceutical Sciences</td>
<td>Clinical Professor Pharmacy Practice</td>
<td>Professor (CHS) Pharmacy Practice</td>
<td></td>
</tr>
<tr>
<td><strong>3:00 pm – 3:20 pm</strong></td>
<td><strong>Michelle Chui</strong></td>
<td><strong>Dave Kreling</strong></td>
<td><strong>Mel DeVilliers</strong></td>
<td><strong>Sara Shull</strong></td>
</tr>
<tr>
<td>Assistant Professor Social &amp; Admin Sciences</td>
<td>Professor and Division Chair Social &amp; Admin Sciences</td>
<td>Associate Professor (CHS) Pharmaceutical Sciences</td>
<td>Instructor and Drug Policy Program Manager, UWHC Pharmacy Practice</td>
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</tr>
<tr>
<td><strong>3:20 pm – 3:40 pm</strong></td>
<td><strong>John Kao</strong></td>
<td><strong>Beth Martin</strong></td>
<td><strong>Eric Buxton</strong></td>
<td><strong>Sandro Mecozzi</strong></td>
</tr>
<tr>
<td>Professor Pharmaceutical Sciences</td>
<td>Assistant Professor (CHS) Pharmacy Practice</td>
<td>Clinical Assistant Professor Extension Services</td>
<td>Associate Professor Pharmaceutical Sciences</td>
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2:40 pm – 3:40 pm **ACPE Staff Member Time for Report Preparation** (Room 1128 RH)

3:40 pm – 6:30 pm **Team Time for Report Preparation** (Room 1128 RH)
6:30 pm  Transport Team to hotel (arranged by the School)

7:30 pm  **Team Dinner & Continuation of Report Preparation**
          (Capital Chophouse, 9 E. Wilson St., Madison; 608-255-0165)

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**DAY 3: November 16 (W)**

7:15 am  Check-out of hotel; pick-up and transport to campus (arranged by the School)

7:30 am – 8:45 am  **Preceptor Breakfast and Meeting** (Room 2121 RH)
                    (Breakfast arranged by the School; will be on-site)
                    (Entire Site Team; Chair – Siegel)
                    *Purpose: To review the program’s experiential education*
                    *(Introductory (IPPE) and Advanced (APPE), to learn how preceptors*
                    *are trained and engaged with the program, to discuss any issues*
                    *relating to the experiential education curriculum and its deliver, etc.*

8:45 am – 9:45 am  **Meeting with Student and Academic Affairs Staff** (Room 2121 RH)
                    (Entire Site Team; Chair – Krueger)
                    *Purpose: To review recruitment, admissions, progression, enrollment,*
                    *student services, complaints procedures and complaints, etc.*

8:45 am – 11:00 am  **ACPE Staff Member Time for Report Preparation** (Room 1128 RH)

9:45 am – 10:00 am  Break

10:00 am – 11:00 am  **Meeting with the Experiential Learning Program Operations Committee** (Room 2121)
                      (Entire Site Team; Chair – Siegel)
                      *Purpose: To review experiential education site selection, to discuss*
                      *preceptor training, to highlight strengths/challenges facing the*
                      *program’s experiential education, etc.*

11:00 am – 12:30 pm  **Working Lunch** (Room 1128 RH)
                      (Site Team only)

12:30 pm – 1:45 pm  **Exit Report to the Dean** (Room 1128 RH)

1:45 pm – 2:00 pm  Transport Team to Bascom Hall (arranged by the School)

2:00 pm – 2:45 pm  **Exit Report to Chancellor David Ward and Provost Paul DeLuca**
                    (Room 161 Bascom Hall)
2:45 pm  Transport Team to airport (arranged by the School)
KEY UNIVERSITY ADMINISTRATION

President/Chancellor
David Ward, PhD, Chancellor

Provost/Academic Affairs Officer
Paul DeLuca, PhD, Provost and Vice Chancellor for Academic Affairs

KEY COLLEGE/SCHOOL OFFICERS

Main Campus

Dean
Jeanette C. Roberts, Ph.D. Medicinal Chemistry, M.P.H. Public Health, B.S. Biochemistry, Dean/Professor

Associate Dean
Ronald R. Burnette, Ph.D. Pharmaceutical Chemistry, M.S. Electrical Engineering, PharmD, B.S. Electrical Engineering, Associate Dean/Professor

Associate Dean
Alan L. Hanson, Ph.D. Pharmacy Continuing Education, M.S. Pharmacy Continuing Education, B.S. Pharmacy with Honors, Associate Dean/Professor

Associate Dean
Warren Heideman, PhD Pharmacology, B.A. Chemistry and Zoology, Associate Dean/Professor

Associate Dean
Jeanine K. Mount, PhD, MS, BS Pharm, Associate Dean/Associate Professor

Associate Dean
Adam W. Whitehorse, B.B.A Accounting and Marketing, Associate Dean

Assistant Dean
Mara A. Kieser, M.S. Pharmacy, B.S. Pharmacy, Assistant Dean/Clinical Associate Professor

Assistant Dean
Charles T. Lauhon, Ph.D. Chemistry, B.A. Chemistry, Assistant Dean/Associate Professor

Assistant Dean
Sharon M Vetter, BA with Honors, Assistant Dean for Research Administration

FACULTY BY DEPARTMENT

Pharmaceutical Sciences
Main Campus

Full-time
Ralph Albrect, Professor, Biological Sciences; PhD, Univ. WI, Madison, 1976:
Arash Bashirullah, Assistant Professor, Biological Sciences; Ph.D. Biology, California Institute of Technology, 1999; B.S. Chemistry, University of Winnipeg, 1989:

Timothy S. Bugni, Assistant Professor, Medicinal/Pharmaceutical Chemistry/Pharmacognosy; Ph.D. Medicinal Chemistry, University of Utah, 2003; B.S. Chemistry with Honors, Montana Tech of the University of Montana, 1995:

Ronald R. Burnette, Associate Dean, Pharmaceutics/Pharmacy; Ph.D. Pharmaceutical Chemistry, University of California-San Francisco, 1982; M.S. Electrical Engineering, Stanford University, 1973; PharmD, University of California-San Francisco, 1979; B.S. Electrical Engineering, University of California-Irvine, 1971:

Margaret Clagett-Dame, Professor; Ph.D. Biochemistry, University of Wisconsin-Madison, 1985; M.S. Nutrition, Pennsylvania State University, 1977; B.S. Nutrition, Pennsylvania State University, 1975:

Lara S. Collier, Assistant Professor, Biological Sciences; Ph.D. Cancer Biology, Stanford University School of Medicine, 2002; B.A. Biology and Chemistry, University of Virginia, 1996:

Edmund Elder, Pharmaceutics/Pharmacy; Ph.D. Pharmaceutical Sciences, Medical University of South Carolina, 1989; B.S. Pharmacy, Medical University of South Carolina, 1985; RPh, Wisconsin, United States RPh, South Carolina, United States

Gary G Girdaukas; B.S. in Chemistry with honors, University of Wisconsin/Madison, 1972:

Warren Heideman, Associate Dean, Pharmacology; PhD Pharmacology, University of Washington, 1983; B.A. Chemistry and Zoology, University of Washington, 1977:

Richard P. Hsung, Professor, Medicinal/Pharmaceutical Chemistry/Pharmacognosy; Ph.D. Organic Chemistry, University of Chicago, 1994; M.S. Organic Chemistry, University of Chicago, 1990; B.S. Chemistry and Mathematics with Honors, Calvin College, 1988:

Jeffrey A. Johnson, Professor; Ph.D. Environmental Toxicology, University of Wisconsin-Madison, 1992; M.S. Pharmacology, University of Minnesota-Duluth, 1986; B.S. Biology, University of Minnesota-Duluth, 1984:

Weiyuan John Kao, Professor, Pharmaceutics/Pharmacy; Ph.D. Macromolecular Science, Case Western Reserve University, 1996; M.S.E. Biomedical Engineering, Case Western Reserve University, 1994; B.S.E. Biomedical Engineering, The John Hopkins University, 1991:

Glen S. Kwon, Professor, Pharmaceutics/Pharmacy; Ph.D. Pharmaceutics, University of Utah, 1991; B.S. Chemistry Cum Laude, University of Utah, 1986:

Charles T. Lauhon, Assistant Dean, Medicinal/Pharmaceutical Chemistry/Pharmacognosy; Ph.D. Chemistry, University of California-Berkeley, 1992; B.A. Chemistry, Massachusetts Institute of Technology, 1986:

Lingjun Li, Associate Professor, Medicinal/Pharmaceutical Chemistry/Pharmacognosy; Ph.D. Analytical and Biomolecular Chemistry, University of Illinois at Urbana-Champaign, 2000; B.E. Chemistry, Beijing University of Technology, 1992:

Paul C. Marker, Associate Professor, Biological Sciences; Ph.D. Developmental Biology, Stanford University School of Medicine, 1998; B.A. Biology and Philosophy, Grinnell College, 1991:
Sandro Mecozzi, Associate Professor, Medicinal/Pharmaceutical Chemistry/Pharmacognosy; Ph.D. Chemistry, California Institute of Technology, 1996; Laurea in Chemistry (Magna Cum Laude), University of Rome "La Sapienza", 1988:

William S. Mellon, Professor, Pharmacology; Ph.D. Pharmacology, The Ohio State University, 1976; B.S. Pharmacy, Northeastern University, 1969:

Steven G. Oakes, Assistant Professor, Pharmacology; Ph.D. Pharmacology, University of Minnesota, 1986; M.S. Physiology, University of Minnesota-Duluth School of Medicine, 1982; B.A. Biochemistry, Dartmouth College, 1977:

Richard E. Peterson, Professor, Pharmacology; Ph.D. Pharmacology, Marquette University School of Medicine, 1972; B.S., University of Wisconsin-Madison, 1967:

Scott R Rajski, Instructor, Ph.D. Bioorganic Chemistry, Colorado State University, 1997; B.S. Organic Chemistry, Florida Institute of Technology, 1989:

Jeanette C. Roberts, Dean, Medicinal/Pharmaceutical Chemistry/Pharmacognosy; Ph.D. Medicinal Chemistry, University of Minnesota, 1986; M.P.H. Public Health, University of Utah, 2001; B.S. Biochemistry, Albright College, 1979:

Elizabeth S Rosen, Biological Sciences; PhD, Michigan State, 1996:

Mark Sacchetti, Pharmaceutics/Pharmacy; PhD, Univ of Wisconsin, 1992; MS, Univ of Wisconsin, 1990; BA, Temple Univ, 1987:

Cameron O. Scarlett, Biological Sciences; Ph.D., University of Michigan, 1996; Bachelor of Science, Oregon State University, 1989:

Thomas C Stringfellow, PhD, University of Wisconsin, Madison, 1996; BA, Indiana State University, 1991: none

Weiping Tang, Assistant Professor, Medicinal/Pharmaceutical Chemistry/Pharmacognosy; Ph.D. Chemistry, Stanford University, 2005; M.S. Chemistry, New York University, 1999; B.S. Chemistry, Peking University, 1997:

Robert G. Thorne, Assistant Professor, Pharmaceutics/Pharmacy; Ph.D. Pharmaceutics, University of Minnesota, 2002; B.S. Chemical Engineering, University of Washington, 1990:

Jon S. Thorsen, Professor, Medicinal/Pharmaceutical Chemistry/Pharmacognosy; Ph.D. Organic Chemistry, University of Minnesota, 1993; B.A. Chemistry, Augsburg College, 1986:

May P. Xiong, Assistant Professor, Medicinal/Pharmaceutical Chemistry/Pharmacognosy; Ph.D. Pharmaceutical Sciences, University of Wisconsin-Madison, 2007; B.S. Biomedical Engineering, Marquette University, 2001:

Lian Yu, Professor, Pharmaceutics/Pharmacy; Ph.D. Physical Chemistry, The Ohio State University, 1991; B.S. Chemistry, Peking University, 1984:

UNIVERSITY OF WISCONSIN-MADISON
SCHOOL OF PHARMACY

Part-time

Bonnie J Fingerhut, Instructor, Continuing Professional Education; BS, Hennepin Professional Business, 1974:

Pharmacy Practice
Main Campus

Full-time

Susanne G. Barnett, Assistant Professor, Pharmacy Practice; PharmD, University of Wisconsin-Madison School of Pharmacy, 2004: RPh, Wisconsin, United States RPh, Illinois, United States

Robert M. Breslow, Associate Professor, Pharmacy Practice; B.S. Pharmacy, University of Wisconsin-Madison, 1975: RPh, Wisconsin, United States

John M. Dopp, Assistant Professor, Pharmacy Practice; PharmD, University of Wisconsin-Madison School of Pharmacy, 1999; M.S., University of Wisconsin, 2010: RPh, Wisconsin, United States

Mary E. Elliott, Associate Professor, Pharmacology; Ph.D. Pharmacology, University of Wisconsin-Madison, 1983; PharmD, University of Wisconsin-Madison, 1997; A.B. cum laude, Biochemical Sciences, Harvard University, 1968: RPh, Wisconsin, United States

Casey Gallimore, Assistant Professor, Pharmacy Practice; PharmD, University of Wisconsin-Madison School of Pharmacy, 2005: RPh, Wisconsin, United States

Barry E. Gidal, Professor, Pharmacy Practice; PharmD, University of Washington, 1990; B.S. Pharmacy, University of Utah, 1986: RPh Wisconsin RPh California RPh Washington (Inactive) RPH Utah

Mary S. Hayney, Professor, Pharmacy Practice; MPH, University of Wisconsin-Madison School of Pharmacy, 2007; PharmD, University of Minnesota College of Pharmacy, 1993; B.S. Pharmacy, University of Minnesota College of Pharmacy, 1986: RPh, Wisconsin, United States RPh, Minnesota, United States

Paul R. Hutson, Associate Professor, Pharmacy Practice; M.S. Chemistry, University of Washington, 1976; PharmD, University of Tennessee Center for the Health Sciences, 1981; B.S. Pharmacy, University of Washington, 1979; B.S. Biochemistry, UCLA, 1975: RPh, Wisconsin

Mara A. Kieser, Assistant Dean, Pharmacy Practice; M.S. Pharmacy, University of Wisconsin-Madison, 1984; B.S. Pharmacy, University of Wisconsin-Madison, 1981: RPH, Wisconsin, United States

Jill M. Kolesar, Professor, Pharmacy Practice; PharmD, University of Texas Health Science Center and The University of Texas at Austin, 1994; B.S. Pharmacy, University of Wisconsin-Madison School of Pharmacy, 1990: RPh, Wisconsin, United States

Karen J Kopacek, Associate Professor, Pharmacy Practice; B.S. Pharmacy, University of Iowa College of Pharmacy, 1988: RPh, Wisconsin, United States

Connie K. Kraus, Professor, Pharmacy Practice; Pharm.D., University of Wisconsin-Madison, 1993; B.S. Pharmacy, University of Wisconsin-Madison, 1975: RPh, Wisconsin, United States
Beth A. Martin, Assistant Professor, Pharmacy Practice; Ph.D. Social and Administrative Sciences, University of Wisconsin-Madison School of Pharmacy, 2006; M.S. Social and Administrative Sciences, University of Wisconsin-Madison School of Pharmacy, 2003; B.S. Pharmacy, University of Wisconsin-Madison School of Pharmacy, 1990; RPh, Wisconsin, United States

Michael E. Pitterle, Associate Professor, Pharmacy Practice; M.S. Pharmacy, University of Wisconsin-Madison School of Pharmacy, 1983; B.S. Pharmacy, University of Wisconsin-Madison, 1978; RPh, Wisconsin, United States

Andrea L. Porter, Assistant Professor, Pharmacy Practice; PharmD, University of Wisconsin-Madison School of Pharmacy, 2006; RPh, Wisconsin, United States

Warren E. Rose, Assistant Professor, Pharmacy Practice; PharmD, Butler University College of Pharmacy, 2004; RPh, Wisconsin, United States RPh, Illinois, United States

Ronald L. Sorkness, Professor, Pharmacy Practice; Ph.D. Physiology, University of Wisconsin-Madison, 1986; M.S. Hospital Pharmacy, University of Wisconsin-Madison, 1974; B.S. Pharmacy, University of Wisconsin-Madison, 1972; RPh, Wisconsin, United States

Christine A. Sorkness, Professor, Pharmacy Practice; PharmD, State University of New York, 1975; B.S. Pharmacy, State University of New York, 1973; RPh, Wisconsin, United States RPh, New York, United States

Orly Vardeny, Associate Professor, Pharmacy Practice; PharmD, University of Utah College of Pharmacy, 2000; M.S. Clinical Investigation, University of Wisconsin-Madison, 2010; RPh, Wisconsin, United States RPh, Utah, United States

Eva M. Vivian, Associate Professor, Pharmacy Practice; PharmD, University of Illinois College of Pharmacy, 1995; B.S. Biology, Illinois Benedictine College, 1980; RPh, Wisconsin, United States RPh, Illinois, United States RPh, California, United States

Denise L. Walbrandt Pigarelli, Associate Professor, Pharmacy Practice; PharmD, University of Wisconsin-Madison School of Pharmacy, 1993; B.S. Pharmacy, University of Wisconsin-Madison School of Pharmacy, 1991; RPh, Wisconsin, United States

Part-time

James A Budde, Instructor, Pharmacy Practice; PharmD, University of Wisconsin-Madison, 1994; BS Pharm, University of Wisconsin-Madison, 1992; RPh Wisconsin

John M Cesar, Instructor, Pharmacy Practice; BS Pharm, UW-Madison, 1990; RPh Wisconsin

Steven Ebert, Professor, Pharmacy Practice; PharmD, University of Texas-Austin, 1993; BS Pharm, University of Wisconsin-Madison, 1979; BS Pharmacy, University of Wisconsin, 1979; RPh, Wisconsin, United States

Adam E Gregg, Instructor, Pharmacy Practice; Pharm.D., Drake University College of Pharmacy and Health Sciences, 1999; RPh, Wisconsin, Oklahoma, United States

Scott P Knishka, Instructor, Pharmacy Practice; BS Pharmacy, Purdue University, 1992; RPh, WI, TX, OH, MN, MI, IL, MO, United States

Catherine M Lea, Instructor, Pharmacy Practice; BS Pharmacy, UW-Madison School of Pharmacy, 1990; RPh, Wisconsin, United States
Brad C Ludwig, Instructor, Pharmacy Practice; MS, University of Wisconsin-Madison, 1998: RPh, Wisconsin

Jessica A Mahoney, Instructor, Pharmacy Practice; PharmD, The Ohio State University, 2006: RPh, Wisconsin, Ohio, United States

Jason M Majernik, Associate Professor, Pharmacy Practice: RPh, Wisconsin, United States

Angie Paniagua, Instructor, Pharmacy Practice; PharmD, Drake University, 1995: RPh, Wisconsin, United States

Steven S Rough, Assistant Professor, Pharmacy Practice; MS, BS, University of Wisconsin, 1994, 1991: RPh, Wisconsin, United States

Valerie A Schend, Instructor, Pharmacy Practice; BS, University of Wisconsin-Madison, 1982: RPh, Wisconsin, United States

Sara Shull, Instructor, Pharmacy Practice; PharmD, University of Nebraska College of Pharmacy, 1997: RPh, Wisconsin, United States

Michelle M Thoma, Pharmacy Practice; PharmD, University of Wisconsin, 2000: RPh, Wisconsin, USA


Social & Administrative Sciences
Main Campus

Full-time
Betty A. Chewning, Professor, Ph.D. Educational Psychology, University of Wisconsin-Madison, 1973; B.A., University of Chicago, 1968:

Michelle A. Chui, Assistant Professor, Social and Administrative Sciences; Ph.D. Pharmacy Administration, Purdue University, 2001; M.S. in Pharmacy Administration, Purdue University, 1998; PharmD, Creighton University, 1996; B.A. Biological Sciences, University of California - Davis, 1992: RPh, Indiana, United States

David H. Kreling, Professor, Social and Administrative Sciences; Ph.D. Pharmacy Administration, University of Texas-Austin, 1984; M.S. Pharmacy Administration, Purdue University, 1981; B.S. Pharmacy, Ferris State University, 1978: RPh, Michigan, United States RPh, Indiana, United States

David A. Mott, Associate Professor, Social and Administrative Sciences; Ph.D. Pharmacy Administration, University of Wisconsin-Madison School of Pharmacy, 1995; M.S. Pharmacy Administration, University of Wisconsin-Madison School of Pharmacy, 1992; B.S. Pharmacy, University of Wisconsin-Madison School of Pharmacy, 1988:

Jeanine K. Mount, Associate Dean, Social and Administrative Sciences; PhD, Purdue University, 1985; MS, Purdue University, 1982; BS Pharm, Purdue University, 1979: RPh, Indiana

John Scarborough, Professor, Social and Administrative Sciences; Ph.D. Greek and Roman History; History of Medicine, University of Illinois Champaign-Urbana, 1967; M.A. Ancient History and the History of Medicine, Wolfson College, Oxford, 1981; M.A. Byzantine Studies, University of Denver, 1963; A.B. Zoology and History, Baker University, 1961:
Henry N. Young, Assistant Professor, Social and Administrative Sciences; Ph.D. Pharmacy Administration, University of Florida, 2002; B.S. Psychology, University of Florida, 1997:

Part-time

Gregory J Higby, Professor, PhD, University of Wisconsin-Madison, 1984; MS, University of Wisconsin-Madison, 1980; BS Pharm, University of Michigan, 1977; RPh, Michigan, USA

Charles S Lee, Instructor, Pharmacy Practice; BS Pharm, University of Wisconsin-Madison, 1997: RPh Wisconsin


Therese D Payne, Bachelor of Science, Loyola University, 1975: Registered Nurse

Lisa Sobotkiewicz, Instructor, Pharmacy Practice; PharmD, UW-Madison, 2004: RPH, WI, U.S.

Extension Services in Pharmacy
Main Campus

Full-time

Ruth H. Bruskiewitz, Associate Professor, Continuing Professional Education; MS Hospital Pharmacy Administration, University of Wisconsin-Madison, 1987; B.S. Pharmacy, University of Wisconsin-Madison, 1985; B.S. Biology, Marquette University, 1976; BS Pharmacy, University of Wisconsin-Madison School of Pharmacy, 1985; BS Biology, Marquette University, 1976: RPh, Wisconsin, United States

Eric Buxton, Assistant Professor, Medicinal/ Pharmaceutical Chemistry/ Pharmacognosy; Ph.D. Analytical Chemistry, University of Wisconsin - Madison, 1996; B.S. Chemistry and Math, University of St. Thomas, 1990:

James E. De Muth, Professor, Continuing Professional Education; Ph.D. Pharmacy Continuing Education, University of Wisconsin-Madison, 1974; M.S. Pharmacy Continuing Education, University of Wisconsin - Madison, 1972; B.S. Pharmacy, Drake University, 1970: RPh, Wisconsin, United States RPh, Iowa, United States

Alan L. Hanson, Associate Dean, Continuing Professional Education; Ph.D. Pharmacy Continuing Education, University of Wisconsin-Madison School of Pharmacy, 1978; M.S. Pharmacy Continuing Education, University of Wisconsin-Madison School of Pharmacy, 1976; B.S., University of Wisconsin-Madison School of Pharmacy, 1969: RPh, Wisconsin, United States

Part-time
No Faculty records under this campus.
Administration  
Main Campus  

Full-time  

Jeremy Altschafl, M.A. Communication, University of Wisconsin-Milwaukee, 2003; B.A. Communication, St. Norbert College, 2000:  

Rebecca Beebe, MS, University of Wisconsin Whitewater, 2004:  

Linda Halsey, BA, Concordia University, 1989:  

Sarah E Kuba, PhD, UW-Madison, 2010; M.S., UW-Madison, 2007; B.S., UW-Madison, 2002:  

Rhonda L. Sager, Librarian, Libraries/Educational Resources; MA, University of WI-Madison, 2001:  

Melanie A Schneider, MS, UW-Madison, 1997:  

Emily M Tarter, BA, Colby College, 1996:  

Sharon M Vetter, Assistant Dean, BA, University of Wisconsin-Madison, 2005:  

Adam W. Whitehorse, Associate Dean, B.B.A Accounting and Marketing, University of Wisconsin-Madison, 1995:
## APPENDIX III: FACULTY RESOURCE REPORT

### Section A - FTE Totals

**Instructions:**

The terms "filled positions," "vacant positions," "hires," "resignations," "retirements," "other losses" (pale blue cells) denote the presence/absence/movements of actual persons, as opposed to "approved positions" and "discontinued positions" which refer to the positions which the school is authorized to fill.

Include Full-Time and Part-Time Faculty. For Part-Time Faculty, count only those faculty with a minimum 0.3 FTE employment contract with the college or school. Count the annual FTEs (e.g., 1.0 FTE, 0.75 FTE, 0.5 FTE).

If the program is offered over multiple branches or campuses, one copy of this form should be completed for each branch or campus separately.

Cells shaded GRAY contain a formula; other cells with a 0 require data entry as applicable. The worksheet is PROTECTED to prevent access to cells containing a formula. Data can only be added to unprotected cells (shaded in pale BLUE or YELLOW). To assist you to understand the construction of the worksheet, comments are included (see section for Pharmaceutical Sciences).

Text in RED can or should be re-entered as applicable.

The three closing figures (June 30) of any given year must be the same as the three opening figures (July 1) of the next academic year.

If a resignation or retirement occurs at the end of an academic year (i.e., the position has been filled for all or most of the academic year), the entry can be made in the next academic year to more accurately indicate the impact of the change.

If the worksheet contains a NEGATIVE figure, please re-check your figures. A negative figure could exist under "vacant positions" if the school has more faculty/staff in place than there are authorized positions.

If the departmental titles reflected below do not adequately reflect your structure, you may change the titles. If the form does not accommodate your departmental structure, please contact ACPE.

### Pharmaceutical Sciences

<table>
<thead>
<tr>
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<th>FAST ACAD YEAR</th>
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<td>20.4 25.4 2</td>
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<tr>
<td>Additional (new) positions APPROVED during the year</td>
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<td>0</td>
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<tr>
<td>Positions lost (DISCONTINUED) during the year</td>
<td>0</td>
<td>0</td>
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</tr>
<tr>
<td>Number of persons hired (new positions and replacements)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Number of persons who resigned during the year</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Number of persons who returned during the year</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Number of persons who were lost for other reasons during the year</td>
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<td>0</td>
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<tr>
<td><strong>Closing Figures</strong></td>
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<td>20.4 25.4 1 2</td>
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<td>Additional (new) positions APPROVED during the year</td>
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<td>Positions lost (DISCONTINUED) during the year</td>
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<tr>
<td>Number of persons hired (new positions and replacements)</td>
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<td>0</td>
</tr>
<tr>
<td>Number of persons who resigned during the year</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Number of persons who returned during the year</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Number of persons who were lost for other reasons during the year</td>
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### Social and Administrative Sciences

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<td>Additional (new) positions APPROVED during the year</td>
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<td>Positions lost (DISCONTINUED) during the year</td>
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<td>Number of persons hired (new positions and replacements)</td>
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<td>Number of persons who resigned during the year</td>
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### Extension Services

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<td>Additional (new) positions APPROVED during the year</td>
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<tr>
<td>Positions lost (DISCONTINUED) during the year</td>
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<td>Number of persons hired (new positions and replacements)</td>
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<td>Number of persons who resigned during the year</td>
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<tr>
<td>Number of persons who returned during the year</td>
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<td>Number of persons who were lost for other reasons during the year</td>
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Section A - FTE Totals (continued)

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<th>Administration</th>
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<th>NEXT ACADEMIC YEAR</th>
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<tr>
<td></td>
<td>APPROVED positions (total FTE)</td>
<td>FILLED positions (total FTE)</td>
<td>VACANT positions (total FTE)</td>
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<td>Opening figure (July 1)</td>
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<td>10</td>
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<tr>
<td>Additional (new) positions</td>
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<td>Positions lost (DISCONTINUED) during the year</td>
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<td>Number of persons hired (new positions and replacements)</td>
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<td>Number of persons who resigned during the year</td>
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<td>Number of persons who retired during the year</td>
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<td>Number of persons who were lost for other reasons during the year</td>
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<td>Closing figure (June 30)</td>
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Summary: (total of above boxes):

| Opening figure (July 1) | 75.9 | 72.9 | 3 | 75.9 | 72.9 | 3 | 75.9 | 71.9 | 4 |
| Additional (new) positions | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Positions lost (DISCONTINUED) during the year | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Number of persons hired (new positions and replacements) | 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Number of persons who resigned during the year | 3 | 1 | 1 | 3 | 1 | 1 | 3 | 1 | 1 |
| Number of persons who retired during the year | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 |
| Number of persons who were lost for other reasons during the year | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Closing figure (June 30) | 75.9 | 72.9 | 3 | 75.9 | 72.9 | 3 | 75.9 | 70.9 | 5 |

Section B - Experiential Program

<table>
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<th>PERCEPTORS</th>
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<th>NEXT ACADEMIC YEAR</th>
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<tr>
<td>Percentage of Advanced Pharmacy Practice Experiences (APPExs) precepted by Full-Time Faculty</td>
<td>4.91%</td>
<td>4.01%</td>
<td>4.44%</td>
</tr>
<tr>
<td>Percentage of Advanced Pharmacy Practice Experiences (APPExs) precepted by contract/volunteerceptors</td>
<td>95.09%</td>
<td>95.99%</td>
<td>95.56%</td>
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Section C - Students Enrolled

<table>
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<tr>
<th>TOTAL STUDENT FTE</th>
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<th>NEXT ACADEMIC YEAR</th>
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<td>P2</td>
<td>136</td>
<td>P2</td>
<td>139</td>
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<td>P3</td>
<td>131</td>
<td>P3</td>
<td>136</td>
</tr>
<tr>
<td>P4</td>
<td>131</td>
<td>P4</td>
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<td>Total</td>
<td>537</td>
<td>Total</td>
<td>547</td>
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## APPENDIX IV: PROFESSIONAL PRACTICE EXPERIENCE RESOURCES

### Introductory Pharmacy Practice Experiences (IPPEs)

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>Professional Year</th>
<th>Actual or projected number of students (A)</th>
<th>Practice Setting or Activity (Notes 1 &amp; 2)</th>
<th>Hours for Each Student in Setting or Activity (B)</th>
<th>Total Required Hours in Setting or Activity (A x B)</th>
<th>IPPE Capacity Secured (stated in terms of total student hours)</th>
<th>Excess / Deficit</th>
<th>Percent of Secured Sites Without Signed Affiliation Agreement (Note 4)</th>
<th>Comments</th>
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<tbody>
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<td>P1</td>
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<td>IPPE Community</td>
<td>24</td>
<td>3264</td>
<td>4248</td>
<td>984</td>
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<td></td>
<td></td>
<td></td>
<td>IPPE Institutional</td>
<td>4</td>
<td>544</td>
<td>560</td>
<td>16</td>
<td>11%</td>
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<td>IPPE Elective</td>
<td>20</td>
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<td></td>
<td>IPPE Other</td>
<td>16</td>
<td>2160</td>
<td>3808</td>
<td>1648</td>
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<td></td>
<td></td>
<td></td>
<td>12</td>
<td>1620</td>
<td>3440</td>
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<td>12%</td>
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<td>Total IPPE Hours for the P1 Year</td>
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<td>4800</td>
<td>2100</td>
<td>19.30%</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>IPPE Institutional</td>
<td>16</td>
<td>2160</td>
<td>3808</td>
<td>1648</td>
<td>11%</td>
<td></td>
</tr>
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<td></td>
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<td></td>
<td>IPPE Elective</td>
<td>12</td>
<td>1620</td>
<td>3440</td>
<td>1820</td>
<td>12%</td>
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<td>IPPE Institutional</td>
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<td>4760</td>
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<td>IPPE Elective</td>
<td>12</td>
<td>1596</td>
<td>3312</td>
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<td>Total IPPE Hours for the P3 Year</td>
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<td></td>
<td>Total IPPE for the Program (P1 + P2 + P3)</td>
<td>180</td>
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### CURRENT ACADEMIC YEAR

- Total IPPE Hours for P1 Year: 28
- Total IPPE Hours for P2 Year: 48
- Total IPPE Hours for P3 Year: 104
- Total IPPE for the Program (P1 + P2 + P3): 180

### NEXT ACADEMIC YEAR

- Total IPPE Hours for P1 Year: 28
- Total IPPE Hours for P2 Year: 48
- Total IPPE Hours for P3 Year: 104
- Total IPPE for the Program (P1 + P2 + P3): 180
### Advanced Pharmacy Practice Experiences (APPEs)

<table>
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<tr>
<th>Class Of Academic Year (Note 1)</th>
<th>Actual or projected number of final professional year (P4) students (A)</th>
<th>Practice Setting (Note 2)</th>
<th>Number of APPEs per student for this setting (B)</th>
<th>Total APPEs in Setting (A x B)</th>
<th>Number of APPEs Precepted by Paid Full-Time Faculty</th>
<th>Number of APPEs Precepted by Adjunct Faculty</th>
<th>Total Capacity</th>
<th>Numerical Excess/Deficit</th>
<th>Percent (of Total Capacity) Without Signed Affiliation Agreement (Note 4)</th>
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<tr>
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<td>Ambulatory Care (b)</td>
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<tr>
<td></td>
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<td></td>
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<td>164</td>
<td>164</td>
<td>34</td>
<td>9.20%</td>
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<td>Other Required APPEs (c)</td>
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<td>1241</td>
<td>851</td>
<td>9.20%</td>
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<td>130</td>
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<td>1217</td>
<td>1241</td>
<td>8.20%</td>
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<td><strong>+ 1 ACADEMIC YEAR</strong></td>
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</tbody>
</table>

**Footnotes:**

a. Hospital and Acute Care: We integrate the hospital and acute care practice experiences. Our rotations are 7-8 weeks in length and allow for integrated learning. Students experience the acute care setting and hospital systems in one rotation.

b. Community and Ambulatory Care: We integrate the community and ambulatory care practice experiences. Our rotations are 7-8 weeks in length and allow for integrated learning. Students experience the community pharmacy and ambulatory care practice in one rotation.

c. Other required APPE – students are required to complete one acute/hospital rotation and 1 community/ambulatory rotation. In addition to these two rotations, students must also complete two additional patient care rotations. Students have the opportunity to select patient care areas of interest. Students must select a fifth rotation which may or may not be a patient care rotation.

d. Elective APPE – Students may select a sixth rotation which may or may not be a patient care rotation. This clerkship rotation is part of the same group of sites as the Other Required APPE rotations.