Interim Report to ACPE

University of Wisconsin-Madison
School of Pharmacy

November 1, 2012
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I. Standard No. 3: Evaluation of Achievement of Mission and Goals

A. Copy of:
School’s updated written Assessment Plan.

See Appendix 1. We have not formally adopted a revised version; that process will be completed in F2012.

B. Brief Description of:
Continued implementation of the School's Assessment Plan, including evidence that knowledge gained is being used to drive consideration of programmatic and curricular enhancements.

The 2011-2012 Assessment Report (Appendix 2) addresses new elements of the Assessment Plan, including the Core Functions Indicators, Progress on Strategic Priorities, results from the pilot of the new Outcome Tracker with DPH-3 students, and DPH-4 student survey results. Most of these assessment tools are very new to us and, as such, have not yet produced sufficient results to drive large programmatic or curricular change. However, we have become much more intentional about using assessment data, converting data/information into knowledge by identifying patterns and interconnectedness, then arriving at wisdom that allows us to implement change and be a true Learning Organization. This represents a substantial positive change in our culture with respect to assessment.

Among other sources of input, knowledge from last year’s progress on initiatives in support of our strategic priorities, core functions indicators, and committee and division annual reports all informed the development of this year’s initiatives (Appendix 3).

II. Standard No. 14: Curricular Core—Pharmacy Practice Experiences

A. Detailed Description of:
Evidence that the APPEs provide all students with Advanced Pharmacy Practice Experiences in the (1) Hospital/Health-System and (2) Ambulatory Care setting 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.

The construction of APPEs at UW requires two rotations of 7 or 8 weeks in length that couple (1) acute care with health system experiences and (2) ambulatory care with community experiences.

In order to accumulate evidence and ensure appropriate coverage and assessment in our APPEs, the following action plan was developed and launched:
Spring 2012
Experiential Learning Program (ELP) Committee members reviewed the comments from the ACPE report. All APPE course coordinators met to review course activities and assessments for the Acute Care/Health-System experience and the Ambulatory Care/Community experience. Course activities were re-mapped back to Appendix C. In an effort to assure all required practice sites are able to complete and assess the various tasks listed, preceptors were surveyed during the S2012 Annual Preceptor Meetings (February, March, and April 2012).

Summer 2012
After reviewing comments from the meetings, APPE course coordinators felt an online survey would serve as a better way to obtain data from the sites, followed by a course specific conference call. Course coordinators also felt it would be more feasible to change one course at a time. The Acute Care/Health-System APPE will be reviewed during the 2012-2013 academic year and standardized activities with assessments will be implemented starting in May 2013.

The Ambulatory Care/Community APPE will be reviewed during the 2013-2014 academic year and standardized activities with assessments will be implemented starting in May 2014. This timing is also appropriate because a new phase of the Wisconsin Pharmacy Quality Collaborative (WPQC; see the web page for details http://www.pswi.org/displaycommon.cfm?an=1&subarticlenbr=38 ) will be beginning in F2012. We plan to utilize WPQC experiences as part of the required ambulatory rotation.

Fall 2012
To begin the review of the APPEs, an online survey for the required Acute Care/Health-System APPE course was created (Appendix 4), based on the ACPE competencies mapped to our 9-point evaluation tool. The goal is to have sites identify ways they are able to complete the appropriate course specific tasks from Appendix C in their practice sites. After reviewing the data (survey closes November 1), course coordinators will hold focus groups with appropriate clinical instructors to discuss the implementation process for the course activities and potential assessment processes. A final mapping to Appendix C will be completed to assure the activities 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.

Spring 2013
Preceptor training will take place in S2013 for the required Acute Care/Health-System APPE. The training will be provided in a live format at the UW School of Pharmacy and via webinar for preceptors off campus. The training will review the new course activities and the assessment of the activities. The new course format for the Acute Care/Health-System APPE will begin in May 2013.
Fall 2013
To continue the review of the APPEs, an online survey for the required Ambulatory Care/Community APPE course will be created and administered. The goal is to have sites identify ways they are able to complete the appropriate course specific tasks from Appendix C in their practice sites. After reviewing the data, course coordinators will hold focus groups with appropriate clinical instructors to discuss the implementation process for the course activities and potential assessment processes. A final mapping to Appendix C will be completed to assure the activities 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.

Spring 2014
Preceptor training will take place in S2014 for the required Ambulatory Care/Community APPE. The training will be provided in a live format at the UW School of Pharmacy and via webinar for preceptors off campus. The training will review the new course activities and the assessment of the activities. The new course format for the Ambulatory Care/Community APPE will begin in May 2014.

B. Brief Description of:
Steps taken to ensure the required balance between community and health-system experiences is achieved in the Introductory Pharmacy Practice Experiences.

Currently, our IPPE hours are divided between community, health-system/institutional, and elective pharmacy practice settings. Elective settings may be community, health-system, or non-patient care pharmacy practice settings. The intent of elective rotations is to provide students with an exposure to a wider variety of pharmacy practice settings. Our current distribution of hours is 180 hours in pharmacy practice settings and 131 hours in other activities.

<table>
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<tr>
<th>2012</th>
<th>Community</th>
<th>Institutional</th>
<th>Elective</th>
<th>Other*</th>
<th>Total</th>
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<tbody>
<tr>
<td>DPH-1</td>
<td>24</td>
<td>4</td>
<td>0</td>
<td>76 (Boot Camp, COPS, POPS, Discussion)</td>
<td>104</td>
</tr>
<tr>
<td>DPH-2</td>
<td>20</td>
<td>16</td>
<td>12</td>
<td>55 (COPS, CPD, HSR, Discussion)</td>
<td>103</td>
</tr>
<tr>
<td>DPH-3</td>
<td>40</td>
<td>40</td>
<td>24</td>
<td>career fair</td>
<td>104</td>
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<tr>
<td>Total</td>
<td>84</td>
<td>60</td>
<td>36</td>
<td>131</td>
<td>311</td>
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</tbody>
</table>

*Abbreviations
COPS – Community Outreach Programs
POPS – Student Pharmacists - Oakwood Partners Program
CPD – Continuing Professional Development
HSR – Health Services Research

Our plan is to increase the hours in the institutional setting while balancing the hours in the community setting. This change will be phased in as outlined in the tables below.
By 2014, students will complete 80 hours in the community setting, 72 hours in the health-systems/institutional setting, and 36 hours in a practice setting of their choice with an eye to overall balance between community and institutional settings. Students will spend 188 hours in pharmacy practice settings and 123 hours in other activities.

### III. Standard No. 15: Assessment and Evaluation of Student Learning and Curricular Effectiveness

#### A. Brief Description of:

*Implementation of the Outcome Tracker, including an indication of any course or curricular modifications made as a result of assessment data derived there from.*

The Outcome Tracker was developed as a means to demonstrate the achievement of Appendix D abilities. Please see page 10 of the 2011-2012 Assessment Report (Appendix 2) for additional information on the development of the Outcome Tracker; the DPH-3 Outcome Tracker used for the pilot is attached (Appendix 5). The revised Educational Outcomes that were mentioned in the Assessment Report were formally approved at our annual retreat in F2012 (Appendix 6).

**Fall 2012**

The Assessment Committee will evaluate the results of the DPH-3 pilot and revise the tool based on these results and on the new Educational Outcomes. In conjunction with the Curriculum Committee, revisions to curricular content will be discussed based on the results of the Outcome Tracker and brought forward for faculty approval. The Assessment Committee will also develop corresponding tools to pilot with the DPH-1 and -2 students based on the types of activities appropriate for their year in the program. Mandatory colloquiums for each class of students are scheduled for the month of November.

**Spring 2013**

The Assessment Committee will administer the Outcome Tracker to DPH-1, -2, and -3 students and (re)engage Faculty Connections, pairs of faculty involved in reviewing the
Outcome Tracker with students to chart learning plans, potential areas of remediation, etc.

Summer 2013
The 2012-2013 Assessment Report will contain extensive data and information about/from the Outcome Trackers utilized to date. This information will be included in the update to the faculty at our annual retreat in early F2013.

Also of note...we recently changed the responsibilities of the Student and Academic Affairs staff such that the Director of Assessment position is now full-time with no other responsibilities.

IV. Standard No. 23: Professional Behavior and Harmonious Relationships

A. Brief 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.

We continue to promote an array of activities intended to elevate professional behavior and build harmonious relationships across the School. In line with a new tradition, we had our incoming DPH-1 class develop their own honor code at orientation in F2012. The students subsequently signed an oversized copy of the code that is displayed in a very public area of Rennebohm Hall outside the main lecture halls. Discussions about professionalism have been further strengthened in conjunction with orientations for IPPEs and APPEs.

We will continue the effort started last year with our Class Councils. Small groups of students from each class meet regularly with Student and Academic Affairs Staff and the Associate Dean for Student Affairs to discuss issues, concerns, questions, and ideas for improvement across all aspects of the School. The Dean holds Town Hall meetings every year with each class as another avenue to gather constructive criticism. A recent curricular modification that grew out of these interactions is the move of the first semester of Drug Delivery Systems Lab to the DPH-1 year to both introduce more pharmacy-specific content earlier as well as to decompress the DPH-2 year.

The Student/Faculty/Staff Relations Committee is one of the main bodies charged with identifying barriers to harmonious relationships and designing activities/initiatives to help us address those barriers. An area they would like to improve this year is attendance by faculty at student functions to build rapport and promote interactions outside the classroom.

Another group with a similar charge specifically related to academic staff is our Committee on Academic Staff Issues (CASI). They organized and hosted two events last year: a coffee barista and a root beer float-making party. Both were very well
attended by faculty and staff alike and produced an informal mechanism for gathering the School together.

We also recently held our 8th Annual Faculty Recognition Event in F2012 and will be holding our corresponding Staff Recognition Event in S2013 to celebrate the accomplishments of our excellent employees. These have turned into a wonderful opportunity to mix and mingle with people from all corners of the School. The members of the Pharmacy Student Senate will be invited for the first time this year as another avenue to promote student/faculty/staff interactions.

V. Administrative Changes since Last On-Site Evaluation

A. School-level

Jeanine Mount has transitioned from the Associate Dean for Academic Affairs to the Associate Dean for Strategic Priorities, managing a portfolio of projects of importance to the School. The former position of Associate Dean for Academic Affairs has been split into two roles. Karen Kopacek from the Pharmacy Practice Division has taken on the role of Associate Dean for Student Affairs. Bill Mellon from the Pharmaceutical Sciences Division is now the Senior Associate Dean for Academic Affairs.

The search and screen committee for the next Dean of the School of Pharmacy is in full swing.

B. University-level

The search and screen committee for the next Chancellor of the University of Wisconsin-Madison is also in full swing.