College of Pharmacy
UNIVERSITY OF HOUSTON

Self-Study Report to the Accreditation Council for Pharmacy Education
August 2024

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College or School's Overview

The college or school is invited to provide an <u>overview of changes and developments</u> related to the program and the college or school since the last comprehensive on-site evaluation. The summary should be organized by the three sections of the Standards.

[TEXT BOX] [Maximum 5,000 characters including spaces] (Approximately two pages)

The following is a summary of changes and developments related to the College of Pharmacy and professional program since the last comprehensive on-site visit on March 21-23, 2017.

Section 1: Educational Outcomes
- In fall 2018, the new integrated curriculum started, designed to integrate both basic and clinical sciences throughout P1-P3 to foster a solid foundation for APPE readiness. The curriculum incorporates foundational and clinical courses with application-based skills labs to enhance student learning. The introductory pharmacy practice experiences (IPPEs) are completed in the summer semester allowing students to apply what they learned throughout the academic year.
- In fall 2018, the College implemented a mandatory attendance policy to improve student engagement and learning outcomes. For laboratory courses there is 100% mandatory attendance, and for didactic courses there is mandatory attendance of at least 75%. For extenuating circumstances that necessitate longer absences, the Assistant Dean for Student Affairs works with the students on a case-by-case basis.
- With the implementation of the new curriculum, the student ePortfolio was streamlined to improve student documentation of individual progress and achievement of educational outcomes.
- The UHCOP interprofessional education (IPE) program continues to expand with dedicated IPE activities throughout the curriculum's four years. The College continues to foster current IPE relationships and build new opportunities such as in 2020 with the new University of Houston Tilman J. Fertitta Family College of Medicine.
- Like most institutions in March 2020, UHCOP shifted to a hybrid learning model utilizing remote learning in real time via zoom. Students were required to come to the college to complete laboratory courses and assessments; they also had the opportunity to come to the college to use internet resources and study spaces. This shift in curricular delivery was also half-way into our new curriculum implementation.
- Starting in 2022, the College began providing P4 students with standardized NAPLEX preparation and MPJE programs before graduation.

Section 2: Structure and Process to Promote Achievement of Educational Outcomes
- In July of 2017, the College moved into our new building. It is a world-class, state-of-the-art facility for teaching, research, and service allowing all students, faculty, and staff to be housed in the same building. The building has ample space, state-of-the-art technology and interactive classrooms.
- In 2017, UHCOP was awarded a special line item from the State of Texas legislature for $4.5 million/year, in two-year increments. Similar funding has been secured through FY 2025, bringing the total amount received by the College to $41M. These funds have been used to enhance research and teaching activities (e.g., NTT-research faculty, equipment and instrumentation, start-up packages).
- In Fall of 2019, the College began creating a new strategic plan, mission statement, vision statement, and values for 2020 (Strategic Plan 2030). The pandemic delayed the implementation until January 2022 but allowed the plan to better line up with the University's strategic plan that was implemented in 2021.
- With the new curriculum's implementation, the College put together a dedicated skills team of six to seven clinical faculty, and three pharmacy technicians (Instructional Lab Managers) to coordinate and run the skills lab portion of the curriculum.

- The college has been successful at obtaining three Presidential Frontier Faculty positions which are university-wide competitive positions supported by President Renu Khator with the focus of building a university research enterprise.

Section 3: Assessment of Standards and Key Elements
- The new curriculum was rolled out successfully, incorporating a dedicated course preview before the new courses were delivered, and the robust post-course review process. The current College assessment plans (Programmatic and PPSLO Assessment) have been utilized successfully since their inception in 2018.
- From April 2021 to August 2023, the College went without a Director of Assessment, but was able to continue with the College's assessment process filling the gaps within the Office of Academic Affairs, IT department, and the Assessment Committee. In August 2023, the College successfully hired an Assistant Dean of Assessment and Accreditation.
- Since 2015 the College has utilized the PCOA as a formative assessment for P1 and P2 students and a summative "high stakes" assessment for P3's in assessing APPE readiness. With the elimination of the PCOA in June 2023, the College has begun piloting other programs such as ExamMaster in assessing knowledge retention and APPE readiness.

Summary of the College or School's Self-Study Process

The college or school is invited to provide a <u>summary of the self-study process</u>. ACPE does not require any supporting documentation for the Summary of the Self-Study Process; however, the college or school may provide supporting documentation (such as, a list of the members of the self-study committees) as an appendix in the self-study report.

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The Self-Study process began at the University of Houston College of Pharmacy in January of 2023, with the naming of the Self-Study Chair and Co-Chairs and formation of the Self-Study Steering Committee. The Steering Committee was led by a faculty chair (Wanat), two dean co-chairs (Pitman and Coyle), and was further comprised of faculty, staff, students, administrators, two alumni clinicians, and a university representative. Subcommittees were formed to address the development of each subsection (e.g. Educational Outcomes, Standards 1-4; Structure and Process to Promote Achievement of Educational Outcomes: Standards 5-9 (Organization and Administration), Standards 10-13 (Curriculum), Standards 14-17 (Students and Admissions), Standards 18-19 (Faculty/Staff), Standards 20 and 22 (Preceptor and Practice Facilities), Standard 21 (Physical Facilities and Educational Resources), Standard 23 Financial Resources); and Section III, Standards 24 and 25 (Assessment of Standards and Key Elements). Subcommittees consisted of a faculty member from the task force who served as chair, and other faculty, staff, students, and alumni. A reading team was formed to provide editorial review once the self-study draft was in its later stage of development. All members of the faculty participated on a subcommittee, team, or had a role in the self-study process.

There was a formal steering committee "kickoff" meeting on February 27, 2023, that included a general session for stakeholders consisting of faculty, staff, students, and alumni. At this meeting, the Dean and self-study chairs reviewed the purpose and design of the self-study with the attendees. A timeline for the process was presented, supporting information for the process was discussed with links given for online access, and individual subcommittee assignments were announced. To ensure collaboration and success, the steering committee determined it would meet monthly to discuss deliverables and share information about the process.

From February to August 2023, each subcommittee regularly met to work on the evaluation and reflection related to their assigned standards. During this time, the steering committee met monthly to discuss subcommittee progress, share information, provide feedback, and collaborate on needs for each of the standards. The self-study was also discussed during various pharmacy student convocations, and alumni and preceptor meetings. Input from students, alumni and preceptors was encouraged. Two full-day faculty retreats occurred in August 2023 entirely focused on the self-study. At these retreats, each subcommittee chair presented an initial assessment of their standards with evidence to support what the college is doing to meet the standard, or if areas for improvement were identified. This was a great opportunity to provide information to all faculty on efforts related to each standard and allowed the faculty to ask questions or provide additional information for each of the 25 standards. Each subcommittee left the August retreats with positive feedback from the faculty on strengths and weaknesses related to their standards.

From September to December 2023, each subcommittee worked to craft their standard summaries into written narratives. Two faculty retreat days were utilized in December 2023 for small breakout group sessions related to the self-study. These breakout groups consisted of subcommittee members, administrators and faculty assigned to the reading team who provided additional feedback on the standard narratives as they entered their final stages. Final draft narratives for each standard were submitted by December 31, 2023. These final draft narratives were presented once more at two faculty retreat days in January 2024, with another opportunity to provide feedback to the subcommittees. This next stage of feedback was incorporated, and final drafts for each standard were submitted by the end of February 2024. At this time, the standard narratives were sent to the assigned faculty on the reading team for review and comment. Each faculty member on the reading team was assigned 6-7 standards to review. The reading team provided valuable editorial and content guidance which was incorporated into the self-study draft document.

After reading team reviews were completed, during May and June of 2024 the self-study chairs collaborated with the subcommittees to conduct an editorial review of the narratives and required documentation. In July 2024, the self-study was posted to a secure website for faculty, stakeholder and public review. Faculty final review and ratification for formal approval of the final self-study document took place on August 6 and 16, 2024. During these ratification meetings, the stakeholders provided final refinement of the document and voted to approve the self-study. The UHCOP Self-Study was submitted to ACPE on August 31, 2024, and the site visit was scheduled to occur October 15-17, 2024.

College of Pharmacy
UNIVERSITY OF HOUSTON

All Faculty Self-Study Ratification (8/15/2024)

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Natalie Rosario

Jason Erikson

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ACPE Team Evaluation

The members of the on-site evaluation team will use the following form to evaluate the college or school's self-study process and the clarity of the report, and will provide feedback to assist the college or school to improve the quality of future reports.

	Commendable	Meets Expectations	Needs Improvement
Participation in the Self-Study Process	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. ☐	The self-study report was written and reviewed with broad-based input from students, faculty, preceptors, staff and administrators. ☐	The self-study report was written by a small number who did not seek broad input from students, faculty, preceptors, staff, and administrators. ☐
Knowledge of the Self-Study Report	Students, faculty, preceptors, and staff are conversant in the major themes of the report and how the program intends to address any deficiencies. ☐	Students, faculty, preceptors, and staff are aware of the report and its contents. ☐	Students, faculty, preceptors, and staff have little or no knowledge of the content of the self-study report or its impact on the program. ☐
Completeness and Transparency of the Self-Study Report	All narratives and supporting documentation are thorough, clear and concise. The content appears thoughtful and honest. Interviews match the self-study findings. ☐	All narratives and supporting documentation are present. The content is organized and logical. ☐	Information is missing or written in a dismissive, uninformative or disorganized manner. Portions of the content appear biased or deceptive. ☐
Relevance of Supporting Documentation	Supporting documentation of activities is informative and used judiciously. ☐	Supporting documentation is present when needed. ☐	Additional documentation is missing, irrelevant, redundant, or uninformative. ☐
Evidence of Continuous-Quality Improvement	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. ☐	The program proactively presents plans to address areas where the program is in need of improvement. ☐	No plans are presented or plans do not appear adequate or viable given the issues and the context of the program. ☐
Organization of the Self-Study Report	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. ☐	The reviewer is able to locate a response for each standard and the supporting documentation with minimal difficulty. ☐	Information appears to be missing or is difficult to find. Sections are not well labeled. ☐

Summary of the College or School's Self-Evaluation of All Standards

Please complete this summary (☑) **after** self-assessing compliance with the individual standards using the Self-Assessment Instrument.

Standards	Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
SECTION I: EDUCATIONAL OUTCOMES				
1. Foundational Knowledge	☑	☐	☐	☐
2. Essentials for Practice and Care	☑	☐	☐	☐
3. Approach to Practice and Care	☑	☐	☐	☐
4. Personal and Professional Development	☑	☐	☐	☐
SECTION II: STRUCTURE AND PROCESS TO PROMOTE ACHIEVEMENT OF EDUCATIONAL OUTCOMES				
5. Eligibility and Reporting Requirements	☑	☐	☐	☐
6. College or School Vision, Mission, and Goals	☑	☐	☐	☐
7. Strategic Plan	☑	☐	☐	☐
8. Organization and Governance	☑	☐	☐	☐
9. Organizational Culture	☑	☐	☐	☐
10. Curriculum Design, Delivery, and Oversight	☑	☐	☐	☐
11. Interprofessional Education (IPE)	☑	☐	☐	☐
12. Pre-Advanced Pharmacy Practice Experiences (Pre-APPE) Curriculum	☑	☐	☐	☐
13. Advanced Pharmacy Practice Experiences (APPE) Curriculum	☑	☐	☐	☐
14. Student Services	☑	☐	☐	☐
15. Academic Environment	☑	☐	☐	☐
16. Admissions	☑	☐	☐	☐
17. Progression	☑	☐	☐	☐
18. Faculty and Staff – Quantitative Factors	☑	☐	☐	☐
19. Faculty and Staff – Qualitative Factors	☑	☐	☐	☐
20. Preceptors	☑	☐	☐	☐
21. Physical Facilities and Educational Resources	☑	☐	☐	☐
22. Practice Facilities	☑	☐	☐	☐
23. Financial Resources	☑	☐	☐	☐
SECTION III: ASSESSMENT OF STANDARDS AND KEY ELEMENTS				
24. Assessment Elements for Section I: Educational Outcomes	☑	☐	☐	☐
25. Assessment Elements for Section II: Structure and Process	☑	☐	☐	☐

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Abbreviations (Running List)

AAALAC	Association for Assessment and Accreditation of Laboratory Animal Care
AACP	American Association of Colleges of Pharmacy
ACCP	American College of Clinical Pharmacy
ACO	Animal Care Operations
ACPE	Accreditation Council for Pharmacy Education
ADAA	Associate Dean for Academic Affairs
ADEP	Assistant Dean for Experiential Programs
ADSPA	Assistant Dean for Student and Professional Affairs
ALFP	Academic Leadership Fellows Program
AMCP	Academy of Managed Care Pharmacy
AJPE	American Journal of Pharmaceutical Education
AP	Admissions and Progression
APR	Annual Performance Review
APC	Admissions and Progression Committee
APhA	American Pharmacists Association
APhA-ASP	American Pharmacists Association-Academy of Student Pharmacists
APIPHANI	Assessment of Professionalism in Pharmacy, A Novel Instrument
APPE	Advanced Pharmacy Practice Experience
ASHP	American Society of Health-System Pharmacists
BCM	Baylor College of Medicine
BEPC	Board of Ethical and Professional Conduct
BSLMC	Baylor St. Luke's Medical Center
CAPE	Center for the Advancement of Pharmaceutical Education
CAPS	Counseling and Psychological Services
CBAC	College Budget Advisory Committee
CBO	College Business Office
CC	Curriculum Committee
CCAPS-62	Counseling Center Assessment of Psychological Symptoms-62
CCLA	Cougar Chairs Leadership Academy
CE	Continuing Education
CEO	Chief Executive Officer
CEPC	Code of Ethical and Professional Conduct
CM	Crisis Management
COO	College of Optometry
CPE	Continuing Pharmacist Education
CPR	Cardiopulmonary Resuscitation
CSP	Compounded sterile products
CV	Curriculum Vitae
CVVO	COVID Vaccine Volunteer Opportunity
CQI	Continuous Quality Improvement
DAC	Dean's Advisory Council
DBO	Director of Business Operations
DHR	Doctors Hospital of Renaissance
DHFC	Denver Harbor Family Health Center
DM	Diabetes Mellitus
DSAC	Dean's Student Advisory Council
EAD	Executive Associate Dean
EC	Executive Council
ECL	Executive Council Leaders
EDBO	Executive Director of Business Operations
EPA	Entrustable Professional Activities
EQ	Emotional Intelligence Quotient

EHR	Electronic Health Record
EMR	Electronic Medical Record
FDA	Food and Drug Administration
FERPA	Family Educational Rights and Privacy Act
FIMMRA	Foundations in Medicinal Chemistry, Microbiology, and Receptor Action
FS	Faculty Senate
FQHC	Federally Qualified Health Center
FTE	Full Time Equivalent
FY	Fiscal Year
GHHC	Greater Houston Health Connect
GPA	Grade Point Average
GPSC	Graduate and Professional Studies Council
HAM-TMC	Houston Academy of Medicine-Texas Medical Center Library
HBSB	Health and Biomedical Sciences Building
HGHC	Houston Global Health Collaborative
HEPA	High Efficiency Particulate Air
HOMES	Houston Outreach Medicine, Education, and Social Services Clinic
HSPAL	Health-System Pharmacy Administration and Leadership
IACUC	Institutional Animal Care and Use Committee
ICCAS	Interprofessional Collaborative Competencies Attainment Survey
ICM	Interprofessional Crisis Management
ILM	Instructional Laboratory Managers
IPE	Interprofessional Experience
IPhO	Industry Pharmacists Organization
IPPE	Introductory Pharmacy Practice Experience
IPEP	Interprofessional Education and Practice
iRAT	Individual Readiness Assurance Test
ISBAR	Identify, Situation, Background, Assessment, and Recommendation
IT	Information Technology
IPEC	Interprofessional Education Collaborative
JCPP	Joint Commission of Pharmacy Practitioners
JIC	Journal of Interprofessional Care
LACE	Longitudinal Ambulatory Clinical Experience
LAPPE	Longitudinal APPE
LASSI	Learning and Study Strategies Inventory
LAUNCH	Learning Advancements for Undergraduate Cougars of Houston
LCEP	Longitudinal Clinical Experiences Program
LCMS	Liquid Chromatography Mass Spectrometry
LMS	Learning Management System
LRC	Learning Resource Center
M4	Fourth-year Medical Student
MBA	Master of Business Administration
MMI	Multiple Mini-Interviews
MPJE	Multistate Pharmacy Jurisprudence Examination
MRSL	Module-Related Skills Lab
MS	Master of Science
MSPLA	Master of Science in Pharmacy Leadership and Administration
MTM	Medication Therapy Management
NABP	National Association of Boards of Pharmacy
NAPLEX	North American Pharmacist Licensure Examination
NCPA	National Community Pharmacists Association
NI	Needs Improvement
NIH	National Institutes of Health
NMR	Nuclear Magnetic Resonance
NPLH	No Place Like Home Longitudinal Ambulatory Care Experience
NSO	New Student Orientation

NSS	National Scaled Score
NTT	Non-Tenure Track
OEP	Office of Experiential Programs
OSCE	Objective Structured Clinical Examinations
OSPA	Office of Student and Professional Affairs
OTC	Over the Counter
P-HOPER	Population Health Outcomes and Pharmacoepidemiology Education and Research
P&T	Promotion and Tenure
PAP	Programmatic Assessment Plan
PCAT	Pharmacy College Admissions Test
PCCA	Pharmaceutical Compounding Centers of America
PCOA	Pharmacy Curriculum Outcomes Assessment
PDX	Phi Delta Chi
PHAR	Pharmacy Prefix for Professional Pharmacy Courses
PharmD	Doctor of Pharmacy (or Pharm.D.)
PhD	Doctor of Philosophy
PHOP	Pharmaceutical Health Outcomes and Policies (Dept.)
PIF	Professional Identity Formation
PFF	Presidential Frontier Faculty
PLS	Phi Lambda Sigma
PPCP	Pharmacists' Patient Care Process
PPS	Pharmacological and Pharmaceutical Sciences (Dept.)
PPSLO	Professional Pharmacy Student Learning Outcome
PRN	Pharmacists Recovery Network
PPTR	Pharmacy Practice and Translational Research (Dept.)
PREMIER	Prescription Drug Misuse Education and Research
P1	Pharmacy Year 1
P2	Pharmacy Year 2
P3	Pharmacy Year 3
P4	Pharmacy Year 4
RGV	Rio Grande Valley
RIF	Reduction in Force
RIPLS	Readiness for Interprofessional Learning Scale
SACS	Southern Association of Colleges and Schools Commission on Colleges
SAMSHA	Substance Abuse and Mental Health Services Administration
SBIRT	Screening Brief Intervention and Referral to Treatment
SCCP	Student College of Clinical Pharmacy
SCH	Semester Credit Hour
SCoRE	Student Curriculum on Resilience Education
SD	Significant Deficit
SFA	Stephen F. Austin State University
SOAP	Subjective, Objective, Assessment, and Plan
SoTL	Scholarship of Teaching and Learning
SPC	Strategic Planning Committee
SNPhA	Student National Pharmaceutical Association
SSHP	Student Society of Health-System Pharmacists
SWAC	Student Wellness Advisory Council
SWOT	Strengths, Weaknesses, Opportunities, and Threats
TAO	Therapy Assistance Online
TeamSTEPPS	Team Strategies and Tools to Enhance Performance and Patient Safety
TCEP	Texas Consortium on Experiential Programs
THECB	Texas Higher Education Coordinating Board
TIC	Transitions in Care
TIP	Teaching Innovation Program
TMA	Texas Medical Association
TMC	Texas Medical Center

TPA	Texas Pharmacy Association
TPC	Texas Pharmacy Congress
tRAT	Team Readiness Assurance Test
TSAP	Teaching and Scholarship Academia Program
TSBP	Texas State Board of Pharmacy
TSHP	Texas Society of Health-System Pharmacists
TUF	Texas University Fund
USC	University Student Center
UH	University of Houston
UHCOP	University of Houston College of Pharmacy
UT	University of Texas
UTHSC	University of Texas Health Sciences Center
UTMB	University of Texas Medical Branch
VAMC	Veterans Affairs Medical Center
VA	Veterans Affairs

Section I:
Educational Outcomes

Standard No. 1: Foundational Knowledge: The professional program leading to the Doctor of Pharmacy degree (hereinafter "the program") develops in the graduate the knowledge, skills, abilities, behaviors, and attitudes necessary to apply the foundational sciences to the provision of patient-centered care.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ A copy of the professional PharmD curriculum

    [1A Professional Curriculum P1_P4]

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: Students – Questions 4-6, 69

☑ AACP Standardized Survey: Preceptors – Questions 11-13

☑ AACP Standardized Survey: Alumni – Questions 14-16

    [1B AACP Survey Data Std 1]

Optional Documentation and Data:

☑ Annual performance of students nearing completion of the didactic curriculum on Pharmacy Curriculum Outcomes Assessment (PCOA) outcome data for the last 3 years

    [1C PCOA Score Trends 2014-2023]

    [1D Exams Master PCOA Comparison 2024]

☑ Annual performance of students nearing completion of the didactic curriculum on Pharmacy Curriculum Outcomes Assessment (PCOA) outcome data for the last 3 years broken down by campus/branch/pathway *(breakdown only required for multi-campus and/or multi-pathway programs)* ***N/A***

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

    [1E Examples of Spiral Integration in MRSLs]
    [1F UHCOP PPSLOs]
    [1G PPSLO Mapping Curriculum]
    [1H UHCOP Curricular Schematic]
    [1I UHCOP PPSLO Assessment Plan]
    [1J PPSLO Assessment Plans 2020-2023]
    [1K Post Course Review]
    [1L Curricular Changes]
    [1M Assessment Operating Procedures]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program's compliance with the requirements of the standard and accompanying guidelines:

	S	N.I.	U
1.1. Foundational knowledge – The graduate is able to develop, integrate, and apply knowledge from the foundational sciences (i.e., biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences) to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population health and patient-centered care.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe the breadth and depth of the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences components of the didactic curriculum.

☑ Describe the strategies utilized to integrate the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences components of the didactic curriculum.

☑ Describe how the college or school integrates the foundational sciences to improve student ability to develop, integrate and apply knowledge to evaluate the scientific literature, explain drug action, solve therapeutic problems, and advance population health and patient-centered care.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

The Pharm.D. curriculum is carefully structured to prepare students for their Advanced Pharmacy Practice Experience (APPE) through didactic, professional and patient care activities. The design facilitates progressive growth in knowledge and skills from beginner to proficient levels. In P1, foundational knowledge is assessed at the beginner's level. As students advance, they engage in didactic courses, skills labs, and community and hospital Introductory Pharmacy Practice Experiences (IPPEs) to prepare them for APPE rotations in their fourth year. **[1A Professional Curriculum P1_P4]**

Description of Foundational Knowledge and Integration

P1 didactic courses provide a strong background in foundational knowledge. They include basic science courses, e.g. physiology, biochemistry, pharmaceutics, calculations and immunology as well as clinical sciences courses, e.g. social, behavioral, and communications, OTC/self-care, and patient assessment. These clinical courses cover key aspects of pharmacy practice that serve as a building block and introduction for the Pharmacists' Patient Care Process (PPCP) and essential skills for evaluating patients and interpreting lab results. Additionally, students engage in the Fundamentals of Pharmacy Practice course that emphasizes community pharmacy law and immunizations as part of their IPPE preparedness. P1 also includes the first two management courses with Introduction to the Health Care System and Patient, Medication Safety & Informatics. Pharmacy Skills Program I complements students' knowledge by providing practical skills in a pharmacy practice setting aligned with corresponding didactic coursework.

P2 and P3 didactic courses build upon the basics of P1 through integrated disease state modules and other courses, including pharmacokinetics, literature evaluation and the continuation of management course sequence. Each integrated module is organ systems-based and includes the pathophysiology of disease, pharmacology, medicinal chemistry, and therapeutic concepts concentrating on evidence-based medicine including clinical guidelines, where applicable. PPCP is embedded in the therapeutics portion of the modules and includes non-pharmacologic and pharmacologic treatment plans,

monitoring, side effects, pharmacokinetics, pharmacogenomics, and toxicology, where applicable. The modules and other curriculum courses span all age groups from pediatrics to geriatrics.

Pharmacy Skills Program continues in P2 and P3 and incorporates both traditional skills labs and Module-Related Skills Labs (MRSLs). During P2 fall, Pharmacy Skills III introduces students to sterile compounding techniques and guidelines. It also emphasizes journal evaluation and presentation, thereby complementing the foundational knowledge imparted in pharmaceutics and literature evaluation courses. MRSLs, which are affiliated with the integrated modules, are instrumental in reinforcing the current course material as well as spirally integrating concepts from various courses, including calculations, pharmacokinetics, communications, and patient assessment. Active learning is a key component of MRSLs and involves activities such as worksheets, stations, case vignettes, and comprehensive patient workups for individuals with multiple disease states. By fostering critical thinking and patient care skills, MRSLs ensure our students are APPE and pharmacy practice ready.

The curriculum is purposefully designed to integrate various aspects of the didactic curriculum, including biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences. The strategic placement of courses in the curriculum enhances integration in a horizontal, vertical and spiral manner. In P1, the curriculum intentionally incorporates both basic and clinical sciences to establish a foundational base before the commencement of the integrated modules in P2. For example, students learn about renal, gastrointestinal and respiratory physiology in P1. This knowledge is further built upon in P2 when the pathophysiology of these systems is covered in the respective integrated modules. The functional groups component of Foundations in Medicinal Chemistry, Microbiology, and Receptor Action (FIMMRA), taught in P1, lays the groundwork for medicinal chemistry in P2 and P3. Similarly, the receptor component of FIMMRA forms the basis for pharmacology, and the microbiology component serves as a foundation for the integrated infectious diseases I and II modules. In fall of P1, students acquire communication and patient counseling skills through the Social, Behavioral, and Communication Aspects of Pharmacy Practice course. These concepts are reinforced and applied in all subsequent Pharmacy Skills Program courses, MRSLs, IPPEs, and APPEs. Students are introduced to a simulated electronic health record (EHR Go) in the P1 Patient Assessment course where they learn to access, navigate and work up a patient. This familiarity with EHR Go is reintroduced during the MRSLs where students assess and plan for simulated patients using the patient information in EHR Go. Completed before their APPE, the final course in P3 spring semester is capstone course Complex Problems that equips students with the ability to engage with and apply the skills and knowledge developed over P1-P3. It provides students with the opportunity to navigate complex cases with an emphasis on the social determinants of health and other factors, thereby preparing them for patient-centered care and bridging them from the didactic curriculum to APPE.

The integrated modules strategically sequence topics to enhance the understanding of disease states. For example, medicinal chemistry is placed before pharmacology of medications to help students gain knowledge of structural-activity relationships they can then apply to pharmacological principles. The knowledge of these two disciplines plays a vital role in understanding therapeutics. Pathophysiology builds upon the foundations of P1 physiology courses. This layered approach enhances students' understanding of disease states and equips them with the ability to apply evidence-based treatment guidelines and achieve therapy goals in patient-centered care.

The curriculum introduces various topics in the didactic lectures which are then reinforced in corresponding skills courses Pharmacy Skills Program I-III and MRSL I-IV. Pharmacy Skills Program I integrates elements of communication/counseling, compounding, calculations, and physiology. Pharmacy Skills Program II further incorporates counseling, self-care, immunization techniques, patient assessment skills, and physiology. Pharmacy Skills Program III applies biostatistics and research design covered in the literature evaluation course through manuscript evaluation and journal club presentations. The MRSL courses are designed to reinforce the content covered in modules and integrate other aspects of the curriculum. For instance, MRSL III integrates the knowledge and skills obtained previously, such as dose recommendations, renal dose adjustment, antimicrobial dosing, assessment for medication-related problems, and developing a therapeutic care plan given a simulated electronic medical record concurrently with the neurology, immunology and infectious diseases modules. **[1E Examples of Spiral Integration in MRSLs]**

The integrated curriculum is designed with a team-teaching approach. Each course is coordinated and taught by a team of faculty members and lecturers who collaborate to ensure course content flow and depth are consistent and integrated and to minimize content overlap. This integrated approach has resulted in significant collaboration between basic and clinical sciences in the delivery, assessment and active learning throughout the curriculum. All modules are co-coordinated with a clinical and basic science coordinator. All module coordinators meet regularly to ensure consistency and integration amongst all modules. Additionally, the Pharmacy Skills Program and MRSLs provide additional opportunities for integration. The coordinators and teaching faculty from various courses collaborate to create active learning experiences and design assessments, ensuring a comprehensive and cohesive learning experience for students.

Evidence of Foundational Knowledge
The College's program-level outcomes, Professional Pharmacy Student Learning Outcomes (PPSLOs), are based on the Center for the Advancement of Pharmaceutical Education (CAPE) 2013 Educational Outcomes and consist of 10 domains and multiple subdomains. For Standard 1, PPSLO 2 (Foundational Sciences) is most relevant. PPSLOs are mapped to the proficiencies in our didactic and experiential courses. Data is captured via resources such as ExamSoft, Pharmacy Curriculum Outcomes Assessment (PCOA) and other capstone assessments, IPPE and APPE evaluations, and NAPLEX. Data is reviewed by our assessment committee as part of the PPSLO Assessment Plan. Based on ExamSoft data, in the pre-APPE curriculum all students showed greater than 70% competency in PPSLO 2 except for Pharmacokinetics for P2 students. For the community and institutional IPPEs, preceptor evaluations averaged 9.3 on a 10-point Likert scale which is above the "Meets Expectations" score of 8.7. This was also the trend for APPEs with a score of 9.2. **[1F UHCOP PPSLOs, 1G PPSLO Mapping Curriculum, 1H UHCOP Curricular Schematic, 1I UHCOP PPSLO Assessment Plan, [1J PPSLO Assessment Plans 2020-2023]**

Capstone knowledge assessments are imperative in the evaluation of student retention of foundational knowledge. UHCOP began utilizing the PCOA in 2014 as a formative assessment for P1 and P2 students and as a high stake, APPE-readiness knowledge examination for P3 students. P3 students who do not meet the set minimum competency of the PCOA must retake the PCOA until meeting minimal competency before starting APPEs. Since 2019, an average of seven students each year have had to retake the PCOA before starting APPEs. Over the past five years, all students have met minimal competency and started APPEs on time. Overall, the scaled score averages from our P3 students have consistently scored above the National Scaled Score (NSS). For P1 and P2 students, there has been variation in the scaled scores; in 2020, the P2 overall percentile was higher than P3 (66 versus 64, respectively) which was the first cohort of the integrated curriculum. However, in the following years the numbers declined possibly due to several factors including the effect of online learning initiated during COVID-19. The College's Assessment and Curriculum Committees have continued to look at trends in core content areas to determine if any curricular changes are warranted. Most notably we have seen a decline in calculations and pharmacokinetic content areas and are working to improve delivery and assessment throughout the curriculum. After retirement of the PCOA in June 2023, the College piloted assessment options in January 2024 including a directed calculations capstone assessment in P1 and a PCOA-like assessment through ExamMaster® for P2 and P3. This will be further discussed in Standard 24. **[1C PCOA Score Trends 2014-2023, 1D Exams Master PCOA Comparison 2024]**

Continuous Quality Improvements
Through the PPSLO Assessment Plan, which includes a robust curriculum course review process **[1K Post Course Review],** we have been able to make improvements throughout the curriculum, where needed. For example, P1 FIMMRA course students felt the material was too dense without context, so the faculty improved the foundational delivery and paired it with active learning assignments, leading to better summative assessments and student satisfaction in the following years. A second example is the integrated flow of courses with Skills labs; students felt that Skills labs lagged what was covered in the courses. The Skills lab team worked with the didactic course coordinators to improve the cohesive reinforcement of key concepts in the labs. Student feedback was positive, and they reported the improved flow helped them better apply the foundational concepts covered in class. Currently, we have convened a Calculations task force to evaluate this course throughout the curriculum based on the PPSLO Assessment data, and incremental changes

throughout the curriculum are being implemented as well as review of the Pharmacokinetics course. **[1L Curricular Changes]**

Notable Aspects and Innovation
There are many notable and innovative aspects to the curriculum that make it successful. The implementation of the integrated curriculum in Fall 2018 in addition to having all faculty in one building has been instrumental in collaborative efforts. The multidisciplinary team-based approach to courses and assessments serves as a pillar for the collegial, integrated curriculum. We have a dedicated Skills lab team comprised of a director of skills lab, six clinical faculty and three instructional lab managers. The Skills lab team works cohesively to coordinate and lead the skills-related experiences that are paramount to the integrated curriculum. One of the courses in the management sequence, Leadership and Principles of Interprofessional Experience (IPE), provides each student opportunities to learn and apply their teamwork and leadership skills utilizing tools such as the emotional intelligence scales and strength finders. In management course Pharmacoeconomics and Hospital Pharmacy Management, students work on group projects throughout the semester to build on interdisciplinary skills, communication and Emotional Intelligence Quotient (EQ). The curriculum has a unique capstone course, Complex Problems, which supports the transition from didactic to APPE through teamwork presentations and critical thinking assessments.

Interpretation of AACP Survey Data
As part of the College's Programmatic and PPSLO Assessment Plans, the Assessment Committee annually reviews the AACP standardized surveys, and any questions that have greater than 20% "Disagree" or "Strongly Disagree" are sent to the responsible committee or department to evaluate further and initiate an improvement plan, if necessary. **[1M Assessment Operating Procedures]** The College's 2018-2023 AACP standardized surveys indicate that most students agree or strongly agree that the curriculum prepared them in the foundational sciences (90-97%) and that they were prepared to enter pharmacy practice (92-97%), comparable to our peers and national data. While we had a low response rate from preceptors and alumni, those that responded agreed that the curriculum provided the foundational and clinical skills required in the provision of patient care and preparation of pharmacy practice. **[1B AACP Survey Data Std 1]**

4)   **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance.
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5)   **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

[TEXT BOX] [1,000 character limit, including spaces]

Standard No. 2: Essentials for Practice and Care: The program imparts to the graduate the knowledge, skills, abilities, behaviors, and attitudes necessary to provide patient-centered care, manage medication use systems, promote health and wellness, and describe the influence of population-based care on patient-centered care.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Outcome assessment data summarizing overall student achievement of Standard 2 key elements for didactic coursework, introductory pharmacy practice experiences (IPPE), and advanced pharmacy practice experiences (APPE)
 [2A PPSLO Assessment Plans 2020-2023]

☑ List of courses, teaching methods, and assessment measures used to address each key element of Standard 2
 [2B Courses Teaching Methods and Assessments]

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: Students – Questions 7-11

☑ AACP Standardized Survey: Preceptors – Questions 14-18

☑ AACP Standardized Survey: Alumni – Questions 17-21

 [2C Standard 2 AACP Survey Data]

Optional Documentation and Data: (Uploads)

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

 [2D UHCOP PPSLO Assessment Plan_2024]
 [2E Integration of Medication Use Systems]
 [2F Medication Use Systems in IPE, IPPE, and APPE]
 [2G Promotion of Health and Wellness and Population Health]
 [2H PPLSO Mapping Beginner to Proficient P1_P4]
 [2I MRSL and Skills Assessment]
 [2J Counseling and Case-based Verbal Presentation and Questions Rubrics]
 [2K Social Determinants of Health Examples]
 [2L IPPE and APPE Rubrics]
 [2M PPSLO Assessment Plan AY 2022-2023]
 [2N Longitudinal Trends PCOA including ExamMaster]
 [2O UHCOP NAPLEX 2021_2023]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program's compliance with the requirements of the standard and accompanying guidelines:

	S	N.I.	U
2.1. Patient-centered care – The graduate is able to provide patient-centered care as the medication expert (collect and interpret evidence, prioritize, formulate assessments and recommendations, implement, monitor and adjust plans, and document activities).	✓	○	○
2.2. Medication use systems management – The graduate is able to manage patient healthcare needs using human, financial, technological, and physical resources to optimize the safety and efficacy of medication use systems.	✓	○	○
2.3. Health and wellness – The graduate is able to design prevention, intervention, and educational strategies for individuals and communities to manage chronic disease and improve health and wellness.	✓	○	○

2.4. Population-based care – The graduate is able to describe how population-based care influences patient-centered care and the development of practice guidelines and evidence-based best practices.   ✓ ◯ ◯

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how the college or school supports the development of pharmacy graduates throughout the curriculum who are able to provide patient-centered care.

☑ Describe how the college or school supports the development of pharmacy graduates throughout the curriculum who are able to manage medication use systems.

☑ Describe how the college or school supports the development of pharmacy graduates throughout the curriculum who are able to promote health and wellness.

☑ Describe how the college or school supports the development of pharmacy graduates throughout the curriculum who are able to describe the influence of population-based care on patient-centered care.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

Through didactic, experiential, and co-curricular activities, the UHCOP curriculum aims to equip students with the knowledge, skills and behaviors necessary for comprehensive patient care, including a focus on patient-centered care, medication management, and health and wellness across diverse patient populations. The College assesses the effectiveness of educational experiences through its PPSLO assessment plan, which evaluates the foundational aspects of the curriculum to achieve desired student learning outcomes. **[2D UHCOP PPSLO Assessment Plan 2024, [2A PPSLO Assessment Plans 2020-2023]** These essential pharmacist abilities are embedded throughout the integrated curriculum in both didactic and experiential courses along with the co-curriculum. In the pre-APPE curriculum, they are a component of the didactic courses and are reinforced in the Skills labs, IPE experiences, co-curricular health fairs and IPPEs. In Skills courses, students both reinforce and apply concepts while developing and practicing these skills to produce APPE-ready students. During APPEs, students refine patient-centered care, medication management, and health and wellness in a variety of patient care settings such as community, ambulator care and hospital practice.

Patient-Centered Care
In P1, students are introduced to the PPCP, which develops in complexity as the curriculum progresses. Students first learn to gather information directly from a simulated electronic medical record using EHRGo. In the Self-Care and Over-the-Counter Products course, they learn the SCHOLAR-MAC technique for assessing and triaging in community settings. Additionally, students acquire skills in immunization techniques, point-of-care testing for vital signs like blood pressure and blood glucose, and interpreting lab results over time. These foundational patient-care skills are then integrated into courses, Skills labs and MRSLs during P2 and P3. In MRSLs, students practice patient workups using monitoring forms and writing progress notes, including Subjective, Objective, Assessment, and Plan (SOAP) notes and care plans. They apply these skills across various settings, from retail to intensive care units, using longitudinal cases for monitoring and follow-up. In Pharmacy Skills Program III, students receive sterile products certification which covers order verification, label creation and calculations related to intravenous products. In the P3 capstone course, Complex Problems, students complete a case-based group project that emphasizes social health determinants and individualized patient care. **[2B Courses Teaching Methods and Assessments]**

In P1 Fall, the curriculum equips students to provide optimal patient care within a team-based framework. Foundational team strategies are introduced, and students undergo TeamSTEPPS training to enhance performance and patient safety in a team environment. Additionally, they expand their medical terminology knowledge to communicate effectively with other health professionals. Techniques for resolving medication-related issues and conflicts, including the Identify, Situation, Background, Assessment, and Recommendation (ISBAR) technique, are also covered. Communication activities often involve role-play, including interactions with standardized patients. Students engage in case-based IPE during P2 and participate in clinic experiences at Houston Outreach, Medicine, Education, and Social Services Clinic (HOMES) or Vecino Health Centers alongside UHCOP faculty. In P3, IPE students participate in patient home visits through No Place Like Home (NPLH) with Baylor College of Medicine (BCM). Please refer to Standard 11 for more details on our IPE. Additional direct patient-centered care experiences include community and institutional IPPEs between P2 and P3 as well as P4 APPEs. These experiences allow students to actively engage in patient-centered care in specific environments with preceptor guidance.

Medication Use Systems
The foundations of medication use systems are established in the pre-APPE curriculum throughout the management course series. The students are first introduced to medication use systems in P1 fall through the course Introduction to the Healthcare System, which covers Medicare and Medicaid, foundations of U.S. health care and pharmacists' roles. In P1 summer, students take the Patient, Medication Safety and Informatics course, providing students with the basics of medication safety, patient safety, quality improvement and informatics, all of which help optimize patient care. P2 and P3 management courses focus on medication distribution systems, controlled substance management, and medication and formulary management in institutional and ambulatory settings.

In parallel to the management course sequence, additional courses and Skills labs integrate and apply knowledge of medication use systems. While taking the Fundamentals of Pharmacy Practice course and learning community pharmacy law in tandem, students also learn community pharmacy workflow and process. This is then simulated in Pharmacy Skills Program II and continued in Pharmacy Skills Program III where activities such as clear telecommunication between nurses and pharmacists are performed. The MRSL sequence has embedded order/prescription verification, medication reconciliation and formulary use as part of many patient cases with dedicated activities highlighting these processes. There is also an emphasis on simulated interactions with other health care providers such as physicians and nurses to ensure utilization of safe medication use systems. **[2E Integration of Medication Use Systems]**

Focused IPPE and IPE requirements strengthen learning from the classroom and Skills labs. In P2 Spring, all students must participate in an IPE medication error case with local medical and nursing colleges. IPPEs include medication use systems as part of the core competencies checklist, and medication use systems are a core learning outcome of required APPEs. In addition, there are APPE elective opportunities in medication safety, health care management in a community or institutional pharmacy setting, and disease state management. **[2F Medication Use Systems in IPE, IPPE, and APPE]**

Health and Wellness and Population-Based Care
The promotion of health and wellness and the influence of population-based care is initiated even before students start classes. During new student orientation all students receive certification in mental health first aid, basic life support (BLS) and bloodborne pathogen training. In P1 Fall, students complete group projects in public health as part of the Social, Behavioral and Communication Aspects of Pharmacy Practice course. In P1 Spring, health screening and vitals assessment is introduced in the Patient Assessment and Self-Care/OTC courses, including osteoporosis assessment, diabetic foot exam, blood pressure, cholesterol, and tobacco cessation. Additionally, the College utilizes the APhA immunization certification and naloxone training. Students then practice and apply these skills in Pharmacy Skills Program II. Students also learn to counsel patients on the results of assessments and educate them on interventions to improve health. This is all purposefully completed before the community IPPE so students are able to apply these skills on their summer rotation.

In P2 and P3, evaluation of evidence-based medicine and clinical practice guidelines are introduced beginning with the P2 Literature Evaluation course. Students consider how population-based care, evidence-based medicine and guidelines influence patient-centered care. This is incorporated into the pharmacotherapy portion of the integrated modules and applied in case discussions and care plans in MRSLs. Additionally, nonpharmacological preventive measures and interventions for chronic diseases are considered, especially in the application of the PPCP. In the Complex Problems course, students extensively apply practice guidelines and literature evaluation skills to assess and plan group-based case presentations focusing on social determinants of health and population-based care. The first three years of the curriculum provides students with comprehensive preparation to work with diverse patient populations across various health care environments during their P4 APPEs. **[2G Promotion of Health and Wellness and Population Health]**

Assessment of Patient-Centered Care, Medication Use Systems, Health and Wellness, and Population-Based Care
As detailed in Standard No. 1, the College's PPSLO Assessment Plan is utilized to evaluate the achievement of student outcomes using data from resources such as ExamSoft, PCOA and other capstone assessments, IPPE and APPE evaluations, and NAPLEX. For this standard, PPSLO 6 (Patient-Centered Care), 9 (Health Care Management) and 10 (Population-Based Care) are most relevant although others may apply. **[2D UHCOP PPSLO Assessment Plan_2024]** By evaluating data derived from PPSLO mapped assessments, we can observe the progression of students as they move through the curriculum, advancing from beginner to proficient. **[2H PPLSO Mapping Beginner to Proficient P1_P4]** The Skills labs are key areas where the integrated design of the curriculum allows for continuity in assessments with increasing complexity.

In P1, students learn the basic skills of patient-centered care, medication use systems, health and wellness, and population-based care when counseling patients. During the final Objective Structured Clinical Examinations (OSCE) of Pharmacy Skills Program I, students undergo evaluation of their communication abilities during counseling sessions, followed by an assessment of information accuracy in the subsequent spring. This provides students with a foundation to build upon during their Community IPPE, where they are directly assessed on their patient communication skills. In P2, the focus moves to discharge counseling and medication reconciliation; assessment occurs during the final OSCE of MRSL II and P2 Summer Institutional IPPE. Patient counseling and communication continues to be emphasized in P3 with MRSLs III and IV as well as Complex Problems before moving forward with APPEs. **[2I MRSL and Skills Assessment] [2J Counseling and Case-based Verbal Presentation and Questions Rubrics] [2K Social Determinants of Health Examples] [2L IPPE and APPE Rubrics]**

Data from the 2022-23 PPSLO Assessment Plan **[2M PPSLO Assessment Plan 2022-2023]** demonstrates PPSLOs 6, 9 and 10 were consistently assessed from P1 to P4 through exams, skills assessments, and IPPE and APPE evaluations. Based on ExamSoft data, in the pre-APPE curriculum students displayed an average of 85% competency in these PPSLOs. For Community and Institutional IPPEs, preceptor evaluations averaged 9.5 on a 10-point Likert scale which is above the "Meets Expectations" score of 8.7. This was also the trend for APPEs which scored 9.5 for PPSLOs 6, 9, and 10.

Since beginning the integrated curriculum, PCOA scores for P2 and P3 students in the areas of social/behavioral/administrative sciences have been at or above national averages. **[2N Longitudinal Trends PCOA including ExamMaster]** Over the past three years there has been a notable decrease in our NAPLEX pass rates from 96.26% in 2020 to 88% in 2021 and 83.2% in 2023. NAPLEX Competency 5 (compound, dispense, or administer drugs or manage delivery systems) has been one of the areas that our graduates have scored "Below Achievement" or "Far Below Achievement." **[2O UHCOP NAPLEX 2021_2023]** The assessment and curriculum continue to identify areas where this outcome can be improved. Upon returning to normal operating procedures following the height of COVID-19, content delivery, reinforcement in Skills labs and limitations in rotation experience have all improved.

Notable Achievements
The success of our integrated curriculum would not be feasible without the dedicated Skills team to help solidify the continuity of education and assessment of our students. Two Skills lab activities received honorable mentions by

American Association of Colleges of Pharmacy (AACP) Lab Special Interest Group (SIG): one activity was related to the role of pharmacy staff in a community pharmacy (medication use systems), and the other was a simulated activity with a focus on patient safety and clear telecommunication between nurses and pharmacists.

The College's co-curriculum is vital for the professional development of our students with respect to patient-centered care and population-based care. Service-learning events, such as the annual City of Houston Mayor's Back to School Fest and numerous health fairs in Houston's diverse communities, led by student organizations allow for direct involvement with patient-care and health education activities for a variety of patient populations. In addition, IPE requirements include interactions with varied social determinants of health like older age, low-income and low health literacy through experiences at Vecino Health Centers, HOMES and NPLH.   Additionally, students have the opportunity to receive a Hispanic Health Certificate upon graduation by completing two Spanish electives and IPPEs and APPEs in predominantly Spanish speaking populations including the Rio Grande Valley (RGV) rotation site in McAllen, Texas.

AACP Survey Data
Overall, the graduating student, preceptor and alumni data all were above 80% agrees or strongly agrees cutoff (> 20% disagree or strongly disagrees) utilized in the College's Programmatic Assessment. The only question that fell slightly below (79.13%) was number 15 of the preceptor survey "the criteria for evaluating my performance as a preceptor are clear". However, this was similar to the national average of 81.75%. **[2C Standard 2 AACP Survey Data]**

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

   [TEXT BOX] [1,000 character limit, including spaces]

Standard No. 3: Approach to Practice and Care: The program imparts to the graduate the knowledge, skills, abilities, behaviors, and attitudes necessary to solve problems; educate, advocate, and collaborate, working with a broad range of people; recognize social determinants of health; and effectively communicate verbally and nonverbally.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Outcome assessment data summarizing overall student achievement of Standard 3 key elements for didactic coursework, introductory pharmacy practice experiences (IPPE), and advanced pharmacy practice experiences (APPE)

   [3A PPSLO Assessment Plans 2020-2023]

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: Students – Questions 12-18

☑ AACP Standardized Survey: Preceptors – Questions 19-25

☑ AACP Standardized Survey: Alumni – Questions 22-28

   [3B Std 3 AACP Survey]

Optional Documentation and Data: (Uploads)

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

   [3C Examples of the IPPE Requirements]

   [3D IPE Plan 2023-2024]

   [3E Complex Problems Project Presentation Guidance and Rubric]

   [3F IPPE and APPE Rubrics]

   [3G Public Health Poster Information]

   [3H Sample Skills and MRSL Rubrics]

   [3I PCOA ExamMaster Data]

   [3J UHCOP NAPLEX 2021_2023]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
3.1. Problem solving – The graduate is able to identify problems; explore and prioritize potential strategies; and design, implement, and evaluate a viable solution.	✓	○	○
3.2. Education – The graduate is able to educate all audiences by determining the most effective and enduring ways to impart information and assess learning.	✓	○	○
3.3. Patient advocacy – The graduate is able to represent the patient's best interests.	✓	○	○

3.4. Interprofessional collaboration – The graduate is able to actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and values to meet patient care needs.	✓	○	○
3.5. Cultural sensitivity – The graduate is able to recognize social determinants of health to diminish disparities and inequities in access to quality care.	✓	○	○
3.6. Communication – The graduate is able to effectively communicate verbally and nonverbally when interacting with individuals, groups, and organizations.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how the college or school supports the development of pharmacy graduates who are to solve problems; educate, advocate, and collaborate, working with a broad range of people; recognize social determinants of health; and effectively communicate verbally and nonverbally.

☑ Describe how the college or school incorporates interprofessional education activities into the curriculum.

☑ Describe how assessments have resulted in improvements in patient education and advocacy.

☑ Describe how assessments have resulted in improvements in professional communication.

☑ Describe how assessments have resulted in improvements in student problem-solving and critical thinking achievement.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

The UHCOP curriculum incorporates problem-solving, education, patient advocacy, interprofessional collaboration, cultural sensitivity, and communication skills in didactic, experiential and co-curricular components. Achievement of student learning outcomes is measured using the PPSLO Assessment Plan. **[3A PPSLO Assessment Plans 2020-2023]**

Problem-solving
The ability to solve problems is instilled in several courses throughout the didactic curriculum. Pharmacy Skills Program I and II incorporate several problem-solving activities such as patient histories, prescription verification – errors and omissions, and navigating through physiology concepts. FIMMRA in P1 Spring includes problem-solving activities such as answering medicinal chemistry functional group structure questions and connecting resistance mechanisms to specific pathogenic bacteria. In the Community IPPE, students must report on at least eight interventions they encountered in the retail setting.

As clinical knowledge increases in P2 and P3, case-based activities and assignments are included in the active learning modules. Students work together inside and outside of class to evaluate patient cases and identify and resolve medication-related problems. Many modules have debrief sessions where cases are reviewed and discussed as a group. Some modules also include these activities as part of the course quiz grade. Problem-solving skills translate into respective MRSLs and increase in complexity. The final bridge before APPEs is capstone course Complex Problems during P3 spring. Students apply their knowledge and critical thinking to solve complex cases and health care issues through group presentations and case-based policy and procedure projects. This empowers students with increased confidence in problem-solving as they finish didactic courses and move forward with APPEs.

Education
Patient education is introduced in the first semester of the curriculum in the Social, Behavioral and Communications course where motivational interviewing, patient counseling and Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS) are covered. Students then apply their knowledge and skills through patient counseling assessments and health education event posters. Starting in P1 Spring, students participate in co-curriculum patient education activities such as naloxone and diabetes education coordinated by the student organizations. The Skills courses and MRSLs assess patient counseling, drug information education and discharge patient counseling. They also include a variety of scenarios and assignments that maximize education delivery.

For example, Pharmacy Skills Program III requires students to communicate with and educate mock nursing staff role-played by pharmacy residents. MRSL II includes a mock case presentation where students must educate their peers about a patient case and related disease state. MRSL IV includes a scenario where students respond to questions from mock patients and prescribers. Throughout the MRSL sequence, students must also respond to questions from faculty or residents role-playing as preceptors and use the ISBAR technique to resolve medication-related problems. In P3, students receive Screening, Brief Intervention, and Referral to Treatment (SBIRT) training in the Psychiatric Integrated Module followed by MRSL III where training is utilized to educate patients about the risks of substance use. IPPEs and APPEs include many educational experiences and requirements such as interventions in the Community IPPE and topic presentations in the Institutional IPPE. **[3C Examples of the IPPE Requirements]**

Patient Advocacy
Patient advocacy is embedded throughout the professional program beginning in P1 with the introduction of mental health first aid and motivational interviewing. These concepts serve as a foundation to encourage patients to be informed and self-advocate when making health care decisions. P1 students are also trained in TeamSTEPPS to improve communication and teambuilding to help provide safer patient care. These skills are then integrated throughout the curriculum in the integrated modules, Skills labs and MRSLs utilizing the PPCP. A capstone for patient advocacy application is embedded in the case-based group projects from the Complex Problems course where team presentations must consider patient-preferred values and belief systems.

Co-curricular activities, such as IPEs, provide experience and instruction regarding patient advocacy. Each year there is a required advocacy convocation that focuses on meeting patient needs through legislative and regulatory efforts and patient education. For example, an advocacy convocation in 2021 provided pharmacy students with information on the newly released COVID-19 vaccines and vaccine hesitancy. Patient advocacy is highlighted in IPEs at HOMES and Vecino Health Centers, which provide comprehensive health care to underserved populations. During the NPLH IPE in P3, students visit the homes of older adults to learn the challenges experienced by aging patients. Using the PPCP, students must serve as advocates in the resolution of patient issues. Advocacy skills are further cultivated during IPPEs and APPEs with various patient populations.

Interprofessional Collaboration and Incorporation into the Curriculum
Interprofessional education (IPE) activities are purposefully embedded throughout the curriculum to reinforce the importance of collaboration with health care professionals in all patient care settings. Although most activities are part of the co-curriculum, students do learn foundational knowledge in P1 course Social, Behavioral and Communication Aspects of Pharmacy Practice and P2 course IPE and Leadership. The IPE Plan 2023-24 highlights how UHCOP curriculum purposefully builds upon skills and knowledge gained as students progress through the program. **[3D IPE Plan 2023-2024]** In addition to IPE activities discussed in this standard, see Standard No. 11 for more details about the robust IPE curriculum.

Social Determinants of Health
Priorities for UHCOP are to provide students with exposure to various patient populations and to prepare students to care for underserved patients with empathy and compassion. Throughout the curriculum and co-curriculum, emphasis is placed on considering social determinants of health (SDOH) when making therapeutic recommendations as part of the PPCP.

This approach recognizes that factors like housing stability, access to healthy food and transportation play a crucial role in overall health and well-being.

P1 students are introduced to SDOH early in the fall semester with cultural competency lectures and health literacy addressed in the course Social, Behavioral & Communication Aspects of Pharmacy Practice and applied in Skills labs and Patient Assessment course. P2 and P3 didactic courses, along with MRSLs, include patient cases that integrate SDOH to better optimize patient health and outcomes. P3 course Complex Problems includes a group-based project in which SDOH, such as health literacy skills, financial resources, health care access, and social and community environments must be factored into the decision-making process for a given patient case. **[3E Complex Problems Project Presentation Guidance and Rubric]** Lastly, the co-curriculum, IPE, IPPEs and APPEs provide real-world experience caring for patients facing a variety of health care barriers. With guidance from UHCOP faculty, preceptors and other health care professionals, students address many obstacles for patients including access to health care, language barriers and literacy skills.

Communication
Communication skills are introduced early in the curriculum during P1 Fall in course Social, Behavioral & Communication Aspects of Pharmacy Practice. Course topics include PPCP, medical terminology, patient communication using layman's terms, nonverbal communication, and communication with the presence of barriers. Patient counseling and education are first introduced in P1 Fall with an emphasis on utilizing the three prime questions. This skill set is further developed and assessed during various time points in the Pharm.D. curriculum. In addition to emphasizing communication with patients, students focus on developing effective communication with health care providers. This includes conflict resolution using the Situation, Background, Assessment, and Recommendation (SBAR) technique, patient presentations, and case discussions. Students also receive instruction and evaluation on written communications such as progress notes and care plans. Each of the objective structured clinical examinations (OSCEs) given throughout the didactic curriculum include at least one component of communication skills. Communication is assessed throughout the experiential curriculum. Specific examples include the formal Institutional IPPE and APPE case presentations as well as journal club presentations required in various APPE rotations. Also, the required Internal Medicine APPE has a written assignment evaluated using a rubric to ensure consistent assessment of performance. **[3F IPPE and APPE Rubrics]**

Assessment Data Resulting in Curricular Improvements
The College's PPSLO Assessment Plan utilizes data from various assessments to evaluate student achievement. The most relevant for problem-solving is PPSLO 3; education PPSLOs 1 (subdomain 1.6) and 10; patient advocacy PPSLOs 6 and 8 (subdomains 6.8 and 8.5); SDOH PPSLOs 1, 3, and 6 (subdomains 1.5, 3.2, and 6.4); communication PPSLO 1; and PPSLO 7 for IPE. However, several PPSLOs are integrated in the assessment of these core elements, especially in the OSCEs. P1 lays the foundation for education, communication, problem solving, patient advocacy and SDOH. At the end of P1 Fall, students have assignments in the Social, Behavioral & Communication course including a paper on a communication barrier and a group public health poster presentation. **[3G Public Health Poster Information]** The various OSCEs in the Pharmacy Skills Program I and II and the MRSLs also incorporate the core principles of problem-solving, patient advocacy and SDOH, leading to the capstone presentation in the Complex Problems course before starting APPEs. **[3H Sample Skills and MRSL Rubrics]**

Data from the 2022-2023 PPSLO Assessment Plan shows that PPSLOs 1, 3, 6, 7, 8 and 10 were adequately assessed from P1 to P4 utilizing exams, skills assessments, and IPPE and APPE evaluations. Based on ExamSoft data in the pre-APPE curriculum, P1 student scores ranged from 84.4% to 95.47%, with the lowest scores in professionalism and teamwork (PPSLO 7) and highest scores in problem-solving (PPSLO 3). P2 student scores ranged from 80% to 99.45%, with the lowest scores in population-based care (PPSLO 10) and highest scores in communication (PPSLO 1). For P3 students, the range was 83.88% to 100%, with the lowest scores in population-based care (PPSLO 10) and highest scores in problem-solving (PPSLO 3). For the Community and Institutional IPPEs, preceptor evaluations averaged 9.59 on a 10-point Likert scale, which is above the "Meets Expectations" score of 8.7. Preceptor evaluations for APPEs averaged 9.55 for PPSLOs 1, 3, 6, 7, 8, and 10.

PCOA scores for P2 and P3 students in professional communication and population health disease prevention are consistently above the national average with P3 averages greater than 80% correct in both areas. For NAPLEX outcomes, Domain 1 (Obtain, Interpret, or Assess Data, Medical or Patient Information) has been the highest performing domain (students scoring 3's and 4's). NAPLEX Domain 3 (Development or Manage Treatment Plans) was the second highest domain in 2021 and 2022 but fell to the fourth highest in 2023. **[3I PCOA ExamMaster Data] [3J UHCOP NAPLEX 2021_2023]**

Feedback from student evaluations, course coordinators and preceptors, including faculty, indicated that students displayed appropriate skills in creating SOAP notes and general professional communication; however, improvement is needed on conciseness when communicating with health care professionals. In addition to Skills labs, case-based problem-solving and critical thinking need to be included in the modules and other courses. As a result, courses have increased active learning. For example, a team-based case assignment was added to the P1 Patient Assessment course and case-based activity assignments were incorporated into several of the integrated modules.

Notable Achievements
As stated in Standard 2, P2 and P3 IPE co-curricular requirements include interactions with varied SDOH such as older age, low income, and low health literacy through experiences at Vecino Health Centers, HOMES and NPLH. P3 Complex Problems capstone course has been instrumental in students displaying competency in communication, problem-solving, education, patient advocacy and SDOH, as well as increasing student confidence before starting APPEs. Lastly, UHCOP faculty member, Austin De La Cruz, PharmD, was awarded a grant from the Substance Abuse and Mental Health Services Administration (SAMSHA) to create an educational program for treatment of substance use disorders for P3 students and faculty. UHCOP is the only pharmacy college in the nation to receive this award.

AACP Survey Data
Overall, the graduating student, preceptor and alumni data all were above 80% the agrees or strongly disagrees cutoff (> 20% disagree or strongly disagrees) utilized in the College's Programmatic Assessment. Although it may be a onetime decline, in the 2023 graduating student survey number 17 "recognize and address cultural disparities in access to and delivery of health care" fell below 90% (89.23%). We will continue to monitor these trends and intervene per our programmatic and PPSLO assessments, if warranted. **[3B Std 3 AACP Survey]**

4) **College or School's Final Self-Evaluation**: Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

   [TEXT BOX] [1,000 character limit, including spaces]

Standard No. 4: Personal and Professional Development: The program imparts to the graduate the knowledge, skills, abilities, behaviors, and attitudes necessary to demonstrate self-awareness, leadership, innovation and entrepreneurship, and professionalism.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Plan for Student Achievement of the Key Elements of Standards 3 and 4 (Co-Curricular Plan) or Co-Curriculum Manual broken down by campus, branch, and pathway (branch and pathway requirements for applicable programs). The plan should include timeline, activities, outcomes, and assessment tools

   [4A UHCOP CoCurricular Plan 2023]

☑ Outcome assessment data summarizing students' overall achievement of Standard 4 key elements for didactic coursework, introductory pharmacy practice experiences (IPPE), and advanced pharmacy practice experiences (APPE)

   [4B PPSLO Assessment Plans 2020–2023]

☑ Examples (2-3 for each standard) of curricular and co-curricular experiences available to students to document developing competence in affective domain-related expectations of Standards 3 and 4

   [4C ePortfolio]

   [4D Selected SnapShot Reflection Surveys]

   [4E CCAPS62 Survey]

   [4F ICCAS]

   [4G IPE Evaluation Data P1-P4 IPEs]

   [4H EQi 2 with Student Examples]

   [4I Strength Finders 2 with Student Examples]

   [4J P1-P3 Examples Professional Development]

   [4K LASSI]

   [4L Career Exploration Events AY2324]

   [4M P1 Oath of a Pharmacist Workshop]

   [4N P4 Clinical Pearls]

   [4O Standard 4 Domains Chart of Curriculum and CoCurriculum Activities]

   [4P Complex Problems 2024 Case Summaries and Student Instructions]

   [4Q UHCOP Wellness Support Examples]

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: Students – Questions 19-23, 25

☑ AACP Standardized Survey: Preceptors – Questions 26-29

☑ AACP Standardized Survey: Alumni – Questions 8, 29-32

[4R Std 4 AACP Survey]

Optional Documentation and Data:

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

[4S UHCOP PPSLO Assessment Plan_2024]

[4T UHCOP Code of Ethical and Professional Conduct]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
4.1. Self-awareness – The graduate is able to examine and reflect on personal knowledge, skills, abilities, beliefs, biases, motivation, and emotions that could enhance or limit personal and professional growth.	✓	○	○
4.2. Leadership – The graduate is able to demonstrate responsibility for creating and achieving shared goals, regardless of position.	✓	○	○
4.3. Innovation and entrepreneurship – The graduate is able to engage in innovative activities by using creative thinking to envision better ways of accomplishing professional goals.	✓	○	○
4.4. Professionalism – The graduate is able to exhibit behaviors and values that are consistent with the trust given to the profession by patients, other healthcare providers, and society.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe the plan for student achievement of the key elements of Standards 3 and 4 (co-curricular plan).

☑ Describe the tools utilized to capture students' reflections on personal/professional growth and development.

☑ Describe the processes by which students are guided to develop a commitment to continuous professional development and to self-directed lifelong learning.

☑ Describe the curricular and co-curricular experiences related to professionalism, leadership, self-awareness, and creative thinking throughout the curriculum.

☑ Describe how assessment results have resulted in improvements in professionalism, leadership, self-awareness, and creative thinking.

☑Describe how the curriculum fosters the development of students as leaders and agents of change and helps students to embrace the ethical 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**.**

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

Graduates of UHCOP have developed self-awareness, leadership, innovation and entrepreneurship, and professionalism through the didactic, experiential and co-curricular components of the program. Achievement of student learning outcomes in these areas are measured with the PPSLO Assessment Plan, largely through ePortfolio and co-curricular data. **[4B PPSLO Assessment Plans 2020-2023] [4C ePortfolio]**

Co-curricular Plan
The UHCOP co-curriculum is designed to enhance the College's curriculum through intentional sequencing of core topics and activities and is overseen by the College's Co-curriculum Director. The co-curricular plan has eight domains (advocacy, cultural sensitivity, innovation and entrepreneurship, leadership, professionalism, self-awareness, IPE, and service learning) mapped to the 2013 CAPE outcomes 3 and 4 as well as the College's PPSLOs. Co-curricular activities include formal convocations, professional workshops and wellness activities. While a number of formal events are mandatory, many activities allow students the choice of participation in different events as long as they meet co-curricular event requirements. This allows students to personalize their professional development and encourages participation in student organizations and activities of interest. **[4A UHCOP CoCurricular Plan 2023]**

Capturing Students Personal and Professional Growth
Students are required to upload specific artifacts into their ePortfolio taken from both curricular and co-curricular activities to document individualized progress in their PPSLOs **[4C ePortfolio P1-P3 Requirements].** Following required co-curricular activities or events, students complete a snapshot reflection survey which allows them to reflect on whether the activity helped them gain or build on previous knowledge or skills and how content from the activity can be applied to their pharmacy education or career. Students are also asked to provide feedback on the most important lesson they learned from the activity. Data is reviewed and assessed to ensure co-curricular activities continue to meet programming intent and student needs.

Many other instruments are utilized to capture students' professional growth. As part of the ePortfolio, ExamSoft surveys are used for students to reflect on their professional goals, leadership and professionalism. In the P2 Leadership and Principles of IPE course, students complete the EQ 2.0 and Strength Finders Assessments to help with students' self-awareness of their leadership strengths and opportunities. Measurement of self-perception of interprofessional competence is captured through the Interprofessional Collaborative Competencies Attainment Survey (ICCAS). Overall student well-being is captured in P1-P3 through the anonymous Counseling Center Assessment of Psychological Symptoms-62 (CCAPS-62), a professional instrument utilized to assess psychological symptoms and distress in college students. **[4E CCAPS62 Survey] [4F ICAAS] [4H EQi2 with Student Examples]**

Commitment to Continuous Professional Development and Self-directed Life-long Learning
UHCOP students commit to professional development and life-long learning even before classes begin. Prior to new student orientation (NSO), students complete the Learning and Study Strategies Inventory (LASSI) and meet with academic advisors to review their results and discuss a learning and time management plan. In addition, an orientation seminar on notetaking and study tips is given by the faculty. During P1 Fall, students develop academic goals using the Specific, Measurable, Achievable, Relevant, and Time-Bound or SMART method and create their curriculum vitae (CV). Goals are reviewed by advisors who provide feedback as well as a follow-up in P3 prior to beginning APPEs. In P2, students attend a P2 Success Series by the faculty which provides insights and resources on transitioning successfully to the integrated modules and MRSLs. In capstone course Complex Problems, students complete a reflection on self-awareness as well as their plan for APPE success. **[4K LASSI]**

As part of their professional development and life-long learning, students receive guidance and exposure to various career options throughout their time in school. The Office of Student and Professional Affairs (OSPA) meets individually with students during P1 Fall semester to discuss areas of pharmacy interest. The American Pharmacists Association (APhA) Career Pathways is delivered to P1 students as part of Pharmacy Skills Program I, followed in P1 Spring with a career pathways workshop which also exposes the students to research opportunities and dual degree programs (Pharm.D./MBA or Pharm.D./Ph.D.). The College hosts an evening where students meet with various companies for summer internships and opportunities to gain further experience. Student organizations offer valuable opportunities for students to explore professional pathways. For example, the Student Society of Health-System Pharmacists (SSHP) hosts an annual residency showcase and mentoring social, while the Academy of Managed Care Pharmacy (AMCP) and the Industry Pharmacists Organization (IPhO) organize regular roundtable events for networking with industry and managed care pharmacists. **[4L Career Exploration Events and Professional Networking during AY2324]**

The commitment to professional development and life-long learning is reinforced with student professional identity formation (PIF). PIF is woven throughout the curriculum and co-curriculum encouraging students to think, act and feel like a pharmacist. It begins during P1 orientation through participation in the White Coat Ceremony where students recite the Pledge of Professionalism. This is followed up with a co-curricular workshop lead by P4 APPE students where P1 students reflect on and present the line-by-line message from the Oath of a Pharmacist. Throughout the didactic curriculum, OSCE's consistently assess student professionalism and communication. During P4 on-campus days, students share clinical and/or professional pearls they have gained during their APPE rotations. **[4N P4 Clinical Pearls]**

Professionalism, Leadership, Self-awareness and Creative Thinking
Through curricular and co-curricular experiences, students are provided both required and voluntary opportunities to develop professionalism, leadership, self-awareness and creative thinking. Beginning with NSO, the student-developed professional dress code is introduced and self-enforced throughout the professional program. [4M Standard 4 Domains Chart Curricular Cocurricular Activities] Students are introduced to the College's Honor Code to foster their professional integrity. Phi Lambda Sigma (PLS) introduces the five voices of leadership and provides the GiANT assessment to build upon leadership skills throughout the curriculum. Additionally, students are trained in Mental Health First Aid to further develop self-awareness and empathy for others.

This foundation sets the stage as students begin P1 and are introduced to professionalism and team dynamics through TeamSTEPPS in the Social, Behavioral & Communication Aspects of Pharmacy Practice course. In addition, the public health poster and presentation project in this course offers students the opportunity to be creative professionals. In P2 course Leadership and Principles of IPE, students complete and reflect on their EQ-i 2.0 and Strength Finders 2.0 results and develop a vision of how their career will advance through the creation of a personal strategic plan. During Community and Institutional IPPEs, students complete a continuing education (CE) as part of their continual professional development. Professionalism and self-awareness are emphasized in the Pharmacy Skills Program I-III courses and MRSLs with faculty assessment of tardiness, attendance, dress code and communication. Ethics, research, and scientific writing focused elective courses extend opportunities for students to be creative in their professional growth. In P3 course Complex Problems, students complete a team project and creatively problem-solve difficult cases and scenarios. Upon project completion, students reflect on areas where the course helped them become APPE-ready. **[4P Complex Problems Examples]**

Numerous co-curricular opportunities allow students to develop self-awareness and develop into creative and professional leaders. Students complete sessions in TAO Connect, an evidence-based mental health resource, in order to identify the stressors they have and how to mitigate those stressors. Through attendance at wellness convocations, students familiarize themselves with resources available through College and University programs to support their well-being. Student organizations also offer activities such as the Resiliency and Grit workshop dedicated to practicing self-care activities. **[4Q UHCOP Wellness Support Examples]**

Exposure to creative thinking and examples of how to apply them in patient care and research is provided throughout the co-curriculum. The annual Rho Chi Boblitt Lecture features a speaker discussing creative problem-solving in health care. The P2 UHCOP research showcase introduces students to faculty research, followed by a research roundtable for networking and mentorship opportunities. The Student College of Clinical Pharmacy (SCCP) chapter also partners with faculty researchers for student engagement and project opportunities.

As described above, the foundation of leadership is introduced at NSO and integrated throughout the program. Each year, the PLS James McCarty Lecture invites a pharmacy innovator to share their experience in leading change and inspiring others to meet the challenges faced in delivering health care. Student organizations provide opportunities to hone leadership skills through events such as the Presidents' Retreat and leadership workshops held by PLS. Students achieve national involvement through opportunities such as the APhA-ASP Summer Leadership Institute or the National Community Pharmacists Association (NCPA) Pharmacy Ownership and Leadership Academy. Students are also encouraged to take on leadership roles in student organizations and/or College committees. The College's 24 student organizations provide bountiful, diverse opportunities for developing leadership skills.

Agents of Change and Ethical Purpose

Co-curricular activity regarding interpretation of Oath of a Pharmacist serves as a foundation for embracing ethical purpose. Courses such as Introduction to the Health Care System, Pharmacoeconomics & Hospital Management, and Ambulatory Clinical Practice Management provide students with knowledge of factors impacting the delivery of patient care. Other courses such as Social, Behavioral & Communication Aspects of Pharmacy Practice, and Leadership and Principles of IPE, provide students with tools to purposefully interact with patients, collaborate with health care team members and develop their self-awareness and leadership skills to best support patient care. Capstone course Complex Problems challenges students to apply these lessons to multifaceted scenarios and develop innovative solutions to address the needs set forth in the scenarios. **[4P Complex Problems Examples]**

Assessment

A variety of improvements have been implemented over the years based on evaluations, feedback and opportunities for growth. For example, snapshot reflections of co-curricular requirements are reviewed for overall student impressions and concerns. The P1 CV review was adjusted to provide CV examples that were more reflective of a pharmacy student and not an established professional. In assessing baseline leadership strengths, PLS originally utilized the DOPE Bird 4 personality test but found it had limited resources for continued leadership development. In 2022, the GiANT leadership assessment replaced the previous test due to the more robust workshop opportunities PLS could provide for student leadership development. For student self-awareness on resiliency the College originally utilized the SCORE program but due to no improvement in perceived stress scores, the College identified another platform (TAO Connect) to provide students with wellbeing support resources. Within the curriculum, EQ was originally taught as a concept in the Leadership and Principles of IPE course. Through analysis of course exams and student evaluations, it became evident that students had difficulty translating the material to foster their personal growth. The course was modified so students complete their personal EQ assessment and then can connect the concepts with their results to create meaningful growth goals. The results were so well received that this past year the EQ.2 assessment was piloted to be given a second time at the end of the Complex Problems course to observe student improvement and APPE-readiness.

Innovations and Notable Achievements

Student leadership has always been a strength at UHCOP. The purposeful design of a leadership course in the integrated curriculum was developed to ensure all students have a solid foundation in all levels of leadership. Several of our student organizations have been nationally recognized for chapters of the year. Numerous students have served in national and regional leadership roles. Creative initiatives such as the APhA-ASP Project IMPACT:Diabetes and the PLS Leadership Challenge have received national accolades. Each year, at least one pharmacy student participates in the Albert Schweitzer Fellowship where they design and participate in innovative programming to serve vulnerable populations. Through collaborations with faculty and preceptors, UHCOP students presented over 40 posters at state, regional and national meetings in 2023.

AACP Survey Data

Overall, the graduating student, preceptor and alumni data all were above 80% the agrees or strongly disagrees cutoff (> 20% disagree or strongly disagrees) utilized in the College's Programmatic Assessment. Although it may be a onetime decline, in the 2023 graduating student survey number 21 "develop new ideas and approaches to practice" was > 5% below our peers and national averages. **[4R Std 4 AACP Survey]**

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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	Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it	• Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise

	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.	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.	compliance does not exist or has not yet been initiated **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

   [TEXT BOX] [1,000 character limit, including spaces]

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

Subsection IIA: Planning and Organization

Standard No. 5: Eligibility and Reporting Requirements: The program meets all stated degree-granting eligibility and reporting requirements.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

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

    [5A Chancellor-Org Chart]

    [5A2 President's Office]

    [5A3 ProvostDeans_OrgChart]

    [5A4 UHCOP Org Chart]

☑ Document(s) verifying institutional accreditation

    [5B SACS 2018 Reaffirmation Letter]

    [5B2 SACS Institutional Details]

☑ Documents verifying legal authority to offer/award the Doctor of Pharmacy degree

    [5C Texas Education Code Section 111.01]

    [5C2 Texas Education Code Section 111.31]

☑ Complete institutional accreditation reports identifying any applicable deficiencies

    [5D SACS 2018 UH Focused Report]

    [5D2 SACSCOC December 2018 actions UH]

☑ 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

Optional Documentation and Data:

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

    [5E Description of Level of Autonomy]

    [5F UHCOP Bylaws.9.19.2023]

    [5G 2023 Health 2 Building Floor Plans]

    [5H Constitution of the Faculty Senate 04.06.23]

[5I UHCOP Faculty Serving on University Committees 2019-2024]

[5J Programmatic Assessment Plan Table]

[5K UH Faculty Handbook Current]

[5L Guidelines on Faculty and Staff Recruitment and Hiring]

[5M UH Provost's Faculty Annual Perforrmance Review Policy.pdf]

[5N PPS_Dept_Bylaws_2022]

[5O Research Centers and Institutes]

[5P PharmD Admissions Requirements]

[5Q 2023-2024 UHCOP COMMITTEES ROSTER.pdf]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
5.1. Autonomy – The academic unit offering the Doctor of Pharmacy program is an autonomous unit organized as a college or school of pharmacy (within a university or as an independent entity). This includes autonomy to manage the professional program within stated policies and procedures, as well as applicable state and federal regulations.	✓	○	○
5.2. Legal empowerment – The college or school is legally empowered to offer and award the Doctor of Pharmacy degree.	✓	○	○
5.3. Dean's leadership – The college or school is led by a dean, who serves as the chief administrative and academic officer of the college or school and is responsible for ensuring that all accreditation requirements of ACPE are met.	✓	○	○
5.4. Regional/institutional accreditation – The institution housing the college or school, or the independent college or school, has (or, in the case of new programs, is seeking) full accreditation by a regional/institutional accreditation agency recognized by the U.S. Department of Education.	✓	○	○
5.5. Regional/institutional accreditation actions – The college or school reports to ACPE within 30 days any issue identified in regional/institutional accreditation actions that may have a negative impact on the quality of the professional degree program and compliance with ACPE standards.	✓	○	○
5.6. Substantive change – The dean promptly reports substantive changes in organizational structure and/or processes (including financial factors) to ACPE for the purpose of evaluation of their impact on programmatic quality.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how the college or school participates in the governance of the university/institution (if applicable).

☑ Describe how the autonomy of the college or school is assured and maintained.

☑ Describe how the college or school collaborates with university officials to secure adequate resources to effectively deliver the program and comply with all accreditation standards.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

The University of Houston is one of four universities within the University of Houston System. All four universities are governed by a single Board of Regents **[5A Chancellor-Org Chart] [5A2 President's Office]**. The Chancellor of the

University of Houston System also serves as President of the system flagship institution, the University of Houston **[5A2 President's Office]**. In the organizational structure, UHCOP is an autonomous unit within the University structure and is led by Dean F. Lamar Pritchard, PhD, RPh, who reports to the Senior Vice President for Academic Affairs and Provost **[5A4 UHCOP Org Chart] [5E Description of Level of Autonomy]**. The Senior Vice President of Academic Affairs and Provost also holds the appointment of Senior Vice Chancellor of the University of Houston System. UHCOP is one of seventeen academic colleges within the University. Deans of all colleges report to the Senior Vice President for Academic Affairs and Provost and attend a monthly meeting of the University Council of Deans chaired by the Senior Vice President of Academic Affairs and Provost. Furthermore, the Dean meets with the Senior Vice President of Academic Affairs and Provost regularly to discuss specific issues pertaining to UHCOP. As needed, the Dean also meets with the Chancellor and the Vice President for Research to request research support for new and existing faculty and the College Research Institutes and Centers.

The interaction of the Dean with the President's Cabinet has proved useful as indicated by the level of support to the College in matters of teaching, research, personnel, and physical infrastructure. Dean Pritchard and the UHCOP Executive Director of Business Operations (EDBO) work at the administrative level to manage and secure adequate financial, physical (teaching and research), faculty, staff, student, practice site, preceptor, library, technology, and administrative resources. Resources are allocated with advice from UHCOP Executive Council Leadership team **[5F UHCOP Bylaws.9.19.2023]** and faculty input to meet the Accreditation Council for Pharmacy Education (ACPE) standards. For example, UHCOP moved into its current home in the Health 2 building in 2017, initially occupying five floors and 157,000 sq. ft. of space for research and patient care disciplines **[5G 2023 Health 2 Building Floor Plans]**. These facilities include classrooms, lecture halls, a multipurpose room, and pharmacy skills focused instructional laboratories, which are instrumental in delivery of the PharmD curriculum. Spaces within the College's Health 2 building also support the academic and non-academic needs of the student body, including an open lounge, break room/kitchen, small group study rooms, a quiet study room, and ample study carrels/niches. Recently, UHCOP has expanded to the 9th floor of the Health 2 building to house the Prescription Drug Misuse Education and Research (PREMIER) Center.

UHCOP participates in the governance of the University in accordance with university policies and procedures through shared governance between faculty, administration, and students. Faculty participation in university governance occurs through the Faculty Senate **[5H Constitution of the Faculty Senate 04.06.23]**, which provides a framework for cooperation and communication between UH faculty and the administration. The Faculty Senate, together with other University constituencies, work to achieve the common vision of excellence for the University. The Senate allows each faculty member opportunities to develop academic policies, establish performance standards, and protect academic freedom, thus having primary responsibility for curricular matters and degree programs. The Faculty Senate provides a venue whereby representatives can offer recommendations to the administration regarding the academic and operational improvement of the university as well as matters concerning the improvement of the general welfare of the faculty. Correspondingly, the Faculty Senate provides the means whereby the administration can refer academic, operational, or common interest matters to a body representing the entire faculty. UHCOP has seven seats on the Faculty Senate and senators are elected by the faculty to represent the College and the faculty as a whole, in compliance with the Constitution of the Faculty Senate. In addition to the representation on the Faculty Senate, UHCOP faculty routinely serve on university committees and task forces such as the Institutional Animal Care and Use Committee (IACUC), Institutional Review-Board and Protection of Human Subjects Committee, University Research Council, University Biosafety Committee, University Radiation Safety Committee, Promotion and Tenure Committee (P&T), University Grievance Committee, University Intellectual Property Committee, and University Conflict of Interest Committee. **[5I UHCOP Faculty Serving on University Committees 2019-2024]** Faculty are also appointed at the university level to various search committees for open positions. Examples include the search for Vice Chancellor/Vice President of Research for the UH System as well as Vice Chancellor/Vice President for Academic Affairs/Provost. On numerous occasions, faculty have been appointed by the provost or other leaders within the university to special taskforces as they are formed.

UHCOP maintains an autonomous relationship within the bounds of UH policies and procedures as well as the State of Texas and federal regulations. This autonomy extends to various areas, including programmatic assessment, curriculum

development, and policy formulation. UHCOP evaluates its program using measurement tools outlined in the Programmatic Assessment Plan **[5J Programmatic Assessment Plan]** The UHCOP Curriculum Committee directly oversees the curriculum, which UHCOP has the autonomy to develop, maintain, and deliver within the framework of UH and the University of Houston System. While adhering to the University's bylaws, policies, and procedures as stated in the UH Faculty Handbook **[5K UH Faculty Handbook Current]**, UHCOP also has additional policies and procedures outlined in the UHCOP Bylaws **[5F UHCOP Bylaws.9.19.2023]**. Student admissions and progression policies fall under the purview of the UHCOP PharmD Admissions and Progression Committee, which reports to and makes recommendations to the Dean. Regarding faculty and staff, UHCOP follows University guidelines for faculty and staff recruitment but exercises full autonomy in candidate selection **[5L Guidelines on Faculty and Staff Recruitment and Hiring]**. Faculty evaluations occur within specific departments, ensuring alignment with UHCOP-specific programs. For example, annual faculty evaluations are conducted by department chairs in the departments of Pharmacy Practice and Translational Research (PPTR) and Pharmaceutical Health Outcomes and Policies (PHOP), as well as jointly in the Department of Pharmacological and Pharmaceutical Sciences (PPS) by the department chair and the PPS Faculty Evaluation Committee **[5N PPS_Dept_Bylaws_2022]**.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring. **[TEXT BOX] [1,000 character limit, including spaces]**

Standard No. 6: College or School Vision, Mission, and Goals: The college or school publishes statements of its vision, mission, and goals.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Vision, mission and goal statements for the college/school, parent institution, and department/division

[6A Mission, Vision & Values - University of Houston]

[6B UHCOP Vision, Mission Goals]

[6C PPTR Vision, Mission, and Values]

[6D PPS Vision, Mission, and Values]

[6E PHOP Vision, Mission and Core Values]

Optional Documentation and Data:

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

[6F Residency Showcase - University of Houston]

[6G Academic Pharmacy Fellowship - University of Houston]

[6H I.D. Fellowship]

[6I MS Pharmacy Leadership and Admin]

[6J PharmD-MBA - University of Houston]

[6K PharmD_PhD_Program_UH]

[6L MS PLA-residency2022-program information]

[6M Academic Pharmacy Fellowship Programs to Improve Faculty Pipeline AJPE 2023]

[6N Advocacy Appendix 2024]

[6O CVVO for Pharmacy Summer Camp 2021 Handout]

[6P Research Poster Appendix_Student Posters 2017-present]

[6Q Student Leadership Appendix_Pharm.D.-accolades]

[6R UHCOP PREMIER Center Pharmacist Continuing Education]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program's compliance with the requirements of the standard and accompanying guidelines:

	S	N.I.	U
6.1. College or school vision and mission – These statements are compatible with the vision and mission of the university in which the college or school operates.	✓	○	○
6.2. Commitment to educational outcomes – The mission statement is consistent with a commitment to the achievement of the Educational Outcomes (Standards 1–4).	✓	○	○

6.3. Education, scholarship, service, and practice – The statements address the college or school's commitment to professional education, research and scholarship, professional and community service, pharmacy practice, and continuing professional development.	✓	○	○
6.4. Consistency of initiatives – All program initiatives are consistent with the college or school's vision, mission, and goals.	✓	○	○
6.5. Subunit goals and objectives alignment – If the college or school organizes its faculty into subunits, the subunit goals are aligned with those of the college or school.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how the college or school's mission is aligned with the mission of the institution.

☑ Describe how the mission and associated goals[1] address education, research/scholarship, service, and practice and provide the basis for strategic planning.

☑ Describe how the mission and associated goals[2] are developed and approved with the involvement of various stakeholders, such as, faculty, students, preceptors, alumni, etc.

☑ Describe how and where the mission statement is published and communicated.

☑ Describe how the college or school promotes initiatives and programs that specifically advance its stated mission.

☑ Describe 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.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

The UHCOP Vision, Values, and Mission statements and the academic departments' mission and vision statements are consistent with and parallel the UH Mission, Vision, and Values. The UHCOP Vision, Mission and Goals statements are crafted specifically for the education and preparation of professional pharmacy students, future pharmacy practitioners, and graduate students in various fields of pharmacy and research and support the UH Misson, Vision and Values specifically in areas of diversity, transformational change, innovation, advocacy and collaboration. The College's vision and mission statements focus on the college continuing to strive for excellence in education and research so that our efforts ultimately serve diverse communities and improve health and quality of life in a transformative way. The seven outcomes (or long-term goals) that make up our strategic imperatives detail our plan to execute our mission and vision statements. Serving others by improving health and quality of life remains in the forefront of everything the College does, ensuring a steady course in achieving its overall vision and mission.

Development of College Mission, Vision, and Goals
The mission, vision, values and strategic imperatives were developed and approved as part of the Vision 2030 strategic planning process, which included the involvement of various stakeholders such as faculty, students, preceptors and alumni. The mission, vision and values were revised and adopted in December 2021. The College's Strategic Planning Committee began work on Vision 2030 in October 2019, and the entire process took approximately 22 months to complete, with progress slowed due to the COVID pandemic.

Additional groups of college stakeholders participated in the strategic planning process. These groups included the College's staff, the general Pharmacy student body, the Dean's Student Advisory Council, and the Pharmacy Student Council. The College's alumni and Dean's Advisory Council were also invited to participate in the process during special meetings, and ideas and comments were solicited from these groups throughout the entire planning process. The College's

mission, vision, and values are published in the UHCOP Pharm.D. Student Handbook, which is reviewed at each NSO and New Faculty Orientation and published on the College's website.

Initiatives and Programs Advancing the College Mission
Developing and Supporting Student Leaders. UHCOP strives to instill in students the knowledge and skills to be leaders in the pharmacy profession and active outside of the College. In the 2022-23 academic year alone, UHCOP students secured first-place awards or top finalist honors in a range of live and report-based competitions, including patient counseling, clinical skills, educational outreach, pharmacy leadership, and case studies, at the national, regional, and state levels. In the same academic year, UHCOP students were elected or appointed to leadership positions at the national, regional, or state level in organizations such as the American Society of Health-System Pharmacists (ASHP) Pharmacy Student Forum, the Texas Pharmacy Association-Academy of Student Pharmacists (TPA-ASP), and the Student National Pharmaceutical Association (SNPhA). Our students continually work within student organizations to provide community wellness events and outreach.

Professional Pharmacy Certificate in Hispanic Healthcare. UHCOP and the UH Hispanic Studies department in the College of Liberal Arts and Social Sciences have combined their resources to provide a multifaceted approach to training the next generation of pharmacists to provide culturally and linguistically competent health care. This 18-credit-hour certificate program includes a series of two core courses (six hours total) in mastery of the Spanish language and culture needed to interact and work with Hispanic communities. This includes some specific health and medical experiential learning and practice through fieldwork and/or public service. These two core courses are followed by 12 hours of APPEs in health care settings serving predominantly Hispanic populations. This program capitalizes on both the assets of UH and the needs of the Houston community, state, and beyond and will translate into enhanced quality of care for Hispanic patients not only in Houston and surrounding areas but throughout the state of Texas, nation and the world.

APPE and IPPE Clinical Interventions. Pharmacy students log about 9,000 patient care interventions in CORE ELMS annually, documenting their impact on patient medication usage and outcomes for thousands of patients. Of the 9,000 interventions, about 2,000 occur during IPPEs, with the remaining interventions occurring during APPE rotations.

Comprehensive Assessment Process. Guided by the College's mission, we have comprehensive assessment plans that utilize direct and indirect measures from various activities to guide continuous quality improvement for the College. The Programmatic Assessment Plan evaluates aspects of the program including organizational governance, culture and process that drive the program. The PPSLO Assessment Plan evaluates student learning as well as the foundation and structure of the curriculum.

Legislative Advocacy for the College and Profession. Within our college, students and faculty actively promote the value of pharmacy to various stakeholders, including consumers, patients, policymakers and the media. They engage in diverse advocacy events and activities, such as mandatory attendance at advocacy co-curricular/convocation sessions for P1, P2 and P3 classes. Additionally, students have the option to participate in Texas Pharmacy Day at the Dome organized by TPA. During this biennial event, pharmacy students, pharmacists and pharmacy technicians meet with lawmakers at the Texas State Capitol in Austin to discuss legal and regulatory matters relevant to the pharmacy profession and patient care. Moreover, student organizations within the college host advocacy-focused meetings. For example, the UHCOP Chapter of NCPA recently organized an advocacy meeting featuring an independent pharmacy owner who also serves as the 2023-24 TPA Immediate Past President. Beyond legislative advocacy, the college and student organizations have held convocations and outreach activities related to pharmaceutical industry litigation, COVID-19 vaccine hesitancy, and enhancing public awareness of the pharmacy profession's crucial role in health care.

Pharmacist Postgraduate Professional Education and Training Initiatives
Post-graduate Residency/Fellowship Programs.
Through formal affiliations with various TMC institutions and other health care organizations, the College provides several post-graduate residency and fellowship opportunities. Notably, in 2017, the college created and launched the Fellowship in Academia training program—a 12-month postgraduate initiative designed to prepare pharmacists for careers in pharmacy education. The program encompasses training in teaching, curriculum development, college service,

mentoring, scholarship, and clinical practice, and has become the blueprint for academic fellowship programs at other colleges of pharmacy throughout the country. **[6M - Academic Pharmacy Fellowship Programs to Improve Faculty Pipeline AJPE 2023]** Academic fellows engage in teaching, service responsibilities, clinical rotations, and a longitudinal clinic where they gain experience in patient care and student precepting. The program aims to provide fellows with junior faculty experience, enabling a seamless transition into future faculty roles. Now in its seventh year, the academic fellowship has graduated twelve fellows, each contributing to pharmacy faculty positions across different colleges. Our college's faculty members actively serve as preceptors and mentors, furthering our commitment to enhancing teaching practices and cultivating future clinicians to strengthen the faculty pipeline.

MS/Pharmacy Leadership and Administration. This 24-month program is focused on training the next generation of pharmacy leaders through a Master of Science in Pharmacy Leadership and Administration (MSPLA) to PGY1 and PGY2 residents within TMC who are concurrently in a Health-System Pharmacy administration and Leadership (HSPAL) residency program.

Pharm.D./MBA Degree Program. This program was established in Fall 2017 with the UH Bauer College of Business to provide additional business, administrative and leadership opportunities for students.

Pharm.D./Ph.D. Degree Program. This is a consecutive degree program **[6K PharmD_PhD_Program_UH]** designed for pharmacy students who are seeking an integrated program in the clinical and basic sciences preparing them for a career in academia or research.

Pharmacist CE Opportunities. The college also promotes life-long learning through its Continuing Pharmacy Education (CPE) programming for pharmacists. Professional development opportunities include an annual Preceptor Continuing Education Conference. This ACPE credit is provided through the Texas Society of Health-System Pharmacists (TSHP) and covers topics such as best practices for preceptor-student interactions and Texas pharmacy law updates. In 2020, the OEP partnered with the college's PREMIER center to widen this annual professional development event to include three hours of preceptor CE and one additional credit hour related to prescribing and monitoring controlled substances, a Texas Board of Pharmacy mandatory CE requirement for all pharmacists. Additionally, the PREMIER Center hosts a wide variety of homestudy CE programs available for pharmacists to take online. **[6R UHCOP PREMIER Center Pharmacist Continuing Education]** All of this CE programming is available at no cost to pharmacists and is supported by a grant from the Texas Health and Human Services Commission. In FY2022, the college provided over 2,000 hours of CPE credits for pharmacists.

Interprofessional Training Initiatives
The college also supports the development of pharmacy graduates trained with other health care professionals to provide patient care through a robust interprofessional curriculum. The foundation for interprofessional education begins P1 Fall with training in TeamSTEPPS, introducing students to interprofessional communication and team building strategies. P1 Spring includes an interprofessional case-based activity where pharmacy students collaborate on a patient case with medical, nursing and optometry students utilizing their communication strategies. They also learn about their roles and responsibilities as a pharmacist and how health care professionals can work together to achieve better patient outcomes.

In P2, students begin their IPPEs with a 4-week community-based experience, a patient safety case-based IPE with medical and nursing students, and their first interprofessional experience in an ambulatory clinic with a UHCOP faculty member or fellow. For this ambulatory IPE, students complete a 4-hour clinic visit at either HOMES or Vecino Health Centers with UHCOP preceptors. At their ambulatory clinic-based IPE, P2 students gain direct patient care experience with other health care professionals while having a pharmacy preceptor immediately available. P3 continues to build on this framework with the completion of a 4-week Institutional IPPE that includes a 2-hour shadowing IPE. P3 students also serve as the pharmacy representative on an interprofessional team with medical students and BCM preceptors. On this interprofessional team, P3 students visit three to four patients in their homes, helping to deliver health care to Houston area residents who might not otherwise receive it. This program is available through Harris Health. Finally, P4 students complete their seven APPE rotations, most of which have an interprofessional component. They also complete a 2-hour

Crisis Management IPE with senior-level medical and nursing students. This Crisis Management IPE focuses on delivery of care in a hospital-based setting and communication strategies for effective teamwork.

Elective Programs

The Geriatrics elective is open to interested students and includes an interprofessional component. Through the Southeast Texas Geriatric Workforce Enhancement Program, our faculty has actively supported the Geriatrics elective since 2019. Over 400 P2 students have participated in this summer elective, receiving instruction from geriatrics experts. The elective culminates in an interprofessional education simulation focused on recognizing elder abuse. Additionally, our faculty has developed CE programs for providers across Texas, covering topics such as pain management, opioid prescribing, polypharmacy and best practices for older adults.

Notable Achievements

Student Leadership Initiatives through Student Organization Activities, Community Wellness Events, and Convocations. In AY 2019-20, UHCOP student-pharmacists delivered more than 12,000 service encounters at health fairs and events, including 7,000 encounters through patient care activities and over 5,000 health education activities (HEAs). COVID-19 restrictions curtailed these activities. However, during times of social distancing, the students and faculty assisted in providing over 69,000 COVID-19 vaccines to patients in the Greater Houston Area through the COVID Vaccine Volunteer Opportunity program. Additionally, faculty and students assisted in COVID-19 immunizations through their respective experiential and practice sites. Faculty and students in the Rio Grande Valley (RGV) administered approximately 30,0000 COVID-19 vaccines alongside the DHR Health pharmacy team. In-person service-learning events resumed in May 2022 and continues to be a rebuilding process. During AY 2022-23, UHCOP student-pharmacists provided more than 3,600 service encounters including over 1,900 patient care activities and 1,600 healthcare education activities.

Student Collaborations and Poster Presentations on Research with Faculty and Preceptors at the ASHP Mid-Year Meetings. Pharm.D. students are encouraged and mentored to present research projects at professional and scientific meetings at local, state and national levels. Student achievements include first place in the 2023 TSHP Research & Education Foundation Student Poster Competition, first place in the 2023 SNPhA National Convention, and first in Texas/Top 5 in the US. in total number of posters (42) accepted for presentation at the 2023 ASHP Mid-year Clinical Meeting. This is the second consecutive year students achieved a statewide top spot at Mid-year for number of research abstracts presented. **[6P Research Poster Appendix_Student Posters 2017-present]**

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

Standard No. 7: Strategic Plan: The college or school develops, utilizes, assesses, and revises on an ongoing basis a strategic plan that includes tactics to advance its vision, mission, and goals.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ College or school's strategic planning documents

    [7A UHCOP Strategic Plan FINAL high]

    [7B Strategic Plan Creation and Implementation Process Vision 2030]

    [7C Strategic Imperatives 1-7]

Data Views and Standardized Tables:

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

☑ Questions –11-12 from Faculty Survey

    [7D Standard 7 FSQ_11,12]

Optional Documentation and Data:

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

    [7E UH Strategic Plan]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program's compliance with the requirements of the standard and accompanying guidelines:

	S	N.I.	U
7.1. Inclusive process – The strategic plan is developed through an inclusive process, including faculty, staff, students, preceptors, practitioners, and other relevant constituents, and is disseminated in summary form to key stakeholders.	✓	○	○
7.2. Appropriate resources – Elements within the strategic plan are appropriately resourced and have the support of the university administration as needed for implementation.	✓	○	○
7.3. Substantive change planning – Substantive programmatic changes contemplated by the college or school are linked to its ongoing strategic planning process.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe 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.

☑ Describe how the college or school's strategic plan aligns with the University or institutional strategic plan.

☑ Describe how the strategic plan facilitates the achievement of mission-based (long-term) goals.

☑ Describe 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.

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

☑ Describe 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.

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

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

The college is guided by a dynamic strategic plan that was approved and ratified in December 2021, creating the new Vision 2030 Strategic Plan. **[7A UHCOP Strategic Plan FINAL high]** The developmental process of establishing the Vision 2030 Strategic Plan officially started in October 2019 and was developed through an inclusive process involving faculty, staff, students, preceptors, practitioners and other relevant constituents. The initial plan was to complete the strategic plan by December 2020 to be implemented January 2021; however, due to COVID-19, the shift of focus to teaching and learning in a virtual environment as well as the health care and communication challenges that the pandemic created, we completed our strategic plan about a year later than we had planned.

Our college's strategic imperatives encompass a multifaceted approach and align with the University's Strategic Plan. **[7E UH Strategic Plan]** Strategic Imperatives 1, 5 and 6 include securing a physical presence in TMC, advocating for funding and maintaining national quality metrics. These imperatives align with our overarching goals for research excellence and student success. By establishing and maintaining our footprint in TMC, we position ourselves for nationally competitive research, aligning with UH Goal 2: Nationally Competitive Research. Simultaneously, we foster collaboration with RGV, particularly in health disparities research, further supporting UH Goal 2. Strengthening our research expertise across various domains is essential, as is enhancing the delivery of pharmacy education to support UH Goal 1: Student Success. Additionally, we continue to advocate for funding at both the university and state levels, which is in line with UH Goal 5: Competitive Funding. To ensure excellence, we strive to improve and maintain national quality metrics, directly contributing to UH Goal 1: Student Success. Lastly, our commitment to providing cutting-edge resources and technological advancements for our students, faculty, and staff aligns with the ambitious goals of a Tier 1 Pharmacy College.

The "Vision 2030" Strategic Plan facilitates the achievements of mission-based, long-term goals by defining our college's vision of the future; mission statement; values that determine decisions and daily operations; political, economic and social environment (demographic and attitudes, economics, competitive trends as well as federal, state, and local public policy); strengths, weaknesses, opportunities and threats (SWOT) within our environment; and our strategy (strategic imperatives along with overarching goals) to achieve our future goals and move the college forward. Vision 2030 incorporates timelines for action and measures, identifies responsible parties to oversee the process, identifies resources needed to achieve the goals, and describes mechanisms for ongoing monitoring and reporting of progress. Each of our strategic imperatives aligns with at least one of the university's strategic plan goals. Finally, the Strategic Planning Committee (SPC) monitors, evaluates and documents the progress in achieving the college's goals through council and committee meetings.

The progress of each strategic initiative is tracked using an MS Excel table designed as a living document. The college's Strategic Planning Committee (SPC) and Executive Council Leaders (ECL) team have worked together to assign the responsibilities of meeting the short-term, mid-term and long-term goals associated with each strategic imperative to the appropriate individuals and/or committees and groups. Currently, the Executive Associate Dean, strategic plan team leads, and ECL are responsible for progress tracking and reporting. This is done through the Strategic Plan Tracking document that is updated by the SPC and Executive Associate Dean several times throughout

the year. These documents are housed in our college-wide Microsoft Teams group called Mission Control, which faculty and staff can access at any point. As the college further refines and develops its PAP, data for assessing updates on the college's strategic initiatives will be collected and maintained through that scheduled assessment process.

The college provides updates and reports to college constituents to maintain focus and momentum surrounding Vision 2030. These updates occur during faculty meetings, Dean's Advisory Council (DAC) meetings, Dean's meetings with the Provost, and through emails from the Dean to faculty, staff, and students. Updates on the strategic initiatives are also communicated through the college's *Interactions* publication (twice per year), Interactions Refill email newsletter (every other month), as well as in publications presented at the Texas Pharmacy Congress (TPC) meetings (quarterly). Together, these measures are necessary for the college to achieve each of its seven strategic imperatives.

Each year, the faculty and staff complete an online survey to provide potential charges for the college to work on during the upcoming year. The ECL meets to discuss and prioritize charges that best align with the current strategic plan. Appropriate parties and committees are then assigned to the charges. Much effort is made to identify charges that will help the college move closer to achieving its strategic imperatives. If a new taskforce is deemed necessary to focus on accomplishing the initiatives, the ECL has input into creating such task forces.

Notable Achievements

In line with Strategic Imperative 4: Enhance Innovation in the Delivery of Pharmacy Education, the Scholarship of Teaching and Learning (SoTL) Taskforce was established. Its mission is to create an infrastructure that seamlessly integrates innovative teaching methods and SoTL practices, thereby enhancing the professional curriculum. Since its inception in December 2022, the SoTL Taskforce has achieved several milestones, including the establishment of a journal club and seminar series aimed at providing faculty development opportunities in the field of SoTL. For Strategic Imperative 2, the UHCOP-DHIRD Collaboration Committee was formed in Fall 2021 to strengthen research infrastructure, administration, training and resources. The committee's primary focus is to foster collaboration between UH and RGV, particularly in health disparities research. The committee has made significant progress, including the creation of contractual agreements, identification of research interests for both UH main faculty and DHR Health, and the provision of research-related resources and training for clinical faculty. Additionally, a collaborative clinical bariatric study between UH and DHR will be starting soon. The faculty have been integral in developing the college's Vision 2030 Strategic Plan as was reflected in the AACP faculty surveys over the past four years.

From 2019 to 2023, the UHCOP AACP Faculty Survey achieved an average response rate of 70.50% (with a minimum of 62.50% and a maximum of 74.20%). During the same period, the national response rate stood at 75.98% (ranging from 74.19% to 80.23%). When asked if strategic planning at the college was effective, 91.78% of UHCOP faculty either agreed or strongly agreed. In comparison, only 81.04% of national respondents expressed the same sentiment (with a range of 80.66% to 81.80%). Additionally, when queried about their involvement in the development of the current strategic plan, 93.78% of UHCOP faculty agreed or strongly agreed that they were involved in the process. This percentage exceeded the national average of 86.44% (ranging from 85.51% to 87.39%).

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/or** • Factors exist that compromise current compliance; an appropriate plan exists to	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	• 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

	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.	addressing the factors and will bring the program into compliance.	
☑ Compliant	☐ Compliant with Monitoring	☐ Partially Compliant	☐ Non Compliant

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

[TEXT BOX] [1,000 character limit, including spaces]

Standard No. 8: Organization and Governance: The college or school is organized and staffed to advance its vision and facilitate the accomplishment of its mission and goals.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ College or school organizational chart

       [8A uhcop-orgchart-5-24]

       [8B Chancellor-Org-Chart2024]

       [8B2 UH Leadership with Deans]

☑ Job descriptions and responsibilities for college or school Dean and other administrative leadership team members

       [8C Job Descriptions - UH Deans and Department Chairs]

☑ Faculty Handbook and/or written bylaws and policies and procedures of college or school

       [8D UH Faculty Handbook Current]

       [8E UHCOP-bylaws-4-1-2022]

☑ List of committees with their members and designated charges

       [8F 2023-24-uhcop-committees-roster-1-31-24]

☑ College, school, or university policies and procedures that address systems failures, data security and backup, and contingency planning

       [8G College_of_Pharmacy_Continuity of Operations Plan - all 2023-24]

       [8H IT COP Disaster Recovery2024Final]

       [8I UH College Division Responsibilities for Information Technology]

       [8J college-division-coop-liaison-instruction-2023]

       [8K department-coop-instructions-2023]

       [8L emergency-relocation-position-info-sheet-2022-pdf]

☑ Curriculum Vitae of the Dean and other administrative leadership team members

       [Pritchard_F. Lamar_CV_2024] [Pitman_Elizabeth_CV_Feb2024] [Coyle_Liz_CV_Feb2024] [Hussain_Tahir_CV_2024]

       [Nguyen_Kimberly_CV_Feb2024] [Ordonez_Nancy_CV_Feb2024] [Ozuna_Ronnie_CV_2024]

       [Eriksen_Jason_CV_Feb2024] [Dzwonek_Brian_CV_Feb2024]

☑ Evidence of faculty participation in university governance

       [8M UHCOP Faculty Governance Representatives 2024]

Data Views and Standardized Tables:

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

[8N Standard 8 FSQ_1,2,5,10_ASQ_2]

☑ AACP Standardized Survey: Faculty – Questions 1, 2, 5, 10

☑ AACP Standardized Survey: Alumni – Question 2

☑ Table: Distribution of Full-Time faculty by Department and Rank

[8O 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

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	N.I.
8.1. Leadership collaboration – University leadership and the college or school dean collaborate to advance the program's vision and mission and to meet ACPE accreditation standards. The dean has direct access to the university administrator(s) with ultimate responsibility for the program.	✓	○	○
8.2. Qualified dean – The dean is qualified to provide leadership in pharmacy professional education and practice, research and scholarship, and professional and community service.	✓	○	○
8.3. Qualified administrative team – The dean and other college or school administrative leaders have credentials and experience that have prepared them for their respective roles and collectively have the needed backgrounds to effectively manage the educational program.	✓	○	○
8.4. Dean's other substantial administrative responsibilities – If the dean is assigned other substantial administrative responsibilities, the university ensures adequate resources to support the effective administration of the affairs of the college or school.	✓	○	○
8.5. Authority, collegiality, and resources – The college or school administration has defined lines of authority and responsibility, fosters organizational unit collegiality and effectiveness, and allocates resources appropriately.	✓	○	○
8.6. College or school participation in university governance – College or school administrators and faculty are effectively represented in the governance of the university, in accordance with its policies and procedures.	✓	○	○
8.7. Faculty participation in college or school governance – The college or school uses updated, published documents, such as bylaws, policies, and procedures, to ensure faculty participation in the governance of the college or school.	✓	○	○
8.8. Systems failures – The college or school has comprehensive policies and procedures that address potential systems failures, including technical, administrative, and curricular failures.	✓	○	○
8.9. Alternate pathway equitability* – The college or school ensures that any alternative pathways to the Doctor of Pharmacy degree are equitably resourced and integrated into the college or school's regular administrative structures, policies, and procedures, including planning, oversight, and evaluation.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how the college or school's organization and administration and the process for ongoing evaluation of the effectiveness of each operational unit.

☑ Provide 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.

☑ Describe how college or school bylaws, policies and procedures are developed and modified.

☑ Describe how the college or school's administrative leaders foster relationships that support interprofessional education and practice opportunities.

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

☑ Describe 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.

☑ Describe how the authority and responsibility of the dean ensures all expectations of the standard and guidelines are achieved.

☑ Describe how the dean interacts with and is supported by the other administrative leaders in the college or school.

☑ Describe how the dean is providing leadership to the academy at large, and advancing the pharmacy education enterprise on local, regional, and national levels.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

University Organization and College Autonomy

UHCOP is one of 17 colleges within the University. University leadership and the Dean collaborate to advance the program's vision and mission and meet ACPE accreditation standards. The Dean is Chief Executive Officer (CEO) of the college and is appointed by UH Senior Vice President for Academic Affairs and Provost with approval of the President and the University of Houston System Board of Regents.**[8A uhcop-orgchart-5-24]** Deans of all colleges report to the Senior Vice President for Academic Affairs and Provost and attend a monthly meeting of the University Council of Deans chaired by the Provost. The Dean has direct access to university administrators, with ultimate responsibility for the professional pharmacy program, and meets with the Senior Vice President for Academic Affairs and Provost on a regular basis to discuss specific issues pertaining to UHCOP. As needed, the Dean also meets with the President, Provost, and Vice President for Research to request research support for new and existing faculty and resources. The interactions between the Dean with University officers such as the Provost, Vice President for Research, and Vice President for Administration and Finance has proven useful, as indicated by the increased level of support to the college in matters pertaining to teaching, research, personnel, facilities and infrastructure. UHCOP also participates in the governance of the University in accordance with its policies and procedures through shared governance between faculty, administration and students. Faculty participation in university governance occurs through the Faculty Senate (FS)**,** which provides a framework for cooperation and communication between UH faculty and the administration. UHCOP has seven seats in the FS, and senators are elected by faculty to represent the college and faculty. UHCOP senators have taken on leadership roles for many Senate subcommittees and routinely serve on university committees and taskforces.

College Organization and Structure

The organizational structure within the college facilitates the advancement of the college's vision and continued accomplishment of its mission and goals. The structure consists of the Office of the Dean, three academic departments, Office of Research and Graduate Programs, and Office of Academic Affairs. As dictated by college bylaws, the Dean appoints associate deans, assistant deans, and directors who serve at the discretion of the Dean. **[8C Job Descriptions - UH Deans and Department Chairs]** The Executive Associate Dean (EAD) is the administrator with primary responsibilities for the entire college, serving as CEO and college representative in the absence of the Dean. The EAD oversees the Office of Development, Student and Professional Affairs, the Communications department, the IT department, and the Central Business Office. The Associate Dean for Research and Graduate Programs has responsibility for optimizing the research environment within the college and increasing research productivity, external funding and

collaborative research programs. The Associate Dean for Academic Affairs has primary responsibility for the academic affairs of the professional pharmacy program and supervises the Assistant Dean for Experiential Programs, and the Assistant Dean for Assessment and Accreditation. The Assistant Dean for Assessment and Accreditation has the primary responsibility for assessment of the College of Pharmacy. The Assistant Dean for Experiential Programs is responsible for directing and administering the experiential programs. The Assistant Dean for Graduate Programs manages the Office of Graduate Programs and is involved in the development and implementation of university and college policies related to graduate study for the college. The Assistant Dean for Student and Professional Affairs is the administrator with primary responsibility for development, implementation, and oversight of student services, student professional development, and support of the admissions process. The Assistant Dean for RGV has oversight of the RGV Satellite Program. The three academic departments of the college include Pharmacological and Pharmaceutical Sciences (PPS), Pharmacy Practice and Translational Research (PPTR), and Pharmaceutical Health Outcomes and Policy (PHOP). Department Chair roles and responsibilities are defined clearly by the college's bylaws and the University. The Dean appoints the department chairs after input from the departmental faculty. Chairs solicit faculty feedback regarding their performance and the state of the department on a yearly basis as a means of formative assessment. The Dean reviews all assistant and associate deans and department chairs both annually and every third year with input from college faculty, staff and members of their respective departments. The Dean's performance is evaluated every five years by the University Provost and every three years by college faculty and staff. The APPE/IPPE/IPE directors are faculty with part-time administrative duties. There are also several director level staff members including: EDBO, Director of Pharmacy Admissions, Director of Pharmacy Student Services, Director of Admissions and Enrollment, Director of IT Resources, Director, Pharm.D. Academic Program Management, and Director, Communications; these are full-time staff positions. The staff are evaluated annually through the university's ePerformance review process, and faculty are evaluated based on their annual faculty activity reports and via performance partnership mechanism.

Day-to-Day College Management
Overall, the Dean, Executive Associate Dean, and the Executive Director of Business Operations work at the administrative level to manage and secure adequate financial, physical (teaching and research), faculty, staff, student, practice site, preceptor, library, technology, and administrative resources. Resources are allocated with advice from the executive leadership team and faculty input to meet ACPE standards. In addition, they ensure the college's operations are performed efficiently with minimal disruption through a wide range of emergencies. All departments and areas have developed business continuity plans which provide a management process whereby the areas, departments and college can conduct their individual and overall college essential mission and functions under all threats and conditions to address potential systems failures, including technical, administrative and curricular failures. **[8G College_of_Pharmacy_Continuity of Operations Plan - all 2023-24]** In addition to departmental/division and college business continuity plans, the college also has an COPIT Disaster Recovery Plan **[8H IT COP Disaster Recovery2024Final]** in the event of an IT systems failure.

The Dean's philosophy of management is "from the bottom up," meaning that the Dean empowers faculty with the responsibility of routine college functions (e.g., comprehensive committee work on curriculum, retention, admissions, progression, budget, facilities planning, and other college related issues). Faculty members play an active role in the college's operations and policy formulation. A comprehensive committee structure **[8F 2023-2024-uhcop-committees-roster-1-31-24]** exists and involves most faculty serving on one or more committees. Students, as well as alumni, preceptors and staff, are voting members on many of the committees. Aspects related to management within the college are discussed during both the Executive Council (including ex-officio members) and Executive Council Leadership Team (Executive Council excluding ex-officio members) meetings that are held monthly to discuss issues related to their respective areas of responsibility. The Dean uses these forums to actively seek input from the college leadership teams on a variety of operational issues, as well as formal improvement recommendations. The minutes of Executive Council's monthly meetings are distributed to faculty and staff as a means of keeping an open line of communication between the leadership team and are housed in Mission Control in Microsoft Teams. The Dean also meets with the Staff Council annually. Faculty business meetings are scheduled at minimum once per semester to discuss business and matters concerning the college, but typically meetings occur monthly as they are needed to discuss ongoing affairs, i.e., self-study process, curricular revision process, and any programming or planning as needed. There is an annual two-day faculty

retreat each spring. Faculty meetings in the department are conducted by the chairs at least once a semester and as needed. The chairs are charged with meeting each faculty member to discuss their annual faculty activity report, academic and professional goals, and solicit feedback on the respective chair's performance. Within the college, committee activities are carried out under the UHCOP College Bylaws **[8E UHCOP-bylaws-4-1-2022]** which are approved and periodically revised by the faculty. Bylaw changes occur at least every two years and more often as needed. The proposed amendments and changes are published for at least two weeks prior to a regularly scheduled general faculty meeting. Approval of the proposed amendments and/or changes require a 2/3-majority vote of the voting faculty. Other non-bylaw changes or additions to college policy and/or procedures are submitted by the proposing committee/department or college unit to the faculty for their review. These changes are discussed, amended and ultimately voted on at faculty meetings. If the policies/procedures need to be approved at the University level, they are then submitted to the Graduate and Professional Studies Committee for review and ultimate approval.

Administrative Qualifications and Leadership
The credentials and experience of the Dean, along with the college administrative leaders collaborating closely with the Dean, have thoroughly prepared them for their respective roles. Except for the Associate Dean of Research and Graduate Programs, the Assistant Dean for Graduate Programs, the Assistant Dean for Assessment and Accreditation, and two of the three department chairs, all assistant and associate deans, as well as the Dean, are licensed pharmacists. Collectively, the administrative team boasts over 70 years of combined leadership experience at an assistant dean level or higher. The college demonstrates a strong commitment to leadership development, actively supporting faculty members in attending programs such as the Cougar Chairs Leadership Academy (CCLA) and the Academic Leadership Fellows Program (ALFP), offered through AACP. Additionally, the institution provides internal leadership workshops, including the UH Women in Academic Leadership Workshop, hosted by the UH Bauer College of Business, Office of Executive Development.

The Associate Dean of Research and Graduate Programs and Department Chairs have actively engaged in research related to Pharmacy and have been integral members of the UHCOP faculty for several decades. In addition to their scholarly pursuits, the Dean assumes a pivotal role in leading the pharmacy academy at large, driving advancements in pharmacy education across local, regional and national spheres. Locally, the Dean's contributions include serving on the Texas Medical Center (TMC) Strategic Planning Committee, collaborating with nine TMC institutions through the TMC Council for Health Policy, and participating on the Board for the Greater Houston Health Connect (GHHC), a health information exchange serving over 12 million lives in the Greater Houston area. Regionally, the Dean actively participates in regional National Association of Boards of Pharmacy (NABP) meetings, contributes to the Texas Pharmacy Congress (TPC), and plays a key role in the TPC's Strategic Planning Committee. Under Dean Pritchard's leadership, the University of Houston and South Texas College in McAllen established an articulation agreement to nurture future pharmacists in the Rio Grande Valley. Nationally, the Dean attends various AACP and NABP meetings, serves on the AACP Council of Deans, and contributes to multiple Resolution Committees for both NABP and AACP. His expertise extends to serving as a site visitor for ACPE and acting as a consultant and speaker for the AACP Academic Research Fellows Program. Furthermore, he has generously served as a mentor for ALFP.

Notable Achievements and Quality Improvements
With the introduction of the new curriculum, the Dean appointed a Director of Skills Laboratories to oversee the skills-based courses that run parallel with and complement the didactic curriculum. Supporting the faculty team, three instructional laboratory managers have been hired. Additionally, the college underwent an Information Technology (IT) restructuring. The newly created Director of IT Resources oversees Information Systems and Classroom Technology, leading a team of seven full-time staff members (including the director) and four student workers who contribute twenty hours per week. Notably, the team recently received a team excellence award from UHCOP's Staff Council. Furthermore, the college welcomed its first university-funded Presidential Frontier Faculty member in the PREMIER Center and PHOP in 2021. Approval for two additional faculty positions, one in pharmacology and one in medicinal chemistry, both within PPS, reflect the college's commitment to research. To bolster research infrastructure and support, a Director of Core

Research Labs and Facilities was established, overseeing critical resources such as the Mass Spectrometry and Microscopy cores. In August 2023, the college appointed an Assistant Dean of Assessment and Accreditation, reporting to the Associate Dean for Academic Affairs. The college is actively developing centers to align research efforts, including the Prescription Drug Misuse Education and Research (PREMIER) Center established in 2018, and the Center for Population Health Outcomes and Pharmacoepidemiology Education and Research (P-HOPER) founded in 2023.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

[TEXT BOX] [1,000 character limit, including spaces]

Standard No. 9: Organizational Culture: The college or school provides an environment and culture that promotes self-directed lifelong learning, professional behavior, leadership, collegial relationships, and collaboration within and across academic units, disciplines, and professions.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ College, school, or university policies describing expectations of faculty, administrators, students and staff behaviors and conduct

> **[9A PharmD Code of Ethical and Professional Conduct. 2.13.23]**

> **[9B UH Faculty Handbook]**

> **[9B2 UHCOP Faculty Professional Responsibilities]**

> **[9C 2023-2024-pharmd-student-handbook-8.24.2023-v2]**

> **[9D UH Post-tenure Review Policy 2024]**

☑ Examples of intra/interprofessional and intra/interdisciplinary collaboration

> **[9E IPE Plan 2023-2024]**

> **[9E2 IPE Collaboration Examples]**

☑ Examples of affiliation agreements for practice or service relationships (other than experiential education agreements)

> **[9F Vecino Health Centers Denver Harbor Family Clinic]**

> **[9F2 St. Luke's Episcopal Hospital Faculty Practice Agreement]**

☑ Examples of affiliation agreements for the purposes of research collaboration (if applicable)

> **[9G UH Collaborative Research Agreement Template]**

> **[9G2 Research Services Agreement - Richies Pharmacy]**

> **[9G3 Academic Research Collaborations]**

> **[9G4 DHR Research Collaboration Agreement]**

☑ Examples of affiliation agreements for academic or teaching collaboration (if applicable)

> **[9F Vecino Health Centers Denver Harbor Family Clinic]**

Data Views and Standardized Tables:

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

> **[9H Standard 9 FSQ_3,4,6,35,37_SSQ_46,51-53,55_PSQ_30_ASQ_1, 3-5]**

☑ AACP Standardized Survey: Faculty – Questions 3, 4, 6, 35, 37

☑ AACP Standardized Survey: Student - Questions 46, 51-53, 55

☑ AACP Standardized Survey: Alumni – Questions 1, 3-5

☑ AACP Standardized Survey: Preceptor – Question 30

Optional Documentation and Data:

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

[9I International Day 2022]

[9J P1 Networking Social 2022]

[9K P4 Career Placement Conference 2022]

[9L Phi Lambda Sigma McCarty Lecture 2023]

[9M PLS Activities]

[9N Pre-Pharmacy Co-Op Programs]

[9O Residency Showcase 2022]

[9P Rho Chi Boblitt Lecture 2022]

[9Q Spring Picnic 2023]

[9R Student Orgs 2022-2023 Summary]

[9S Student Professional Organizations 2022-2023]

[9T UHCOP Golf Tournament 2022]

[9U UHCOP - Preceptor-CE Program Schedule 2022]

[9V White Coat Ceremony - University of Houston]

[9W Dual and Consecutive Degree Programs]

[9X Geriatric Medication Safety Symposium - University of Houston]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
9.1. Leadership and professionalism – The college or school demonstrates a commitment to developing professionalism and to fostering leadership in administrators, faculty, preceptors, staff, and students. Faculty and preceptors serve as mentors and positive role models for students.	✓	○	○
9.2. Behaviors – The college or school has policies that define expected behaviors for administrators, faculty, preceptors, staff, and students, along with consequences for deviation from those behaviors.	✓	○	○
9.3. Culture of collaboration – The college or school develops and fosters a culture of collaboration within subunits of the college or school, as well as within and outside the university, to advance its vision, mission, and goals, and to support the profession.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe strategies that the college or school has used to promote professional behavior and outcomes.

☑ Describe strategies that the college or school has used to promote harmonious relationships among students, faculty, administrators, preceptors, and staff; and the outcomes.

☑ Describe strategies that the college or school has used to promote student mentoring and leadership development, and the outcomes.

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

☑ Provide details of academic research activity, partnerships and collaborations outside the college or school.

☑ Provide details of alliances that promote and facilitate interprofessional or collaborative education.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

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

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

Faculty, staff and students share the responsibility of supporting UHCOP's mission to prepare students to be innovative practitioners who exhibit the ideals of professionalism, leadership, life-long learning and ethical behavior by maintaining and enforcing student professionalism and academic integrity. The current UHCOP Code of Ethical and Professional Conduct (CEPC) was implemented in Fall 2013 and defines academic, professional, and personal misconduct, describes appropriate sanctions, creates a student Board of Ethical and Professional Conduct (BEPC) **[9A PharmD Code of Ethical and Professional Conduct 2.13.23],** and defines the board's operating procedures. The Pharm.D. Student Affairs Committee is responsible for the periodic review and revision of the CEPC. Changes or additions to this Code may be suggested by any student pharmacist or faculty member.

In addition, expectations and guidelines for faculty that promote excellence in education and maintain professionalism are published in the University of Houston Faculty Handbook (pages 45-62) with the goal of providing the best education, development**,** and learning experience for the students. **[9B UH Faculty Handbook]** Faculty are expected to be accessible to students, provide positive, constructive criticism and utilize fair methods of student assessments. Faculty are also expected to behave in an ethical and professional manner, be respectful of all the personnel and students in the college and serve as role models. Clearly defined consequences for failure to follow professional guidelines for faculty are found in the faculty handbook. These faculty professional responsibilities are shared and made known to all students in the professional program. **[9B2 UHCOP Faculty Professional Responsibilities]** Tenured faculty members undergo the post-tenure review process as a periodic performance evaluation to ensure that a tenured faculty member consistently performs at an acceptable professional level and to provide for a plan of faculty development where necessary. In the instance of failure to correct deficiencies, the review process provides for the revocation of tenure or other appropriate disciplinary action.

All staff undergo annual performance appraisals by their supervisors, which are documented and placed in the staff member's personnel file in the university human resources department. Appraisals are objective and focus on work performance rather than personal attributes. The supervisor conducts a private discussion with each staff member as part of the appraisal process so that job duties and the performance assessment are understood.

Each P1 class is also assigned a faculty Classmeister, who acts as an advisor and faculty liaison for each entering class. The Classmeister remains with the class throughout the four years of the professional program and advises the class regarding academic issues, faculty issues, professionalism issues, career discussions and/or any issues or topics that may arise.

Professionalism
Throughout the year, a variety of annual events take place. Among these are the P1 White Coat Ceremony, which warmly welcomes first-year students into the program. Additionally, we have the Robert E. Boblitt Rho Chi Lecture and the James T. McCarty PLS Leadership Lecture, where faculty and students come together in a convocation to hear distinguished pharmacy leaders discuss topics related to leadership, advocacy, and the pharmacy profession.

There are also numerous college-sponsored social events that allow the students, faculty, staff, and alumni to interact and promote harmonious relationships. An annual golf tournament encourages students, faculty, alumni, and friends to engage and raise scholarship money. Newly accepted P1 students are invited to a showcase event, which is an event where the incoming P1 Class and their families are invited to campus to meet student services staff and faculty from the college, become acclimated to Houston, and hear from faculty and students on a variety of topics about being a pharmacy student at UHCOP. Part of this event includes a mixer where the incoming P1 class and their families can meet and talk to current students and faculty. The P1 students hold the annual International Day to showcase the foods and traditions from around the world and to celebrate the diversity of their class (college-wide diversity) and the university campus. The UHCOP Alumni Association works with the college to host social events including the well-attended football tailgates that allow the students to network; alumni attend socials hosted by UHCOP at state association meetings to get to know students and reconnect with the college. The Pharmacy Council also sponsors the welcome back "Pharmacy Jam" party at the beginning of the fall semester, Finals Mania during fall and spring final exam periods, annual End of School Picnic and Rho Chi Challenge, both at the end of the spring semester. These events allow the students, faculty, staff, and alumni to celebrate another year of completing pharmacy school.

In addition, the college hosts an annual P4 Career Placement Conference **[9K P4 Career Placement Conference 2022],** connecting graduating PharmD candidates with dozens of recruiters offering career opportunities throughout Houston and across the US. Recruiters, both alumni and non-alumni, represent a range of pharmacy organizations involved in community practice, hospital practice, home care pharmacy, long-term care practice, nuclear pharmacy, managed care, consulting pharmacy, and the pharmaceutical industry. The college also hosts a P1 Networking Mixer, which provides an opportunity for P1 students to meet and interact with recruiters and colleagues offering summer job internships to students who have completed the first 30 hours of the professional program. This allows P1 students and many UHCOP alumni recruiters to get to know each other in preparation for the spring semester interview day for summer job internships.

Leadership
The college shows commitment to developing professionalism and fostering leadership in preceptors. The college's Office of Experiential Programs in collaboration with the PREMIER Center, holds a free-to-attend Preceptor CE each year, where pharmacist preceptors learn about the latest topics concerning pharmacy education and students, as well as network and share ideas about their preceptor experiences. In addition, many preceptors are invited to provide guest lectures in their various areas of expertise, providing the students not only access to the most current practice information but also networking opportunities with pharmacists in a field of their interest, possibly leading to career opportunities in the future.

Students have abundant opportunities for self-governance and leadership development. Over twenty student organizations allow students to serve as officers or chair committees. Each organization benefits from a volunteer faculty advisor who provides educational support and guidance. Additionally, PLS and Rho Chi sponsor annual leadership and professionalism lectures, where industry leaders discuss relevant topics. PLS also offers various student development activities, including the PLS Leadership Challenge, workshops and panels. Notably, the UHCOP PLS chapter has received accolades, including the national Leadership Challenge winner in 2023 and recognition as a top finalist for Chapter of the Year in 2022. At UHCOP, active participation in professional conferences, meetings and activities is integral to pharmacy education. We provide academic and financial support to faculty, staff, administrators and students attending local, state and national pharmacy and scientific events. Our students often assume leadership roles in organizations like APhA, ACCP, TSHP, SNPhA, and ASHP. Additionally, many students engage in patient-care competitions at various levels.

Furthermore, our students can complete APPEs at the Texas State Board of Pharmacy (TSBP) and Texas Pharmacy Association (TPA). They can also participate in the annual Residency Showcase, organized by the UHCOP Student Society of Health-System Pharmacists and sponsored by UHCOP and the Gulf Coast Society of Health-System Pharmacists. This event allows students from all Texas pharmacy colleges to explore post-graduate residency positions across the state, neighboring regions and the entire U.S., while meeting program directors, current residents and preceptors from over 30 institutions. UHCOP actively collaborates with local, state and national organizations to advance our mission and enhance professional and interprofessional education. Since 1980, we've been an engaged member of TMC, and we participate in the Texas Assessment Consortium's Health Policy Initiative alongside nine other TMC institutions. Additionally, many of our faculty maintain practice sites within TMC institutions and hospitals.

The college continues to partner with Vecino Health Centers, a Federally Qualified Health Center in Houston. Vecino Health Centers is a family medicine clinic focused on delivering health care to underserved communities. Students can complete the required practice rotations at Vecino Health Centers in a predominantly Spanish-speaking community for the Pharmacy Certificate in Hispanic Health Care. Three Texas pre-pharmacy co-op program affiliations continue to open much-needed two-way pipelines for students to seamlessly transition into the Pharm.D. program at UH and provide East Texas and South Texas communities with expanded access to pharmacists. These affiliations include Lamar University (Beaumont), Stephen F. Austin State University (Nacogdoches) and South Texas College (McAllen).

UHCOP offers three dual and consecutive degree programs. One notable collaboration is with the CT Bauer College of Business, resulting in the dual Pharm.D./MBA degree program. This unique program streamlines the completion of both degrees, allowing pharmacy students to deepen their understanding of pharmacy management and operations. Additionally, UHCOP collaborates with the College of Liberal Arts and Social Sciences to offer the dual Ph.D./MA degree program. This program equips students with essential knowledge and practical experiences to excel in health economics and outcomes research (HEOR) careers. For those interested in pursuing a Ph.D. in Pharmaceutical Sciences, UHCOP also provides the Pharm.D. and Ph.D. Consecutive Program, with concentrations available in Pharmacology, Pharmaceutics, Medicinal Chemistry, or Pharmaceutical Health Outcomes and Policy. Finally, UHCOP has affiliations with more than 300 APPE and IPPE institutions, along with over 500 available preceptors. It is all these relationships, collaborations and partnerships that help advance the desired outcomes of the professional degree program and pharmacy practice programs.

In the areas of academic research, many collaborations have significantly increased the UHCOP research capacity and improved the extramural funding the college received. UHCOP faculty researchers have developed strong, productive collaborative relationships with colleagues at other colleges within the UH System, fellow TMC institutions, and academic, clinical and research institutions around the world. These collaborations span academic/training exchanges and a broad range of basic, clinical and translational science investigations, including oncology, cardiovascular disease, neuroscience, infectious diseases, kidney disease/dysfunction, drug metabolism/absorption, health outcomes, asthma, substance misuse, pain management and inflammation.

The Center for Population Health Outcomes and Pharmacoepidemiology Education and Research (P-HOPER Center) is a new center, approved in 2023, based out of the UHCOP and is the first of its kind in the nation to study population health outcomes through the lens of pharmacoepidemiology. In the research sphere, the center and its members are positioned to build on existing collaborations and create new ones among health professionals, healthcare providers, and community members aimed at reducing health disparities and achieving health equity. The PREMIER Center, approved in December 2018, has projects to improve patient outcomes by providing education on safe and effective controlled substance prescription use and to serve as a catalyst for collaborative research efforts optimizing pharmacotherapy to manage pain and substance use disorders. The Center has built multiple collaborations with hundreds of organizations throughout Texas to deliver prescription drug misuse education.

With the full support of the University, the College has developed several affiliations with local organizations to further the College's mission and goals and enhance interprofessional education experiences. In addition to the College's many APPE and IPPE site affiliations, there are also several IPE affiliations within the Texas Medical Center area. IPE

experiences are currently offered to students in collaboration with Baylor College of Medicine, University of Texas Health Science Center, UTHealth McGovern Medical School, the UH College of Optometry and the UH Tilman J. Fertitta Family College of Medicine.

AACP survey data among faculty indicate agreement that the college encourages curricular collaboration among disciplines, and the college promotes and environment of professional behavior among faculty, staff, and students, with agreement rates higher than national peer comparisons. Survey data for graduating students related to this standard indicates strong agreement that faculty, staff, and preceptors serve as role models. Graduating students also indicated strong agreement that the college responded to student problems and that the college had processes to communicate the student perspectives to our faculty members. Preceptor responses to the surveys indicated agreement that preceptors had ongoing contact with the OEP, with similar agreement rates to national responses.

Notable Activities Broadening Students' Professional Horizons
The Albert Schweitzer Fellowship is committed to training the next generation of professionals who will serve and empower vulnerable populations, fostering healthier communities and lives. This fellowship provides graduate and undergraduate students with a unique opportunity to design and implement a year-long mentored community project that addresses unmet health needs among underserved populations. Accepted students collaborate with mentors, experts, and community sites to extend vital services. The fellowship emphasizes a collaborative, multi-disciplinary approach, enhancing the skills and development of future healthcare practitioners. Notably, the following UHCOP students have successfully completed the Albert Schweitzer Fellowship: May Vorath (Class of 2023), Erin Montejo (Class of 2020), Sukaina Makzoumi (Class of 2022), Simin Sadeghi (Class of 2022), Dana Elder (Class of 2022), Blake Christensen (Class of 2022), and Stephanie Crowley (Class of 2019).

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

[TEXT BOX] [1,000 character limit, including spaces]

Subsection IIB: Educational Program for the Doctor of Pharmacy Degree

Standard No. 10: Curriculum Design, Delivery, and Oversight: The curriculum is designed, delivered, and monitored by faculty to ensure breadth and depth of requisite knowledge and skills, the maturation of professional attitudes and behaviors, and the opportunity to explore professional areas of interest. The curriculum also emphasizes active learning pedagogy, content integration, knowledge acquisition, skill development, and the application of knowledge and skills to therapeutic decision-making.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Description of curricular and degree requirements, including elective didactic and experiential expectations

   [10A Curriculum Description UHCOP Handbook]

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

   [10B PPSLO Mapping Curriculum tabbed spreadsheet]

☑ Tabular display of courses, faculty members assigned to each course and their role, and credentials supporting the teaching assignments

   [10C UHCOP Curriculum by faculty and credentials]

☑ A list of the members of the Curriculum Committee (or equivalent) with including their position/affiliation to the college or school, committee charges and assignments

   [10D committee charges 2022_2024]

   [10E Pharm.D. Curriculum Committee]

☑ A list the major accomplishments of the Curriculum Committee in the last 3 years

   [10F Curriculum Committee Reports Fall 2020 to Spring 2023]

☑ Example documents used by faculty, preceptors and students to evaluate learning experiences and provide formative and/or summative feedback

   [10G Experiential Programs Document]

☑ Representative examples of instructional methods (2-3 of each) employed by faculty to actively engage learners, integrate and reinforce content across the curriculum, provide opportunity for mastery of skills, instruct within the experiential learning program, stimulate higher-order thinking, problem solving, and clinical-reasoning skills, and address/accommodate diverse learning styles.

   [10H Teaching Methods for SDL and Collaborative Learning]

☑ All course syllabi (didactic and experiential)

   [10I Syllabi]

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 –9, 32-36

     ☑ AACP Standardized Survey: Student – Questions 23-28, 55, 60

     ☑ AACP Standardized Survey: Alumni – Questions 7, 8, 12

     ☑ AACP Standardized Survey: Preceptor – Questions 2, 9

    [10Z Std 10 AACP Survey]

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. Examples could include assessments and documentation of student performance and the attainment of desired core knowledge, skills and values.

    [10J PPSLOs]
    [10K PPSLO Assessment Plan]
    [10L Course Descriptions]
    [10M https://uh.edu/pharmacy/current-students/dual-and-consecutive-programs/]
    [10N Incorporation of PPCP]
    [10O Examples Spiral Integration]
    [10P Faculty Development Resources]
    [10Q Curriculum Delivery Accommodations]
    [10R Course Inventory Form]
    [10S Post-course Review]
    [10T Protocol for Curriculum Changes]
    [10U Curricular Changes]
    [10V MRSLs and Skills]
    [10W ePortfolio]
    [10X Attendance Policy]
    [10Y Active Learning at UHCOP]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
10.1. Program duration – The professional curriculum is a minimum of four academic years of full-time study or the equivalent.	✓	○	○
10.2. Curricular oversight – Curricular oversight involves collaboration between faculty and administration. The body/bodies charged with curricular oversight: (1) are representative of the faculty at large, (2) include student representation, (3) effectively communicate and coordinate efforts with body/bodies responsible for curricular assessment, and (4) are adequately resourced to ensure and continually advance curricular quality.	✓	○	○
10.3. Knowledge application – Curricular expectations build on a pre-professional foundation of scientific and liberal studies. The professional curriculum is organized to allow for the logical building of a sound scientific and clinical knowledge base that culminates in the demonstrated ability of learners to apply knowledge to practice.	✓	○	○
10.4. Skill development – The curriculum is rigorous, contemporary, and intentionally sequenced to promote integration and reinforcement of content and the demonstration of competency in skills required to achieve the Educational Outcomes articulated in Section I.	✓	○	○
10.5. Professional attitudes and behaviors development – The curriculum inculcates professional attitudes and behaviors leading to personal and professional maturity consistent with the Oath of the Pharmacist.	✓	○	○

10.6. Faculty and preceptor credentials/expertise – All courses in the curriculum are taught by individuals with academic credentials and expertise that are explicitly linked to their teaching responsibilities.	✓	○	○
10.7. Content breadth and depth – Programs document, through mapping or other comparable methods, the breadth and depth of exposure to curricular content areas deemed essential to pharmacy education at the doctoral level (Appendices 1 and 2).	✓	○	○
10.8. Pharmacists' Patient Care Process – The curriculum prepares students to provide patient-centered collaborative care as described in the *Pharmacists' Patient Care Process* model endorsed by the Joint Commission of Pharmacy Practitioners.	✓	○	○
10.9. Electives – Time is reserved within the core curriculum for elective didactic and experiential education courses that permit exploration of and/or advanced study in areas of professional interest.	✓	○	○
10.10. Feedback – The curriculum allows for timely, formative performance feedback to students in both didactic and experiential education courses. Students are also provided the opportunity to give formative and/or summative feedback to faculty, including preceptors, on their perceptions of teaching/learning effectiveness.	✓	○	○
10.11. Curriculum review and quality assurance – Curriculum design, delivery, and sequencing are regularly reviewed and, when appropriate, revised by program faculty to ensure optimal achievement of educational outcomes with reasonable student workload expectations.	✓	○	○
10.12. Teaching and learning methods – The didactic curriculum is delivered via teaching/learning methods that: (1) facilitate achievement of learning outcomes, (2) actively engage learners, (3) promote student responsibility for self-directed learning, (4) foster collaborative learning, and (5) are appropriate for the student population (i.e., campus-based vs. distance-based).	✓	○	○
10.13. Diverse learners – The didactic curriculum incorporates teaching techniques and strategies that address the diverse learning needs of students.	✓	○	○
10.14. Course syllabi – Syllabi for didactic and experiential education courses, developed and updated through a faculty-approved process, contain information that supports curricular quality assurance assessment.	✓	○	○
10.15. Experiential quality assurance – A quality assurance procedure for all pharmacy practice experiences is established and implemented to: (1) facilitate achievement of stated course expectations, (2) standardize key components of experiences across all sites offering the same experiential course, and (3) promote consistent assessment of student performance.	✓	○	○
10.16. Remuneration/employment – Students do not receive payment for participating in curricular pharmacy practice experiences, nor are they placed in the specific practice area within a pharmacy practice site where they are currently employed.[2]	✓	○	○
10.17. Academic integrity* – To ensure the credibility of the degree awarded, the validity of individual student assessments, and the integrity of student work, the college or school ensures that assignments and examinations take place under circumstances that minimize opportunities for academic misconduct. The college or school ensures the correct identity of all students (including distance students) completing proctored assessments.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

Design:

☑ Describe the college or school's curricular philosophy.

☑ Describe the professional competencies of the curriculum.

☑ Describe the curricular structure and content of all curricular pathways including the elective courses and experiences available to students.

Delivery:

☑ Provide examples of evidence that knowledge, practice skills and professional attitudes and values are integrated, reinforced and advanced throughout the didactic and experiential curriculum.

☑ Describe the efforts of the college or school to address the diverse learning needs of students.

☑ Describe how the Pharmacists' Patient Care Process has been incorporated into the curriculum.

☑ Describe any nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable).

Oversight:

☑ Describe how the college or school completes curriculum review process.

☑ Describe how the results of curricular assessments are used to improve the curriculum with examples provided (if applicable).

☑ Based on mapping, describe how gaps in curricular content or inappropriate redundancies are identified and inform curricular revision with examples provided (if applicable).

☑ Describe how the curriculum design enables students to integrate, achieve, and apply competency areas needed for the delivery of holistic patient care with examples provided.

☑ Describe how teaching/learning methods are used to: facilitate achievement of learning outcomes, actively engage learners, promote student responsibility for self-directed learning, foster collaborative learning, and are appropriate for the student population (i.e., campus-based vs. distance-based) with examples provided.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

Curricular Philosophy and Description of Professional Competencies

The college strives to produce graduates who are well-prepared for patient care in diverse health care settings while being innovative practitioners who embody professionalism, leadership, critical thinking, life-long learning and ethical behavior. To achieve this, the college adopted the Professional Pharmacy Student Learning Outcomes (PPSLOs) in 2014. The PPSLOs cover ten domains, including Communication, Foundational Sciences, Critical and Innovative Thinking, and Patient-Centered Care. These outcomes are assessed annually through the college's curricular PPSLO assessment plan. **[10J PPSLOs] [10K PPSLO Assessment Plan]** Course proficiencies are mapped to the PPSLOs, which are aligned with professional competencies such as 2013 CAPE and Entrustable Professional Activities (EPAs). **[10B PPSLO Mapping Curriculum tabbed spreadsheet]**

Curricular Structure and Content

The college introduced an integrated curriculum in Fall 2018. Intentionally designed to foster horizontal, vertical and spiral integration across all aspects of learning, the curriculum comprises 57-72 hours of prerequisite undergraduate coursework before entering the 147-credit-hour professional Pharm.D. program spanning four years. The curriculum includes three years of didactic courses (P1 - P3) including six hours of electives, 320 hours of IPPEs and co-curricular activities. In P4, students complete seven six-week APPEs, consisting of four required rotations in Advanced Community, Advanced Institutional, Ambulatory Care and Internal Medicine and three elective rotations. **[10L Course Descriptions]** Additionally, students can explore joint Pharm.D./MBA or Pharm.D./Ph.D. tracks.

The P1 curriculum provides strong foundational knowledge in basic science courses such as biochemistry, physiology and pharmaceutics. In addition, students begin their foundation in medicinal chemistry and pharmacology with the Foundations in Medicinal Chemistry, Microbiology & Receptor Action (FIMMRA). Clinical sciences are introduced in courses such as the Social, Behavioral & Communication Aspects of Pharmacy Practice, Patient Assessment, Self-Care & OTC Products, and Fundamentals of Pharmacy Practice. The clinical courses cover key aspects of pharmacy practice which serve as a building block and introduction to the Pharmacists' Patient Care Process (PPCP) and prepare students for their summer Community IPPEs. Concurrent Skills courses run alongside these P1 courses, focusing on communication,

non-sterile compounding, patient assessment, OTC/self-care management and immunization techniques. These courses have been meticulously reviewed by the college's assessment and curriculum committees in collaboration with the course coordinators to ensure integration. The curriculum also incorporates a management series, starting in P1 Fall with an Introduction to the Health Care System course. This series continues in P2 and P3 with courses Leadership and Principles of Interprofessional Education (IPE), Pharmacoeconomics and Hospital Management, and Ambulatory Clinical Practice Management. Overall, the curriculum lays the groundwork for integration in P1 and progresses to more advanced topics in P2 and P3.

The integrated modules are spread throughout P2 and P3. Each module is organ systems-based and includes the pathophysiology of disease, pharmacology, medicinal chemistry and therapeutics. Each module structure regularly starts with pathophysiology to orient students to the disease state. Pharmacology and medicinal chemistry are then introduced to review various drug targets, mechanism of action, ADME and functional groups. Applied pharmacokinetics, pharmacogenomics and toxicology are included whenever applicable. Therapeutics is typically covered last to build on the pharmaceutical concepts while applying evidence-based medicine for treatment and incorporating the PPCP. Where appropriate, all spectrum of ages and genders are included. The sequencing of the modules is intentional, starting with organ systems that are foundational and gradually introducing modules that build upon previous disease states. Module-related Skills Labs (MRSLs) run concurrently and are integrated with the modules.

In addition to modules and MRSLs, the P2 and P3 curriculum includes didactic courses such as Pharmacokinetics, Literature Evaluation and Law. In P2 Fall, the Pharmacy Skills Program III reinforces literature evaluation through lab sessions and a journal club presentation, alongside sterile compounding training and certification. These skills are applied during the summer Institutional IPPE following P2. In P3 Spring, students take Complex Problems as a capstone and final didactic class. This problem-based course integrates their cumulative knowledge and skills, fostering critical thinking through group work, case studies and presentations with an emphasis on social determinants of health.

Skills Labs and MRSLs reinforce content and enhance skills in parallel with didactic courses. These labs utilize active learning formats, including simulated EMR use, role-play and group-based discussions. In P1, Skills courses provide hands-on learning for glucose screening, blood pressure measurement and medication compounding in collaboration with the Professional Compounding Centers of America (PCCA). As the curriculum progresses into P2 and P3, MRSLs spirally integrate material previously learned, emphasizing the PPCP, **[10N Incorporation of PPCP]** critical thinking, problem-solving and practical application of didactic knowledge. Overall, the first three years of the curriculum is structured to provide foundational, clinical and professional growth to fully prepare students for their APPEs.

Curriculum Delivery and Feedback

The curriculum is spirally integrated to introduce and reinforce knowledge and skills throughout the four years. One example is patient counseling, which is introduced during P1 Fall and reinforced through Skills Labs. Students then encounter more complex scenarios, such as drug knowledge accuracy and discharge counseling in P1 Spring and answering patient questions during P3 Spring. The patient counseling skillset is then refined during their IPPE and APPE core rotations. In addition to course exam reviews, feedback is given back via strength and opportunity reports from ExamSoft as well as rubric and preceptor evaluations. **[10O Examples Spiral Integration]**

Various strategies are utilized to address students' diverse learning needs. While didactic courses are primarily lecture-based, faculty integrate active learning activities such as audience response (Poll Everywhere), gaming, and team-based and case-based learning through about 10-25% of each course. Faculty development sessions are held to increase comfort and utilization of these strategies. **[10P Faculty Development Resources]** Classes are recorded using Mediasite, with lecture recordings accessible to students immediately after class. Students requiring accommodation for assessments go to the Justin Dart, Jr. Student Accessibility Center which provides improved accessibility for learning and testing. Additionally, live Zoom lectures are utilized for students unable to attend class due to extenuating circumstances. **[10Q Curriculum Delivery Accommodations]**

Curricular Oversight and Assessment

The college's curriculum is the faculty's responsibility, and oversight is facilitated by the Pharm.D. Curriculum Committee (CC), in collaboration with the Office for Academic Affairs, according to UHCOP bylaws. The CC is comprised of representation from each of the college's departments, students, alumni and ex-Officio members. **[10E Pharm.D. Curriculum Committee]** The curriculum committee meets approximately 15-20 times each year.

Overall curriculum assessment begins at the course level with routine course inventory submissions, formal course reviews and the PPSLO Assessment. All courses submit a Course Inventory Form at the end of each semester to reflect and inform the committee on how the course was delivered and what changes may be implemented. **[10R Course Inventory Form]** Every course undergoes a formal post-course review after initial delivery and again every three years, unless prompted by recommendations from the CC. **[10S Post-course Review]** Any changes to courses are formally submitted to the CC before the semester of delivery per the CC course change procedures. **[10T Protocol for Curriculum Changes]** The college has a continuous curricular assessment utilizing objective data to evaluate curricular and student outcomes.

In addition to individual course reviews and outcomes, the post-course review and PPSLO Assessment helps identify gaps through mapped assessment data by identifying areas where students performed poorly or were not assessed. Additionally, course evaluations, performance on the NAPLEX, MPJE, PCOA and other capstone assessments are used to evaluate student outcomes. Notably, the first graduating class of our current integrated curriculum (2022) achieved an 83% NAPLEX pass rate (national average of 80%) and a 91% MPJE pass rate (national average of 75%). Further details on how these assessment results inform curriculum improvements are discussed in depth in Standard No. 24.

Through routine curricular assessment, content streaming and redundancy between courses has improved, such as the overlap between the Self-Care and OTC Products and the Patient Assessment courses during P1. Course coordinators collaborated with the Pharmacy Skills Program II coordinators to minimize redundancies, resulting in enhanced case-based learning and ensuring better alignment of material. Currently, there is a task force of module coordinators working to improve consistency in delivery of topics utilizing a lecture template for pathophysiology, medicinal chemistry, pharmacology, toxicology, and therapeutics. Course review has also identified gaps of foundational knowledge. For example, after observing suboptimal results in student proficiency related to calculations in courses on the PCOA and NAPLEX the calculations task force identified solutions for improvement. There is now an increase in calculations reinforcement in the skills, MRSLs and modules as well as the IPPE and APPE assessments. In 2024, the incoming PharmD cohort will utilize ExamMaster to review basic mathematic principles before students begin the professional program. **[10U Curricular Changes]**

Student Integration, Achievement, and Application Through Curricular Design

The integrated curriculum is designed to allow incremental growth from beginner to proficient in knowledge, skills and professionalism through didactic courses and complimentary skills labs. Pharmacy Skills Program I, II, and III are designed to help students apply key professional skills and integrate knowledge in a simulated environment. Examples of this include patient counseling, pharmacy calculations, immunizations, vitals screenings and blood glucose measurements. Beginning in P2, the integrated modules and MRSL I-IV courses reinforce the incorporation of basic skills into therapeutic plans utilizing the PPCP through patient case workups and presentations. **[10V MRSLs and Skills]** The college's co-curriculum develops professionalism, leadership and self-awareness through seminars, IPE activities, health fairs, organizations and other activities. Students demonstrate achievement through OSCEs, skill checkoffs, certifications, e.g. APhA immunization certification, and successful transitions to IPPEs and APPEs. Individual achievement is identified through the yearly ePortfolio which exhibits student achievements and self-reflections throughout the curriculum. **[10W ePortfolio]**

Teaching and Learning Methods

To foster student engagement and encourage self-directed learning, the college places a high priority on active learning strategies and enforces a mandatory attendance policy. **[10X Attendance Policy]** Integration of active learning strategies are embedded throughout lectures and skills labs to achieve learning outcomes. **[10Y Active Learning at UHCOP]** Our

state-of-the-art facility further enhances the learning experience. It is equipped with advanced technology, active learning classrooms, OSCE suites, a mock sterile products room with sinks and hoods, and spacious classrooms designed for group work. This environment encourages students to apply their knowledge and take responsibility for their learning, fostering self-directed and collaborative learning through various activities. **[10H Teaching Methods for SDL and Collaborative Learning]**

Notable achievements, innovations, and quality improvements

The integrated curriculum started in 2018 and successfully continued its rollout despite the COVID-19 pandemic. The college has fully implemented curricular course previews and post-course reviews. Faculty and student workloads and assessment scheduling have been optimized based on feedback. Collaboration between basic, clinical and administrative sciences has increased within the integrated curriculum. The Skills Lab team, including faculty and instructional lab managers with pharmacy technician experience, has enhanced Skills Labs and reduced workload. Optimization of resources, such as implementation of a systematic process to assign teaching assistants to courses, is another quality improvement within the college. Faculty members participate in training sessions to enhance their use of educational technology and collaborate closely with IT to maximize the benefits of the college's advanced technology.

Interpretation of AACP Survey Data

Data from the past three years of the college's 2018-2023 AACP standardized surveys indicate that most students agree or strongly agree that the curriculum prepared them in the foundational, pharmaceutical, and clinical sciences (90-97%) and that they were prepared to enter into pharmacy practice (92-97%), comparable to our peers and national data. Although we had a low response rate from preceptors and alumni, those that responded agreed that the curriculum provided the foundational and clinical skills required in the provision of patient care and preparation of pharmacy practice. This data represents both our legacy curriculum (last graduating class in 2021) and our current integrated curriculum, and it is instrumental in evaluating the efficacy of our curriculum in effectively preparing our graduates for pharmacy practice and patient care.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.
   [TEXT BOX] [1,000 character limit, including spaces]

Standard No. 11: Interprofessional Education (IPE): The curriculum prepares all students to provide entry-level, patient-centered care in a variety of practice settings as a contributing member of an interprofessional team. In the aggregate, team exposure includes prescribers as well as other healthcare professionals.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Vision, mission, and goal statements related to interprofessional education

   [11A IPE Vision Mission Goals 2023-2024]

☑ Statements addressing interprofessional education and practice contained within student handbooks and/or catalogs

   [11B IPEP Statements in Handbooks]

☑ A copy of the Interprofessional Education Plan that documents the student involvement, other health profession involvement, timeline, activities, outcomes, assessment, resources, and tools utilized.

   [11C IPE Plan 2023-2024]

☑ Student IPPE and APPE evaluation data documenting the extent of exposure to interprofessional, team-based patient care

   [11D IPE Evaluation Data IPPE]

   [11E IPE Evaluation Data APPE]

☑ Outcome assessment data summarizing overall student participation and outcomes in IPE activities

   [11F IPE Evaluation Data - P1-P4 IPEs V2 wTools]

☑ Representative examples (2-3) of instructional methods employed by faculty to incorporate meaningful interprofessional learning opportunities
   [11G IPE Representative Samples]

   [11H JIC NPLH 2020]

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 3, 38

   [11I Std 11 AACP Survey Data]

Optional Documentation and Data:

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

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
11.1. Interprofessional team dynamics – All students demonstrate competence in interprofessional team dynamics, including articulating the values and ethics that underpin interprofessional practice, engaging in effective interprofessional communication, including conflict resolution and documentation skills, and honoring	✓	◯	◯

interprofessional roles and responsibilities. Interprofessional team dynamics are introduced, reinforced, and practiced in the didactic and Introductory Pharmacy Practice Experience (IPPE) components of the curriculum, and competency is demonstrated in Advanced Pharmacy Practice Experience (APPE) practice settings.			
11.2. Interprofessional team education – To advance collaboration and quality of patient care, the didactic and experiential curricula include opportunities for students to learn about, from, and with other members of the interprofessional healthcare team. Through interprofessional education activities, students gain an understanding of the abilities, competencies, and scope of practice of team members. Some, but not all, of these educational activities may be simulations.	✔	○	○
11.3. Interprofessional team practice – All students competently participate as a healthcare team member in providing direct patient care and engaging in shared therapeutic decision-making. They participate in experiential educational activities with prescribers/student prescribers and other student/professional healthcare team members, including face-to-face interactions that are designed to advance interprofessional team effectiveness.	✔	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how the college or school supports the development of pharmacy graduates who are trained with other health professionals to provide patient care as a team.

☑ Describe 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.

☑ Describe how the results of interprofessional education outcome assessment data are used to improve the curriculum.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

The UH College of Pharmacy Interprofessional Education (IPE) mission is to foster an environment where students from two or more health care professions can learn about, from, and with one another to enable effective collaboration and eventually improve patient outcomes **[11A IPE Vision Mission Goals 2023-2024].** The vision is to create a culture where students from various health care disciplines will work as one cohesive unit in the delivery of patient-centered care. Interprofessional Education and Practice (IPEP) at UHCOP is an important part of the culture **[11B IPEP Statements in Handbooks]**, is woven throughout the curriculum, and steadily builds the roles and responsibilities for the pharmacy student as part of the health care team **[11C IPE Plan 2023-2024].**

The college is dedicated to supporting the development of pharmacy graduates in their training with other health professionals to provide patient care as a team. The oversight of the college's IPE is facilitated by the designated IPE director. The Pharmacy Practice and Translational Research (PPTR) department provides faculty, fellows, and residents help with IPE facilitation needs. UHCOP IT department helps support many small- and large-scale Zoom IPE events annually. Dedicated UHCOP faculty facilitators are utilized for the monthly P4 Crisis Management (CM) IPE, faculty preceptors are provided for clinic-based IPE at Houston Outreach Medicine Education & Social Services (HOMES) Clinic/Denver Harbor Family Health Center (DHFC), and faculty APPE preceptors involve P4 students in the health care teams. Scheduling for several non-course-based IPE events annually such as the P1 Diabetes Mellitus (DM) IPE, the P2 Patient Safety IPE, the P2 HOMES Clinic/DHFC IPE, the P3 No Place Like Home (NPLH) IPE, and the P4 CM IPE is arranged through the co-curriculum. The college's leadership provides professional development support and travel for the IPE director, and fosters relationships with leadership from medical, nursing and other programs, e.g. University of Houston College of Medicine, University of Houston College of Optometry, University of Houston College of Nursing, Baylor College of Medicine, and Texas Women's University) to enable interprofessional education collaboration.

There are many ways the UHCOP curriculum is preparing graduates to work as members of an interprofessional team [11C IPE Plan 2023-2024]. As evidenced in the IPE Plan 2023-2024, there is a growth of IPE throughout the UHCOP curriculum that purposefully builds the role and responsibilities of the pharmacy student. This preparation begins in P1 Fall with a foundation of TeamSTEPPS training in the Social, Behavioral & Communication Aspects of Pharmacy Practice (PHAR 4270) and Pharmacy Skills Program I (PHAR 4250) courses. While this training does not occur interprofessionally, it is the foundation for communication and teamwork in an interprofessional team. This TeamSTEPPS training is 4.5 hours with 3 hours occurring in lecture and 1.5 hours occurring in lab. In P1, we also conduct a DM IPE, an interprofessional large and small group activity that occurs with medical, nursing, and optometry students. During this 3-hour DM IPE event, students work on a case about a patient with diabetes and discuss as well as practice everyone's role and responsibility.

The P2 year has several IPE events that build on skills learned in P1. In Community IPPE (PHAR 5493), students spend four weeks working on communication skills both intra- and inter-professionally. In the Leadership and Principles of IPE course (PHAR 5111), students continue working on communication skills and get a one-hour lecture on the background of IPE and a discussion on collaborative competence. We discuss how teams are stronger when all members speak up and engage to work toward a common goal. There is also a 1.5-hour IPE event that occurs in this course. Prior to 2024, the event was an online health care escape room where students worked together in their virtual teams to gather patient information to escape (i.e., get discharged) from the hospital. This event further developed communication skills in a stressful and time-sensitive environment. The new Sickle Cell IPE will begin in Fall 2024 and involves large and small group discussions surrounding communication difficulties in the interprofessional health care environment. This event is currently titled Special Populations – Sickle Cell IPE and focuses on working with other disciplines in the health care setting and communication strategies to help recognize and respond to bias. In the spring, P2 students also participate in a Patient Safety IPE with medical and nursing students discussing teamwork and patient safety. P2 also includes the first direct patient care experience with an in-person clinic visit that occurs with a UHCOP faculty or fellow for a four-hour experience at either HOMES or DHFC. During these ambulatory clinic visits, pharmacy students are expected to work with their health care team and provide patient care under the guidance of their pharmacy preceptor. They learn to embrace the cultural diversity and individual differences that characterize patients, respect the dignity and privacy of patients while maintaining confidentiality, communicate their roles and responsibilities to their team members and patients, and reflect on individual and team performance.

P3 has two main IPE events, the Institutional IPPE (PHAR 5457) and No Place Like Home (NPLH). Institutional IPPE is a four-week experience where students continue to work on their role in the interprofessional team. They also participate in a two-hour shadowing experience with a non-pharmacy health care professional and reflect on their experience. In this reflection, they write about how they see pharmacy interacting and overlapping with this profession in the health care environment. They also reflect on how they will use this experience to build relationships with new teams in the future. At NPLH, the students spend an entire day (eight hours) visiting 3-4 patients in their homes with a BCM faculty member and medical students. The P3 students are responsible for medication review and management, and they make recommendations to help with patient care. The pharmacy students are the only pharmacy representative on the NPLH health care team and often help with medication management, medication organization and patient counseling.

In P4, students spend many hours on interprofessional teams providing patient care during their APPE rotations. P4 students also participate in a Crisis Management (CM) IPE with medical and nursing students. They spend time discussing a CM scenario and how communication and teamwork can be improved. Utilization of interprofessional education outcome assessment data are continuously reviewed and utilized to improve the IPE curriculum [11D IPE Evaluation Data IPPE] [11E IPE Evaluation Data APPE] [11F IPE Evaluation Data - P1-P4 IPEs wTools]. Data is reviewed to ensure IPE objectives are being met. Preceptor final evaluation data from the last three summers for Community IPPE (PHAR 5493) and Institutional IPPE (PHAR 5457) show that our students are meeting or exceeding the IPE competencies expected to be achieved while on IPPE rotations [11D IPE Evaluation Data IPPE].

IPE expectations are much higher on APPE rotations when compared to IPPE rotations. For the four required APPE rotations (i.e., Advanced Community, Advanced Hospital, Internal Medicine and Ambulatory Care), six additional questions that focus on interprofessional ability and engagement have been added to the preceptor-completed final evaluation of the student [IPE Evaluation Data – APPE]. Data pulled from CORE ELMS for the last three graduating classes show that our students are meeting or exceeding IPE expectations, and our preceptors agree or strongly agree that our students are doing well in IPE teams when looking at the six additional IPE-focused questions.

There are several IPE activities that occur in the co-curriculum that are also assessed **[11F IPE Evaluation Data – P1-P4 IPEs V2 wTools].** For P1, P2 and P3 IPEs activities, the assessment tool used for IPE evaluation is the ICCAS-R (Interprofessional Collaborative Competencies Attainment Survey, Revised), which is a validated scale created by MacDonald and colleagues. It is a retrospective pre-post survey completed by students after their IPE experience. Data for the 2022-23 year for all P1, P2 and P3 assessments showed statistically significant gains in IPE. For the P4 IPE, the Interprofessional Crisis Management (ICM) Team Assessment is utilized to capture how well senior-level health care students are performing in their teams. This tool does not capture students on the individual level as it collects data for each health profession aggregately. For example, if there are two or three pharmacy students on the interprofessional team, they are given an aggregate score of how well they did. There is a faculty facilitator from either medicine, nursing or pharmacy assigned to each interprofessional team who is completing this assessment for all professional students on their assigned team. Data for pharmacy students from the ICM Team Assessment shows that our students are meeting these objectives**.**

While all our IPE competencies are currently being met, there is one example of a change in the IPE curriculum that occurred due to assessment data that was not favorable. This was the NPLH update that occurred in 2019. It was discovered that the IPE objectives were being shadowed by the novelty of the home visit experience. In order to make sure that the IPE objectives were being met, several changes to NPLH IPE were made, such as lengthening the experience from four hours to eight hours to allow the novelty to dissipate, dropping the number of medical and pharmacy students on each team from four or five to two or three, increasing the number of homes visited for each team, and increasing the number of training sessions for the faculty facilitators to increase awareness of the priority of interprofessional education. After the implementation of these changes, students have been able to achieve the IPE objectives as documented in our 2020 *Journal of Interprofessional Care* publication **[11H JIC NPLH 2020].** With the release of the new IPEC competencies in November 2023, all of our IPE activities and assessment forms are in various stages of being updated so they align with the new competencies.

Some notable achievements and innovations are (1) successful growth of P1 IPE with UHCOM, UHCOO, UHCON; (2) over 10-year partnership with BCM and TWU for IPE experiences; (3) IPE Director is a fellow in the National Academies of Practice (NAP) and serves on national committees; (4) IPE Director was inducted as inaugural fellow in Texas IPE Consortium, (5) IPE Director has multiple SoTL publications with IPE focus; (6) development of Special Populations – Sickle Cell IPE to discuss bias in health care; (7) adding IPE to the geriatrics elective; (8) consistent growth and annual refinement of IPE program and plan; (9) successful oversight and coordination of large-scale (450+) IPE events with the support of UHCOP IT; (10) consistent development and refinement of P4 CM IPE; and (11) innovative IPE activities were developed and successfully continued throughout the COVID-19 pandemic, and we confirmed an equal learning opportunity of IPE outcomes after reviewingpre-COVID-19 data.

Overall, the graduating student data for IPE were all above the 80% agree or strongly agree cutoff (< 20% disagree or strongly disagree) utilized in the college's PAP and comparable to peer and national standards.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
No factors exist that compromise current compliance; no factors	• No factors exist that compromise current	Factors exist that compromise current compliance; an	• Factors exist that compromise current compliance; an

exist that, if not addressed, may compromise future compliance.	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.	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.	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
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

   [TEXT BOX] [1,000 character limit, including spaces]

Standard No. 12: Pre-Advanced Pharmacy Practice Experience (Pre-APPE) Curriculum: The Pre-APPE curriculum provides a rigorous foundation in the biomedical, pharmaceutical, social/administrative/behavioral, and clinical sciences, incorporates Introductory Pharmacy Practice Experience (IPPE), and inculcates habits of self-directed lifelong learning to prepare students for Advanced Pharmacy Practice Experience (APPE).

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Curriculum maps documenting breadth and depth of coverage of Appendix 1 content and learning expectations in the professional (and, if appropriate, preprofessional) curriculum

    [12A Curriculum PPSLO and Assessments]

    [12B University of Houston Curricular Mapping 2024]

    [12C PPSLO Mapping Curriculum Spreadsheet ALL YEARS]

☑ Overview of IPPE curriculum (duration, types of required and elective rotations, etc.)

    [12D Overview of IPPE Curriculum]

☑ List of simulation activities and hours counted within the introductory pharmacy practice experiences 300-hour requirement

    There are no simulation activities/hours counted within the IPPE curriculum

☑ Introductory pharmacy practice experiences student manual

    [12E PHAR 5493 IPPE Community Rotation 2023 Manual]

    [12F PHAR 5457 IPPE Institutional Rotation 2023 Manual]

☑ Introductory pharmacy practice experiences preceptor manual

    [12G Preceptor Manual Final Version 2024]

☑ Introductory pharmacy practice experiences student and preceptor assessment tools

    [12H PHAR 5493 IPPE Community Assessment Tools]

    [12I PHAR 5457 IPPE Institutional Assessment Tools]

☑ Introductory pharmacy practice experiences preceptor recruitment and training manuals and/or programs

    [12J IPPE pre-rotation, mid-rotation, end-rotation email templates]

    [12K IPPE CORE ELMS Instructions]

    [12L Preceptor Orientation Video Slides]

Data Views and Standardized Tables:

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

    [12M Standard 12 FSQ_34_SSQ_24,26-28,58,59,69-71_ASQ_7,10]

☑ AACP Standardized Survey: Faculty – Question 34

☑ AACP Standardized Survey: Student – Questions 24, 26-28, 58, 59, 69-71

☑ AACP Standardized Survey: Alumni – Questions 7, 10

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.

[12N CORE ELMS IPPE Field Encounter Data]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
12.1. Didactic curriculum – The didactic portion of the Pre-APPE curriculum includes rigorous instruction in all sciences that define the profession (see Appendix 1). Appropriate breadth and depth of instruction in these sciences is documented regardless of curricular model employed (e.g., blocked, integrated, traditional 'stand-alone' course structure, etc.).	✓	○	○
12.2. Development and maturation – The Pre-APPE curriculum allows for the development and maturation of the knowledge, skills, abilities, attitudes, and behaviors that underpin the Educational Outcomes articulated in Standards 1–4 and within Appendices 1 and 2.	✓	○	○
12.3. Affective domain elements – Curricular and, if needed, co-curricular activities and experiences are purposely developed and implemented to ensure an array of opportunities for students to document competency in the affective domain-related expectations of Standards 3 and 4. Co-curricular activities complement and advance the learning that occurs within the formal didactic and experiential curriculum.	✓	○	○
12.4. Care across the lifespan – The Pre-APPE curriculum provides foundational knowledge and skills that allow for care across the patient's lifespan.	✓	○	○
12.5. IPPE expectations – IPPEs expose students to common contemporary U.S. practice models, including interprofessional practice involving shared patient care decision-making, professional ethics and expected behaviors, and direct patient care activities. IPPEs are structured and sequenced to intentionally develop in students a clear understanding of what constitutes exemplary pharmacy practice in the U.S. prior to beginning APPE.	✓	○	○
12.6. IPPE duration – IPPE totals no less than 300 clock hours of experience and is purposely integrated into the didactic curriculum. A minimum of 150 hours of IPPE are balanced between community and institutional health-system settings.	✓	○	○
12.7. Simulation for IPPE – Simulated practice experiences (a maximum of 60 clock hours of the total 300 hours) may be used to mimic actual or realistic pharmacist-delivered patient care situations. However, simulation hours do not substitute for the 150 clock hours of required IPPE time in community and institutional health-system settings. Didactic instruction associated with the implementation of simulated practice experiences is not counted toward any portion of the 300 clock hour IPPE requirement.	✓	○	○

College or School's Comments on the Standard:

The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how student performance is assessed and documented in IPPEs, including the nature and extent of patient and health care professional interactions, and the attainment of desired outcomes.

☑ Describe, in aggregate, how the practice experiences assure that students have direct interactions with diverse patient populations in a variety of health care settings.

☑ Describe 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.

☑ Describe how the college or school uses simulation in the IPPE curriculum (if applicable). **Simulation is not used in the IPPE curriculum.**

☑ Describe how the college or school establishes objectives and criteria to distinguish introductory from advanced practice experiences.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑   Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable   differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

The pre-APPE curriculum is purposefully spirally integrated and deliberately sequenced to prepare students to apply their knowledge and skills to each IPPE rotation and shape their professional identity formation as a pharmacist. During P1, students have a pharmacy skills program that involves community practice and compounding labs and didactic courses in patient assessment, self-care and OTC. In addition to the labs and courses, P1 students receive their immunization certificate through the APhA Pharmacy-Based Immunization Delivery course to deliver vaccinations. All these courses prepare students to complete the Community IPPE rotation during the summer after their P1 year.

During P2, students have integrated modules that encompass pathophysiology, pharmacology, medicinal chemistry, pharmacotherapeutics and the PCPP that form their foundational knowledge. Students also obtain a certification in sterile product preparation in the fall semester and take in the course Pharmacoeconomics and Hospital Management in the spring semester to round out their preparation for the Institutional IPPE in the summer after their P2 year. For further information about the pre-APPE curriculum, please refer to Standard No. 10.

IPPE Hours Balanced Between Pharmacy Practice Settings
The Institutional IPPE curriculum consists of two experiential courses **[12D Overview of IPPE Curriculum]**. IPPE courses occur in-person in pharmacy practice settings under the supervision of a licensed pharmacist preceptor. Students complete the Community IPPE (PHAR 5493) in the summer semester after P1, obtaining 160 hours of practice experience in a community pharmacy setting. The Institutional IPPE (PHAR 5457) is completed during the summer semester after P2, and students obtain 160 hours of health-system pharmacy experience. The total 320 IPPE hours for the IPPE courses are evenly distributed between the community and health-system pharmacy practice settings. The rotation hour requirement for both Community and Institutional IPPEs is gained over a four-week period, with students spending an average of 40 hours per week in these settings.

Student Performance Assessment and Documentation
Student performance is assessed and documented for IPPEs in CORE ELMS **[12H PHAR 5493 IPPE Community Assessment Tools] [12I PHAR 5457 IPPE Institutional Assessment Tools]**. The extent of patient and health care professional interactions and the attainment of desired outcomes are all documented in CORE ELMS from the completion of student evaluations. Both IPPEs are graded courses and consist of a preceptor evaluation of the student, their assignments and a written exam. There are several communications that preceptors receive to help with IPPEs such as the IPPE emails from CORE ELMS, which are sent pre-rotation, mid-rotation and at the end of the rotation, and the Preceptor Orientation video. For both IPPEs, the preceptor evaluation of students consists of competencies related to foundational knowledge, pharmacy practice skills, communication skills and professionalism. The evaluation form is mapped to the college's PPSLOs, CAPE outcomes, and (EPAs), and allows preceptors to evaluate IPPE students on their interactions with other health care professionals. The Likert scale for the evaluation form considers the entrustment scale of supervision. There are also checklists for both IPPE rotations that document patient counseling, distributive functions and

pharmacist duties. Additionally, the Institutional IPPE has an assignment in which students present a case presentation to the preceptor and other health care professionals based on a patient that they monitored utilizing the PPCP. The Institutional IPPE also has an interprofessional education assignment in which students spend two or more hours with other health care professionals and write a reflection on their experience, including how they see pharmacy working alongside this other profession. These activities help students to be APPE ready.

Student Interactions with Diverse Patient Populations in a Variety of Settings
The IPPEs assure that students have direct interactions with diverse patient populations in a variety of health care settings. Simulation is not used in the IPPE curriculum. All 320 IPPE hours occur in-person at community and institutional practice settings that provide valuable opportunities for students to directly interact with patients in the respective patient care setting. UHCOP's partnership with RGV sites has also given students opportunities to rotate in an area with a predominantly Hispanic patient population. For both Community and Institutional IPPE rotations, students are required to document eight or more interventions in CORE ELMS under IPPE Patient Care Interventions. These patient care interventions track patient demographics such age, gender and ethnicity, as well as the medication-related problems identified, and the student intervention performed [CORE ELMS IPPE Field Encounter Data].

For the Introductory Community IPPE, students are integrated into the community pharmacy workflow under the supervision of a preceptor in chain retail drug stores, such as Kroger, Walgreens, CVS, Randalls, Tom Thumb and Walmart. Students counsel patients and administer immunizations as well as gain experience in pharmacy operations. They also help patients choose appropriate OTC products and recommend patients to seek higher levels of care if they are not candidates for self-care. The college has continued to foster relationships with many different types of community pharmacies in Houston and throughout Texas.

The Institutional IPPE allows students to be part of the health-system pharmacy workflow and learn about the interdisciplinary team approach to patient care. The college has forged strong affiliations with a variety of hospitals, including community, county and academic hospitals in TMC, all of which serve different patient populations and disease states. The sites used are various hospitals throughout the Greater Houston area and RGV. The hospital systems commonly used for the Institutional IPPE are Memorial Hermann Health System, Houston Methodist, St. Luke's Health, DHR Health and HCA Houston Healthcare. All the hospitals have inpatient pharmacies with dispensing, ordering, formulary management and patient care requirements that allow our students to engage themselves in the institutional pharmacy setting.

Distinguishing Introductory from Advanced Practice Experiences
The college has established objectives and criteria to distinguish introductory from advanced practice experiences. Utilizing Bloom's Taxonomy, the competencies for IPPEs focus on operational exposure along with patient care activities that are appropriate for IPPE students. Examples of differentiation between the IPPEs and APPEs can be found when comparing the Community IPPE final evaluation with the Advanced Community Pharmacy APPE final evaluation. In the Community IPPE final evaluation, under the Foundational Knowledge section, the student is expected to "understand the pharmacotherapy principles in patient care decisions." For the Advanced Community Pharmacy APPE final evaluation, the student is expected to "apply pharmacotherapy principles in patient care decisions" in the same section. This differentiation is also seen when comparing the Institutional IPPE final evaluation to the Advanced Hospital Pharmacy APPE final evaluation. In the Pharmacy Practice skills section, the Institutional IPPE final evaluation objective is to "demonstrate the ability to collaborate with other interprofessional team members to achieve a shared goal and/or optimize care." In the Advanced Hospital Pharmacy APPE final evaluation, the objective is to "collaborate with other interprofessional team members to achieve a shared goal and/or optimize care." Additionally, the activities for IPPE students are at a level appropriate with their abilities such as medication preparation, dispensing, ordering, patient counseling, immunizations and discharge counseling. The APPEs take this a step further by also focusing on applying patient care skills and broadening their operational knowledge.

There are several notable achievements that we would like to highlight. One of these achievements is the UHCOP and RGV collaboration for both Institutional IPPE and Community IPPE, which has provided valuable opportunities to work

with patients in an underserved and predominantly Hispanic population. Additional notable achievements include (1) the college revised the IPPE curriculum for the new integrated curriculum to place the experiences after P1 and P2 with spiral integration and purposeful sequencing to maximize the IPPE experiences, (2) AACP Experiential Award during COVID-19 pandemic, and (3) during COVID-19, sufficient practice sites were secured for IPPEs, and progression and graduation were not compromised.

AACP survey data related to standard 12 for faculty indicated strong agreement among faculty that the curriculum was taught at an appropriate depth for critical concepts and principles (FQ34, 84-94% agree of strongly agree), which was similar or above the national average for this question over the last six years. Student responses to the AACP surveys indicated strong agreement that IPPEs were valuable in preparing them for APPEs (SQ26, 84-94% agree or strongly agree), allowed student involvement in direct patient care activities (SQ27, 86-90% agree or strongly agree), and were of high quality (SQ28, 86-91% agree or strongly agree). Alumni responses to AACP surveys indicated agreement that the curriculum prepared them to enter their first pharmacy job (AQ10, 80-84% agree or strongly agreed), which was similar to national response rates (86% agree) during that time period.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

[TEXT BOX] [1,000 character limit, including spaces]

Standard No. 13: Advanced Pharmacy Practice Experience (APPE) Curriculum: A continuum of required and elective APPEs is of the scope, intensity, and duration required to support the achievement of the Educational Outcomes articulated in Standards 1–4 and within Appendix 2 to prepare practice-ready graduates. APPEs integrate, apply, reinforce, and advance the knowledge, skills, attitudes, abilities, and behaviors developed in the Pre-APPE curriculum and in co-curricular activities.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ A map/crosswalk of all advanced pharmacy practice experiences against the activities listed in Appendix 2 of the Standards. *(Note: Each practice experience should be mapped to the activities listed and the map should demonstrate that students' experiences would cover all the activities. The list of activities mapped, however, can include activities not specifically listed in Appendix 2.)*

    [13A Mapping with Appendix 2 2024]

☑ Overview of APPE curriculum (duration, types of required and elective rotations, etc.)

    [13B OverviewofAPPECurriculum] *APPE Manuals also contain specifics of APPE curriculum*

☑ Advanced pharmacy practice experience student manual

    [13C APPE Manual_2023-24]

    [13D Ambulatory Care APPE Manual 2023-24]

    [13E APPE Manual 2023-2024 – Institutional APPEs]

☑ Advanced pharmacy practice experience preceptor manual

    [13F Preceptor Manual Final Version 2024]

☑ Advanced pharmacy practice experience student and preceptor assessment tools

    [13G TCEP_DRUG_INFORMATION_INQUIRY_EVALUATION_FORM]

    [13H TCEP_JOURNAL_CLUB_EVALUATION]

    [13I TCEP_PRESENTATION_EVALUATION_FORM]

    [13J TCEP_SOAP_NOTE_FORM]

    [13K WRITTEN_ASSIGNMENT_EVALUATON_FORM]

    [13L Advanced Community Midpoint and Final Evaluation]

    [13M Advanced Hospital Pharmacy Midpoint & Final Preceptor Evaluation of Student 2024_Evaluation]

    [13N Ambulatory Care Midpoint and Final Evaluation]

    [13O Internal Medicine Preceptor Evaluation of Student Midpoint & Final 2024]

☑ Student advanced pharmacy practice experience evaluation data documenting exposure to diverse patient populations and interprofessional, team-based patient care

    [13P UHCOP APPE Interventions - Diverse Patient Population 2022-2024]

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 29-38

[13Q Standard 13 SSQ_29-38_ASQ_9,13]

☑ AACP Standardized Survey: Alumni – Questions 9, 13

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.

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
13.1. Patient care emphasis – Collectively, APPEs emphasize continuity of care and incorporate acute, chronic, and wellness-promoting patient-care services in outpatient (community/ambulatory care) and inpatient (hospital/health system) settings.	✔	○	○
13.2. Diverse populations – In the aggregate, APPEs expose students to diverse patient populations as related to age, gender, race/ethnicity, socioeconomic factors (e.g., rural/urban, poverty/affluence), and disease states)	✔	○	○
13.3. Interprofessional experiences – In the aggregate, students gain in-depth experience in delivering direct patient care as part of an interprofessional team.	✔	○	○
13.4. APPE duration – The curriculum includes no less than 36 weeks (1440 hours) of APPE. All students are exposed to a minimum of 160 hours in each required APPE area. The majority of APPE is focused on direct patient care.	✔	○	○
13.5. Timing – APPEs follow successful completion of all IPPE and required didactic curricular content. Required capstone courses or activities that provide opportunity for additional professional growth and insight are allowed during or after completion of APPEs. These activities do not compromise the quality of the APPEs, nor count toward the required 1440 hours of APPE.	✔	○	○
13.6. Required APPE – Required APPEs occur in four practice settings: (1) community pharmacy; (2) ambulatory patient care; (3) hospital/health system pharmacy; and (4) inpatient general medicine patient care.	✔	○	○
13.7. Elective APPE – Elective APPEs are structured to give students the opportunity to: (1) mature professionally, (2) secure the breadth and depth of experiences needed to achieve the Educational Outcomes articulated in Standards 1–4, and (3) explore various sectors of practice.	✔	○	○
13.8. Geographic restrictions – Required APPEs are completed in the United States or its territories or possessions. All quality assurance expectations for U.S.-based experiential education courses apply to elective APPEs offered outside of the U.S.	✔	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe 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.

☑ Describe, in aggregate, how the practice experiences assure that students have direct interactions with diverse patient populations in a variety of health care settings.

☑ Describe how the college or school ensures that students' advanced pharmacy practice experience hours fulfill the required four practice settings.

☑ Describe how the college or school provides students' an in-depth experience in delivering direct patient care as part of an interprofessional team.

☑ Describe how the college or school provides students with elective advances practice pharmacy experiences that allow students the opportunity to mature professionally, meet the educational outcomes articulated in Standards 1-4, and explore a variety of practice sectors.

☑ Describe how the goals and outcomes for each pharmacy practice experience are mapped to the activities listed in Appendix 2 of Standards 2016 to ensure that students' experience will cover, at a minimum, all the listed activities.

☑ Describe how the college or school is applying the guidelines for this standard, and the additional guidance provided in Appendix 2, in order to comply with the intent and expectation of the standard.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

In P4, the APPE curriculum consists of seven APPEs that are completed over the course of 42 weeks. Each APPE is six weeks in length with the student obtaining a minimum of 240 hours for each APPE, for a total of 1,680 hours, which exceeds the ACPE requirement of 1440 hours. There are four required and three elective APPEs. The four required rotations are Advanced Community, Advanced Hospital Pharmacy, Ambulatory Care and Internal Medicine. All required APPEs are completed within the United States, and students do not receive any payment for APPEs. Each rotation requires students to document on-site rotation hours in CORE ELMS, and all rotation hours are confirmed with the preceptor, ensuring the hours are fulfilled for each rotation and the required four practice settings. The APPEs build upon the competencies gained during IPPEs and follow the completion of all didactic and co-curricular requirements. The APPEs are a culmination of our students' three years of didactic and introductory pharmacy practice experiences. These advanced experiences help students continue to forge their professional identities as pharmacists and prepare them to be practice ready upon graduation.

Student Interactions with Diverse Patients in a Variety of Healthcare Settings

The college is in the nation's fourth largest city, Houston, with an expansive health care infrastructure that includes the world's largest medical center, Texas Medical Center (TMC). In addition to Houston and its surrounding cities, students complete rotations at affiliated sites in other cities in Texas, as well as facilities outside of Texas. The UHCOP Rio Grande Valley (RGV) Pharm.D. Satellite Program has afforded students opportunities to complete their rotations in settings with predominantly underserved and Hispanic patients. Through these sites, students gain direct patient care experience in a variety of health care settings and serve diverse patient populations, e.g. pediatrics, adults and geriatrics, with varying socioeconomic status. Direct patient interaction can occur in different modalities, such as face to face, telephonic and virtual. There are blended practice settings where students have both distributive pharmacy and direct patient care activities, such as a community pharmaceutical care infusion rotation where they prepare and dispense medications and work with the health care team to provide patient education.

The community pharmacy setting may encompass both urban and suburban areas, spanning independent pharmacies as well as traditional chain and grocery pharmacies. The hospital sites are just as diverse with students getting the opportunity to rotate in community, county, federal and academic hospitals. There are renowned sites for pediatric care (Texas Children's Hospital and Children's Memorial Hermann Hospital) and a world-class cancer treatment center at the University of Texas MD Anderson Cancer Center. The faculty have practice sites at Michael E. DeBakey VA Medical Center, where they practice cardiology/critical care and psychiatry. The college also has dedicated ambulatory care faculty preceptors at Vecino Health Centers Denver Harbor Family Health Center, which serves mainly underserved and Hispanic populations. Other faculty practice at Houston Methodist Hospital with a focus on geriatric care, while Infectious Diseases faculty are at the forefront of antimicrobial stewardship and research at Baylor St. Luke's Medical Center. Students also

have access to long-term care facilities, managed care pharmacies, academia, and industry, which provide a breadth of experiences that keep up with the current trends in pharmacy. To ensure APPE students directly interact with diverse patient populations in these various healthcare settings, they are required to document ten patient care interventions. These interventions, logged in CORE ELMS, track age, gender, ethnicity, and medication- and disease-related problems.

Elective Advanced Pharmacy Practice Experiences Available to Students

The college offers a robust array of experiential electives for students to mature professionally and explore a variety of practice sectors. The elective rotations can be tailored to a student's area of interest, and outcomes assessments are similar to those of the required rotations. The OEP faculty meet with P3 students individually prior to rotation selection to address questions, discuss their areas of interests and explain how rotation electives can provide opportunities for professional development. Students take three APPE electives, two of which must be patient-focused. Patient-focused electives include institutional electives such as solid organ transplant, cardiology, critical care, oncology, pediatrics and psychiatry. These electives take advantage of the progressive pharmacy practice at sites in TMC such as UT MD Anderson, Ben Taub Hospital and Memorial Hermann Health System. UHCOP's award-winning Infectious Diseases faculty offer electives in antimicrobial stewardship, infectious diseases and clinical pharmaceutical research. Ambulatory care electives include specialty pharmacy, infusion, hematology, psychiatry and veterinary pharmacy.

The OEP has expanded electives to reflect current practices in pharmacy and health care, such as medication safety, pharmacy informatics, clinical pharmaceutical research, e.g. Infectious diseases, hematology/oncology and health outcomes, and transitions of care. The college also has a collaboration with Humana to offer competitive managed care rotations in Kentucky. Students interested in the pharmaceutical industry have been accepted into coveted rotations with Bristol Myers Squibb and Gilead. Legal and regulatory rotations are also popular with students who were able to compete for rotations at the Centers for Disease Control and Prevention, U.S. Food and Drug Administration, and the Texas State Board of Pharmacy. The depth and breadth of electives offered by the college have given the pharmacy students ample opportunities to develop their professional identity.

Throughout their APPEs, and specifically during core rotations and patient-focused electives, students are integrated into the health care teams at their assigned sites. They are expected to round with the health care team in institutional settings and develop patient care plans along with other health care providers. Students in ambulatory care clinic rotations work directly with the other health care members, interviewing patients, making recommendations and counseling patients on their medications. Of note, there are now four nearby medical schools (Baylor College of Medicine, McGovern Medical School at UTHealth Houston, UTMB Galveston, and University of Houston Tilman J. Fertitta Family College of Medicine), which allow our students to collaborate in interprofessional settings within the affiliated health care sites.

Mapping of Experiences to Activities in Appendix 2 and How Performance is Assessed

APPE outcomes are mapped to the college's PPSLOs, CAPE outcomes, PPCP, EPAs and activities listed in Appendix 2 **[13A Mapping with Appendix 2 2024].** These outcomes are measured via preceptor evaluations of students and students' rotation assignment assessments. Preceptor evaluations of students occur midpoint and at the end of rotation. The preceptor midpoint evaluation of the student is formative, allowing students to obtain constructive feedback for improvement during the rotation. The preceptor final evaluation is summative and contributes to the overall grade for the rotation. As in the IPPE evaluation tools, the APPE rubric scale was developed by TCEP and includes both performance and entrustment scales. The preceptor evaluation of students considers proficiencies in foundational knowledge, pharmacy management, pharmacy practice skills, communication, and professionalism. Low score alerts from preceptor midpoint evaluations in CORE ELMS as well as the APPE Week 2 Check-in have been essential tools for APPE directors to target students who may need early intervention. Week 2 Check-in is unique to UHCOP and was implemented to allow students to reach out to OEP with any concerns over the rotations. Low score alerts for midpoint evaluations are flagged when any Needs Improvements (NIs) or Significant Deficits (SDs) are identified. APPE directors then contact the student and preceptor as appropriate depending on the nature of the issues identified. Professional improvement plans may be put in place if deemed necessary. Regular monitoring occurs afterward for these students throughout the remainder of the rotation until the issues are resolved.

Rotation activities in the four required rotations (Advanced Community, Advanced Hospital, Ambulatory Care and Internal Medicine) are standardized for each rotation to ensure consistency in assessment. For example, in the Internal Medicine rotation, all students are required to present a case presentation, journal club, written assignment and document ten patient care interventions in CORE ELMS. The assessments for the case presentation and journal clubs were developed by TCEP in collaboration with other Colleges of Pharmacy in Texas. For elective rotations, assignments are tailored to be patient-focused or non-patient focused. Students are expected to document patient care interventions. Data from these interventions allow the OEP to review the different types of interactions with patients and health care professionals. The interventions are also useful in assessing the types of pharmacy activities that students are engaging in on their APPEs.

Students receive a letter grade for each APPE based on the preceptor rotation evaluation rubric, assignments, e.g. case presentation, journal club and drug information inquiry, APPE Director grade for professionalism, and final exam on certain rotations (Advanced Hospital Pharmacy, Advanced Community Pharmacy and Internal Medicine). Final exams are conducted on ExamSoft. The exams are mapped to the UHCOP PPSLOs. UHCOP APPE rotations are grade-based (A, B, C, D, F) and students receiving a "D" or "F" will need to repeat the APPE.

Notable Achievements, Innovations and Quality Improvements

A notable APPE design achievement is the development of numerous longitudinal APPE rotations in collaboration with several health-system sites in the Houston, Dallas, Temple, and Beaumont, Texas areas. These longitudinal APPE programs provide many benefits to the students, site and the college. First, the onboarding process is minimized and streamlined for all. Secondly, the students and preceptors can collaborate on longitudinal projects, e.g. formal poster presentations at state and national meetings. The longitudinal APPEs incorporate students in consistent activities that help in the site's workflow and patient care. Preceptors can support the student's professional development through longitudinal activities and mentorship to prepare them for postgraduate training and practice. The college benefits by maintaining consistent sites and preceptors, which helps with quality assurance. Other collaborations that have been fruitful include Humana and RGV Pharm.D. Satellite Program. Humana has preferentially provided managed care rotations and given us access to an ambulatory care site focused on geriatric care. The RGV collaboration has allowed students to be immersed in predominantly Hispanic patient populations while getting experience in many different practice areas such as pediatrics, psychiatry and cardiology.

Lastly, the OEP prepares an extensive APPE orientation for P4 students prior to the start of their rotations. This includes overviews of assignments, expectations and panel discussions comprised of preceptors, residents and recent graduates. These novel APPE orientation efforts were described and published in the AACP Experiential Education Winter Newsletter in 2022. The OEP, in conjunction with the Director of Co-Curriculum and pharmacy practice faculty, provide professional development throughout the APPE year. These development sessions include workshops on LinkedIn optimization, preparation of CV and resumes, interview preparation, panel discussions from hiring managers, and networking. Additionally, the OEP is an integral part of TCEP, of which the current ADEP provides oversight and leadership. The college successfully transitioned to CORE ELMS, a pivotal move that enabled UHCOP to align with other pharmacy colleges in Texas by adopting a unified electronic learning management platform. Notably, the UHCOP OEP was designated with superuser status within the initial launch, and the APPE directors were invited to speak at the CORE ELMS national summit in 2021. The APPE directors presented their work on the Week 2 Check-in and the utility of early intervention for at-risk students at the AACP National Meeting in 2022 and 2023. Lastly, the OEP was able to secure sufficient APPE practice sites for a large graduating class during the COVID-19 pandemic despite sites cancelling rotations due to numerous reasons. The team was able to support students' concerns regarding COVID-19 by providing flexibility in completing APPEs without compromising progression and graduation. These accomplishments were recognized by AACP with an Award for Excellence in Experiential Education in 2021.

AACP Survey Data

On AACP surveys from 2018-2023, graduating students overwhelmingly indicated they felt prepared to enter APPEs, and their APPEs allowed them opportunity to engage in direct patient care, were of high quality, and allowed them to collaborate with other health care providers to take care of diverse patient populations (SQ 29-38 – agree or strongly agree 90-100%). These student responses were similar or higher than peer and national comparisons for each of the questions.

For alumni survey questions related to this standard, response rates were low overall, but indicated alumni felt prepared to enter APPEs (AQ9 – agree or strongly agree 90-96%) and that their APPEs were of high quality (AQ10 – agree or strongly agree 84-93%).

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

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Subsection IIC: Students

Standard No. 14: Student Services: The college or school has an appropriately staffed and resourced organizational element dedicated to providing a comprehensive range of services that promote student success and well-being.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Curriculum Vitae of the student affairs administrative officer

> **[14A CV - Asst Dean of Student and Professional Affairs]**

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

> **[14B Student Services Organization Chart 6.2024 Updated]**

☑ Student Handbook and/or Catalog Handbook (college, school or university)

> **[14C 2024-2025-pharmd-student-handbook-final]**

☑ Copies of information distributed to students regarding student service elements (financial aid, health insurance, etc.)

> **[14D Summer Financial Aid Pharm23]**
>
> **[14E Student Health Insurance Policy 2022-23]**
>
> **[14F PharmD-prerequisites-rev08-2022]**
>
> **[14G ACPE Complaint Policy - in Student Handbook]**
>
> **[14H PharmD Academic Standing Requirements for Progression.2016]**
>
> **[14I PharmD ACPE Complaints policy.6.25.21]**

☑ Copies of policies that ensure nondiscrimination and access to allowed disability accommodations

> **[14C 2024-2025-pharmd-student-handbook-final]**

Data Views and Standardized Tables:

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

> **[14J Standard 14 SSQ_39-43,45,49-50_PSQ_5_ASQ_11]**

☑ AACP Standardized Survey: Student – Questions 39-43, 45, 49, 50

☑ AACP Standardized Survey: Alumni – Question 11

☑ AACP Standardized Survey: Preceptor – Question 5

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.

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
14.1. FERPA – The college or school has an ordered, accurate, and secure system of student records in compliance with the Family Educational Rights and Privacy Act (FERPA). Student services personnel and faculty are knowledgeable regarding FERPA law and its practices.	✔	○	○
14.2. Financial aid – The college or school provides students with financial aid information and guidance by appropriately trained personnel.	✔	○	○
14.3. Healthcare – The college or school offers students access to adequate health and counseling services. Appropriate immunization standards are established, along with the means to ensure that such standards are satisfied.	✔	○	○
14.4. Advising – The college or school provides academic advising, curricular and career-pathway counseling, and information on post-graduate education and training opportunities adequate to meet the needs of its students.	✔	○	○
14.5. Nondiscrimination – The college or school establishes and implements student service policies that ensure nondiscrimination as defined by state and federal laws and regulations.	✔	○	○
14.6. Disability accommodation – The college or school provides accommodations to students with documented disabilities that are determined by the university Disability Office (or equivalent) to be reasonable, and provides support to faculty in accommodating disabled students.	✔	○	○
14.7. Student services access* – The college or school offering multiple professional degree programs (e.g., PharmD/MPH) or pathways (campus and distance pathways) ensures that all students have equitable access to a comparable system of individualized student services (e.g., tutorial support, faculty advising, counseling, etc.).	✔	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe the 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, and counseling).

☑ Describe the sections of the student handbook that deal with specific requirements of the standard and guidelines.

☑ Describe 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.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

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The UHCOP Office of Student and Professional Affairs (OSPA) oversees and provides administrative services for students in the professional program. The services provided include academic advising and counseling, admissions, recruiting, scholarship and financial aid, student events and professional activities, and career advising and graduation.

Organization of the Office of Student and Professional Affairs
The staff of OSPA includes the Assistant Dean for Student and Professional Affairs (ADSPA), Director of Admissions and Enrollment, Admissions Advisor, Director of Pharmacy Recruiting, Director of Pharmacy Admissions, Director of Pharmacy Student Services, Student Success Advocate, Program Coordinator, Program Manager, Financial Aid Advisor, and college work-study students. Notably, OSPA has significantly grown in staff in recent years to better assist students.

The ADSPA serves as the faculty administrator and is primarily responsible for developing, implementing, and providing oversight of student services, student professional development, and admissions and recruiting processes. The ADSPA is also responsible for verifying the completion of degree requirements and reports to the Executive Associate Dean (EAD). The Director of Pharmacy Student Services provides day-to-day oversight of office operations and reports directly to the ADSPA. The Director of Pharmacy Student Services and the Student Success Advocate serve as academic advisors. Other OSPA responsibilities include assisting the activities of the Pharm.D. Admissions and Progression and Pharm.D. Student Affairs Committees. In addition, OSPA interfaces with many university offices on campus to increase the breadth and scope of services provided to the students. Some of these offices and programs include the Office of Scholarship and Financial Aid, Office of the University Registrar, Office of Admissions, the Graduate and Professional School, University of Houston Libraries, Counseling and Psychological Services (CAPS), Learning Advancements for Undergraduate Cougars of Houston (LAUNCH), Student Health Center, Student Housing and Residential Life, International Student and Scholar Services Office, University Career Services, UH Writing Center, and Justin Dart, Jr. Student Accessibility Center.

Student Services Provided
Advising
The Director of Recruiting, along with other OSPA staff members, attends various student recruiting events including career fairs, graduate fairs, pre-pharmacy association meetings, and other organizational meetings and events at various educational institutions within and outside of Texas. The Director of Recruiting along with the ADSPA, Admissions Advisor, Director of Pharmacy Student Services, Director of Pharmacy Admissions, and Director of Admissions and Enrollment provide valuable admissions counseling services to prospective students. The OPSA staff conducts advising for individuals and groups, and the Director of Pharmacy Recruiting serves as advisor of the pre-pharmacy student organization. Additional information about advising, admissions requirements, professional technical standard requirements, and progression processes are available on the UHCOP website (https://uh.edu/pharmacy/prospective-students/pharmd/) and in the UH Graduate Catalogue.

Prior to orientation, all incoming students complete the Learning and Study Strategies Inventory (LASSI) and pre-matriculation program. Incoming students then meet with their assigned advisor to discuss results of the LASSI and strategies to help set them up for learning success. Incoming pharmacy students also attend a mandatory four-day orientation overseen by OSPA before classes start. The students receive information about UHCOP's mission, policies, and expectations of students in a professional program, including the dress code, and training for using the University's and UHCOP's technology and teaching methodologies.

In addition, all incoming students receive an electronic copy of UHCOP's Student Handbook, which contains detailed information about the professional program and university. Orientation provides an opportunity for new students to interact with UHCOP faculty, staff, current pharmacy students and practicing pharmacists from various fields. It also introduces the various UHCOP student organizations and state pharmacy associations. After orientation, new students participate in the White Coat Ceremony, where they take the Pledge of Professionalism in front of family, friends, faculty, staff and current pharmacy students as they are welcomed to the college and profession.

Advising of students is performed by the Director of Pharmacy Student Services and the Student Success Advocate, while the ADSPA provides career counseling in addition to advising. Students are highly encouraged to meet with their academic advisor twice each semester. This, plus an enhanced early intervention process for students experiencing academic challenges, increases the student's ability to complete professional courses and progress on time. In the early intervention process, course coordinators contact students struggling in their course to identify and address areas of improvement and barriers. The OSPA also monitors student grades via Canvas and reaches out to students to help with academic advising and connect the student with resources if needed. Standard No. 17 contains more detail regarding the early intervention process. Students routinely receive information about course registration and other topics to ensure that they enroll in the necessary coursework.

A notable achievement for OSPA is increased career advising for all P1-P4 students. This achievement is reflected in the AACP survey results, with an increase in student satisfaction regarding career planning seen over the last several years (Student Survey Q40 – 86-94% agree or strongly agree). Career pathway and post-graduate education counseling is provided by the college both formally and informally and delivered by various faculty and administrators. P1 students are encouraged to meet with the ADSPA in the spring of their first year to discuss the results of their APhA Career Pathway survey and talk more about career aspirations, goals and experiences. P2 students are encouraged to meet with the ADSPA for career advising. P3 students are required to find a pharmacist mentor and meet with the Experiential Directors for Career Advising and APPE Planning. Student organizations routinely bring in practicing pharmacists from a variety of practice sites to provide insights on possible career paths. Information on residency and fellowship programs is also provided by several student organizations and the college. In P3, the college offers a residency bootcamp longitudinal program, hosted and taught by local residents in TMC. The faculty and staff of OEP also provide career pathway and residency guidance routinely during P3 and P4. The concerted efforts of OSPA have helped improve survey data regarding access to guidance on career planning, which has decreased the number of students who disagree or strongly disagree from regularly >10% to <2% in 2022.

Students enrolled in the dual (Pharm.D./MBA - https://uh.edu/pharmacy/current-students/dual-and-consecutive-programs/pharmd-mba/) degree programs have access to the same personnel and resources provided by OSPA as students enrolled solely in the professional program. All students take their professional classes at the main Houston campus, but students completing IPPE's and APPE's at locations outside of Houston also have access to the same services from OPSA as detailed above.

Financial Aid Advising
Approximately 95% of all UHCOP students receive some form of financial aid. The financial aid officer resides in the Scholarship and Financial Aid office and is available to students via email, in person and virtually. The ADSPA will continue to assess financial aid services and address changes as needed. Services offered to both prospective and current professional students include distribution of financial aid information, financial aid advising sessions and assisting the Pharm.D. Student Affairs Committee with the scholarship application process, decision making and awarding of scholarship information to current students. A list of internal and external scholarships and selection criteria is available on the college's website (https://uh.edu/pharmacy/_documents/students/pharmd/uhcop-scholarships-and-fellowships-2023-24.pdf). Currently, there are more than 80 scholarships available within the college for student pharmacists annually, with approximately 25% being financially need-based.

Health Care Access
The University of Houston Student Health Center and Campus Pharmacy, both located in the Health 2 building, serve the medical needs of students, faculty, and staff as well as provides a walk-in clinic that offers immediate access to medical services in addition to specialty clinics such as Men's Health, Women's Health, and Psychiatry. The Student Health Center also provides pharmacy and diagnostic services along with preventive services, such as immunizations and patient education. The University offers students an opportunity to purchase student health insurance https://uh.edu/healthcenter/charges-and-insurance/student-health-insurance. Additional services available on campus include vision (conducted by the College of Optometry), dentistry, CAPS, Justin Dart, Jr. Student Accessibility Center, Campus Recreation and Wellness Center, and University Libraries. These services provide students with access to academic enhancement and mental and physical health services. The UHCOP required immunization policy is outlined in the college's Pharm.D. Student Handbook. The college tracks student immunizations using CORE ELMS. Using the electronic learning management systems has simplified the immunization record tracking process by eliminating the task of collecting paper files and allowing students to upload documents to the secure online learning management system directly. The OEP Program Manager monitors compliance of immunization.

Disabilities Accommodations
The University of Houston and UHCOP provides equal treatment and opportunity to all persons without regard to race, color, religion, national origin, sex, age, disability, veteran status, or sexual orientation except where such distinction is required by law. In addition, the OSPA works with faculty and the Justin Dart, Jr. Student Accessibility Center when

needed to provide support to students with acknowledged disabilities or learning accommodations. Support is also provided to faculty in efficiently teaching students with acknowledged disabilities. During new student orientation, in the Pharm.D. Student Handbook, on each standardized course syllabus used in the curriculum, and on the college website, students are informed on how to request accommodation for acknowledged disabilities. Information on disabilities is also given to students during each Dean's Town Hall every semester. Students will receive accommodation from the Justin Dart, Jr. Student Accessibility Center, which then notifies and works with faculty to accommodate the student appropriately. The Justin Dart, Jr. Student Accessibility Center has launched an online portal for faculty and students to manage accommodations for their courses. The ADSA works with the testing center and faculty to communicate and coordinate accommodations for courses and testing. Notably, in the fall of 2023 the University created a new committee, the Partners in Access Committee. This new committee is a formal University committee focused on an effort to improve communication and access for faculty, students and colleges. The meetings are attended by the Assistant Dean for Student and Professional Affairs and Assistant Dean of Graduate Programs.

FERPA
All student record information is kept confidential and maintained in compliance with the Family Educational Rights and Privacy Act (FERPA). Only OSPA staff, the ADAA, and the ADSPA have access to student files, and electronic data entry of applicant and professional student information into databases is limited to the ADAA, ADSPA, and designated staff members. Pharm.D. Admissions and Progression Committee members, as well as the already mentioned faculty and staff, have access to students' admission data directly through WebADMIT, PharmCAS' web-based admission system. To ensure compliance with all state laws and regulations concerning student information confidentiality, all University of Houston personnel are required to complete an annual online FERPA training and exam with a minimum passing score of 90%.

AACP Standardized Survey Data
Student survey data (Q39-43, 45, 49, 50) strongly supports that students agree they receive appropriate advising, career planning and financial aid advising. The survey data also indicated students are provided access for learning and disability accommodations and feel they have access to health and wellness services. Survey responses related to these questions have remained stable over the last several years, with most responses above 90% agreement, and at higher levels than peer school and national comparisons.

Many opportunities are available for students to learn about additional education opportunities, especially through student organization meetings and events. The career pathways discussed with students also review post-graduation training requirements. A relevant survey question for college alumni asked about information being made available when they were a student regarding postgraduate training opportunities (Q11). Alumni either agreed or strongly agreed 90-92% of the time with this statement, which was slightly above the reported national average for this domain.

Preceptor survey question five covers preceptor comfort in using the college's identified processes for dealing with harassment and discrimination. From 2019 to 2023, most preceptors (79-90%) agreed they were familiar with these college policies, which were either at or above the national responses from other colleges of pharmacy. The OEP has previously revised the preceptor manual that addresses more college policies, including how to handle harassment and discrimination. These updates helped address the preceptor's comfort in this domain.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/or**	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	• 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**

	• 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.	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
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

[TEXT BOX] [1,000 character limit, including spaces]

Standard No. 15: Academic Environment: The college or school develops, implements, and assesses its policies and procedures that promote student success and well-being.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

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

> [**Program Information on College Website**]

☑ Student complaint policy related to college or school adherence to ACPE standards

> [**15A PharmD-acpe-Student Complaints Policy-6-25-21**]

☑ Number and nature of student complaints related to college or school adherence to ACPE standards (inspection of the file by evaluation teams during site visits)

> ***No student complaints filed with ACPE since last full site visit***

☑ List of committees involving students with names and professional years of current student members

> [**15B 2-23-2024 UHCOP STANDING COMMITTEE STUDENT ROSTER**]

☑ College or school's code of conduct (or equivalent) addressing professional behavior

> [**15C UHCOP-Code-of-Ethical-and-Professional-Conduct**]

☑ Policies related to academic integrity

> [**15C UHCOP-Code-of-Ethical-and-Professional-Conduct**]
>
> [**15D PharmD Academic Grievance Policy.4.29.2016**]
>
> [**15E 2024-2025-pharmd-student-handbook-final**]

☑ Recruitment brochures

> [**15E2 UHCOP Prospective Student Recruitment Brochure**]
>
> [**Prospective Students Recruitment Weblink**]

Required Documentation for On-Site Review:

☑ The Student Complaints File ***No student complaints filed with ACPE since last full site visit***

Data Views and Standardized Tables:

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

> [**15F Standard 15 FSQ_38,39_SSQ_44,47,48,50,56,57,60_PSQ_3,4**]

☑ AACP Standardized Survey: Faculty – Question 38, 39

☑ AACP Standardized Survey: Student – Questions 44, 47-48, 50, 56-57, 60

☑ AACP Standardized Survey: Preceptor – Questions 3-4

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

[15G PPSLO Assessment Plans 2020-2023]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
15.1. Student information – The college or school produces and makes available to enrolled and prospective students updated information of importance, such as governance documents, policies and procedures, academic calendars, handbooks, and catalogs.	✔	◯	◯
15.2. Complaints policy – The college or school develops, implements, and makes available to students a complaints policy that includes procedures for how students may file complaints within the college or school and also directly to ACPE regarding their college or school's adherence to ACPE standards. The college or school maintains a chronological record of such student complaints, including how each complaint was resolved.	✔	◯	◯
15.3. Student misconduct – The college or school develops and implements policies regarding academic and non-academic misconduct of students that clearly outline the rights and responsibilities of, and ensures due process for, all parties involved.	✔	◯	◯
15.4. Student representation – 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.	✔	◯	◯
15.5. Distance learning policies* – For colleges and schools offering distance learning opportunities, admissions information clearly explains the conditions and requirements related to distance learning, including full disclosure of any requirements that cannot be completed at a distance. **(Not applicable)**	✔	◯	◯

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe the participation and contribution of students on college or school committees.

☑ Describe the organization, empowerment, and implementation of a student government association or council.

☑ Describe 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.

☑ Provide examples of quality improvements in the college or school that have been made as a result of student representation and perspectives.

☑ Describe how the complaint policy is communicated to students.

☑ Describe how the college or school handles student misconduct.

☑ Describe how the college or school provides information regarding distance education opportunities (if applicable). **Not applicable**

☑ Provide the number of complaints since the last accreditation visit and the nature of their resolution.

☑ Describe any other notable achievements, innovations or quality improvements.

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

Information about UHCOP's professional pharmacy program is readily accessible to both current and prospective students. It can be found in the UH Undergraduate, Graduate and Professional Catalogs, on the UHCOP website and within the UHCOP 2024-2025 Student Handbook. These resources are regularly reviewed and updated, and an updated version of the Student Handbook is provided annually. Additions or alterations to policies and procedures are promptly communicated to students through various means, including email, during face-to-face meetings such as convocations, and via written correspondence.

The college's mission, goals and objectives are outlined in the UH Graduate Catalog, on the UHCOP website, and within the UHCOP Student Handbook. Policies related to Pharm.D. admissions, along with guidance on preparing for and applying to the professional program, are accessible through the UHCOP admission website (https://uh.edu/pharmacy/prospective-students/pharmd/admissions-requirements/index) and the PharmCAS website. Comprehensive information regarding the professional pharmacy program, including degree plans, course descriptions and credit hours, and academic policies pertaining to student responsibilities, student recovery programs, Texas State Board of Pharmacy Intern Registration, academic standing, background checks, immunization requirements, withdrawals, health insurance, experiential programs, and graduation requirements can be found in the 2024-2025 UHCOP Student Handbook and the UH Graduate and Professional Catalog.

The college has established clear policies to address student concerns. The ACPE Student Complaints Policy, which details procedures for addressing complaints related to accreditation standards, is accessible on both UHCOP and main university website. **[15A PharmD-acpe-Student Complaints Policy-6-25-21]** The UHCOP Grievance Policy and Procedure, outlining students' rights to due process and appeals, is available on our website. **[15D PharmD Academic Grievance Policy]**

 Grievance concerns go to the Pharm.D. Student Affairs Committee for review. Students are informed about both policies during their new student orientation and are provided with copies in the UHCOP 2024-2025 Student Handbook. Students then acknowledge their understanding of these policies through a signed statement. Additionally, students receive annual reminders at the beginning of the fall semester regarding these policies, and subsequent procedures for filing a complaint or grievance. The Associate Dean for Academic Affairs maintains a chronological record of student complaints and their resolutions. There have been no formal complaints submitted to ACPE since the last accreditation cycle (2017).

Faculty and students share the responsibility of upholding the college's mission, which is to prepare students as innovative practitioners characterized by professionalism, leadership, life-long learning and ethical behavior. Our current UHCOP Code of Ethical and Professional Conduct explicitly defines academic honesty and professional misconduct, describes appropriate penalties for specific situations, outlines the creation and operation of a review board, and delineates the process for appeals. The Code of Conduct review board consists entirely of student peers, with two faculty chairs that coordinate meetings and reviews. All complaints, whether related to academics or professionalism, are addressed with adherence to due process.

The college values the perspectives and feedback of our students and actively seeks student input through multiple mechanisms including student organizations, robust student representation on college committees and policy development bodies, e.g. DSAC and DGSAC, as well as involvement in multiple assessment and evaluation activities. The Pharmacy Council, our college's student government body, plays a pivotal role in fostering collaboration among the over 20 professional student organizations. Pharmacy Council serves as a bridge between students, student organizations and the college's faculty and administration. Pharmacy Council has representation from each pharmacy student organization and class (P1-P4), with two representatives serving from each organization - one elected and the other as an alternate. Pharmacy Council has its own governance and elects a president, vice president, secretary and treasurer, with guidance from the ADSPA as the faculty advisor. The council actively addresses issues and concerns related to student life and

student services and takes the initiative to develop programs and projects aimed at enhancing the professional culture within the college. The council meets monthly and maintains continuous communication through email. Additionally, UHCOP has a student senator seat on the University's Student Government Association, serving as a link between students at the college and the university. The college uses multiple methods to inform the students of who their student representatives and leaders are to allow students the appropriate communication to reach out to student leaders to discuss change.

Various student committees and channels have been purposefully established to ensure student perspectives reach the faculty and administration. The Dean's Student Advisory Council (DSAC) comprises of three elected representatives from each of the four classes (P1-P4), acting as liaisons between their class and the Dean. They are responsible for conveying concerns, requests and ideas from their classmates to the Dean, and for facilitating open and two-way communication. DSAC members play a key role in keeping their peers informed about new developments within UHCOP. At the start of the fall semester, a Dean's Town Hall is held for each of the P1 through P3 classes providing updates on the state of the school and any changes for the academic year. In the spring semester, a Dean's Town Hall is held with each of the P1 through P3 classes, offering students the opportunity to discuss topics of their choosing. Additionally, a faculty Classmeister, who is a volunteer faculty representative that longitudinally serves as a class mentor, is introduced to each entering class during new student orientation. The Classmeister serves the class and helps to resolve class issues and ensure effective communication. Prospective students and UHCOP student ambassadors provide feedback to the Office of Student Services after each interview day. The Dean regularly visits each class semester to inform students about college events and provide opportunities for questions and concerns. The college actively encourages open communication, and faculty and staff are readily available to address student questions, comments and suggestions. We are committed to fostering a learning environment that reflects the needs and insights of our student body.

Students also participate in the college's governance by serving as members on numerous standing college committees. The students are appointed by the Dean based on candidates submitted by their peers, via the Pharmacy Council. Students are actively involved in the following committees (Committee, (no. of students)): Assessment (2), Graduate Studies (3), Information Technology (2), PharmD Admissions and Progressions (1), PharmD Curriculum (2), PharmD Experiential Advisory (2), PharmD Student Affairs (2), and Strategic Planning (2). The PharmD Admissions and Progressions Committee has had student voting since 1999, which affords a student voice and feedback on the incoming student body (students do not vote on student progression issues). In 2019 students were also granted select voting privileges on four additional committees (Assessment Committee, Graduate Studies Committee, PharmD Curriculum Committee, PharmD Student Affairs Committees). Student representation is also numerous on several councils such as the Dean's PharmD Student Advisory Council (11), Student Wellness Advisory Council (8), and the Dean's Graduate Student Advisory Council (9). Up to twelve students are involved in the Board of Ethical and Professional Conduct and two students attend the faculty business meetings. For the Board of Ethical and Professional Conduct, four students are elected by their peers, four are appointed by the ADAA and four are peer elected alternates, one per class cohort. These students hold voting memberships on the Board of Ethical and Professional Conduct. The Pharmacy Council President participates in faculty retreats and meetings and serves as a member of the UHCOP Strategic Planning Committee. Each ACPE self-study subcommittees has at least one student member appointed to provide feedback and student perspectives.

The college employs various instruments and methods to capture valuable student perspectives, including student evaluations of teaching faculty members conducted through CourseEval™ each semester, and Qualtrics surveys to assess resident/fellow and guest lectures. Faculty routinely use results of the course evaluations to make changes for future years based on student feedback and often share these course evaluation results from previous years at the start of a semester to show students their feedback can generate meaningful change. For experiential learning, students evaluate preceptors and practice sites via CORE ELMS. Students also receive the standardized AACP surveys, New Student Orientation surveys, and P1 Summer Internship Job Program surveys which provide opportunities to provide much needed feedback. The college regularly elicits feedback via surveys related to admissions, recruiting and student services. As previously described, students serve as members of the Curriculum Committee, which provides student feedback and insight into the continuous quality improvement of the curriculum. Focus groups are utilized on an as-needed basis for additional student feedback. Students also serve on the accreditation self-study committees.

The involvement and feedback provided by our students has driven meaningful changes across the college. These changes encompass several areas, such as curriculum adjustments in courses like PCCA Compounding, Literature Evaluation, FIMMRA, and Patient Assessment. These changes were implemented based on student feedback from course evaluations. Additionally, in response to student input, we've introduced a professional dress code for students that was formulated by students and approved by the faculty. Ad hoc committees are routinely created to shape change. One such example is the formation of an Attendance Task Force, equally comprised of students and faculty. This task force, created in 2017 and revisited multiple times, was responsible for crafting a mandatory attendance policy for the PharmD program that was ultimately approved by the faculty and remains in place today. We have also adapted class schedules to better accommodate student needs. For example, lab start times were adjusted from 8 a.m. to 9 a.m. and the biochemistry course was broken into two 1.5-hour sessions instead of one 3-hour session). Furthermore, students were actively engaged in planning meetings for our new college facility, ensuring their input shaped our campus, e.g. microwave room, third refrigerator, and college hall monitors. Moreover, the Code of Ethical and Professional Conduct was thoughtfully developed with extensive student discussion and input and remains a cornerstone of upholding professionalism in our program.

Data from the college's 2018-2023 AACP standardized surveys indicate that the vast majority of faculty agree or strongly agree that the college has an effective process to manage academic misconduct (Q38 – 88-95% agree) and professional misconduct (Q39 – 85-95% agree), which is about 10% higher than national averages responses among all institutions. Graduating students agreed or strongly agreed that the college provided timely information to them regarding important information or events within the college (S Q44 – 89-94% agree). This feedback indicates strong communication from the college to our students and was in line or slightly higher than peer and national averages regarding college level communication. An area of note on the surveys was strong student agreement that they knew which student representatives served on college committees and other leadership roles (92-97% agree). This data is valuable to the college as these student leaders are a great avenue for change. Students also indicated they agreed that the college had an effective process for managing academic and professional misconduct (81-94% agree), which was at or above the agreement rates from peer institutions. When the college's preceptors were asked if they know how to utilize the college's process for managing academic or professional misconduct, the vast majority agreed they know how to utilize the defined procedures, which on a yearly basis was at or above agreement rates with other preceptors from throughout the country.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

Standard No. 16: Admissions: The college or school develops, implements, and assesses its admission criteria, policies, and procedures to ensure the selection of a qualified and diverse student body into the professional degree program.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

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. Colleges and schools that do not participate in PharmCAS will not have access to peer comparison reports for these data.

☑ List of preprofessional requirements for admission into the professional degree program

      [16A pharmd-prerequisites-rev08-2022]

☑ Copies of Early Assurance Program agreement(s) between the college or school and the associated institution(s) or student (if applicable)

      [16B UH-STC student-Coop Memorandum of Agreement_2023-EXAMPLE]

      [16C UH-SFA student-Coop Memorandum of Agreement_fall 22]

      [16D UH-LU Coop student-Memorandum of Agreement_fall 2022]

☑ Enrollment data for the past three years by year and enrollment projections for the next year (if applicable, broken down by branch/campus and by pathway). (Template available for download)

      [16E Enrollment Data Statistics]

☑ Organizational chart depicting Admissions unit and responsible administrator(s)

      [16F Student Services Organization Chart 10.2023 Updated]

☑ Pharmacy College Aptitude Test (PCAT) scores (mean, maximum, and minimum), if required, for the past three admitted classes (required for nonparticipating PharmCAS institutions only) *N/A – UHCOP is a PharmCAS participating institution*

☑ GPA scores (**mean, maximum, and minimum**) for preprofessional coursework for the past three admitted classes (required for nonparticipating PharmCAS institutions only) *N/A – UHCOP is a PharmCAS participating institution*

☑ GPA scores (**mean, maximum, and minimum**) for preprofessional science courses for the past three admitted classes (required for nonparticipating PharmCAS institutions only) *N/A – UHCOP is a PharmCAS participating institution*

☑ Comparisons of PCAT scores (if applicable) and preprofessional GPAs with peer schools for last admitted three admitted classes (nonparticipating PharmCAS institutions will not have access to peer data) *N/A – UHCOP is a PharmCAS participating institution*

☑ List of admission committee members with name and affiliation

      [16G 2023-2024 UHCOP Committees Roster-1-31-24]

☑ Policies and procedures regarding the admissions process including selection of admitted students, transfer of credit, and course waiver policies

      [16H Admissions and Progressions Committee Policy and Procedures 2023-24]

      [16I PharmD Transfer of Professional College Credits]

☑ Professional and technical standards for school, college, and/or university (if applicable)

   [16J PharmD Technical Standards for Pharmacy School Admission]

☑ Copies of instruments used during the admissions process including interview evaluation forms and assessment of written and oral communication

   [16K MMI Rubric assessor.pdf]

   [16L Writing Assessment Scoring Rubric-PharmD]

☑ Section of Student Handbook and/or Catalog (college, school, or university) regarding admissions

   [UH Catalog Admissions Web Link]

☑ Link to websites (or documentation of other mechanisms) that provide to the public information on required indicators of quality

   [Website Link to Public Information/ACPE required quality indicators]

Data Views and Standardized Tables:

Note: PCAT, 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 three years

   [16M Applications Admissions Enrollments for Past 3 Years UHCOP]

☑ Enrollment data for the past three years by year and gender

   [16N UHCOP Enrollment Data by year and gender AAMS2024]

☑ Enrollment data for the past three years by year and race/ethnicity

   [16O UHCOP Enrollment Data by year and race-ethnicity AAMS2024]

☑ PCAT Scores (Mean, Maximum and Minimum) for past 3 admitted classes (if applicable; for participating PharmCAS institutions only)

   [16P UHCOP PCAT Scores for last 3 years AAMS2024]

☑ GPA (Mean, Maximum and Minimum) for past 3 admitted classes (for participating PharmCAS institutions only)

   [16Q UHCOP GPA for last 3 years AAMS2024]

☑ Science GPA (Mean, Maximum and Minimum) for past 3 admitted classes (for participating PharmCAS institutions only)

   [16R UHCOP Science GPA for last 3 years AAMS2024]

Optional Documentation and Data:

☑ Mean PCAT Scores for Admitted Class for Past 3 Years Compared to Peer Schools (for participating PharmCAS institutions only)

   [16S PCAT Comparison AAMS 2018 to 2023]

☑ Mean GPA for Admitted Class for Past 3 Years Compared to Peer Schools (for participating PharmCAS institutions only)

[16T Total GPA Comparison AAMS]

☑ Mean Science GPA for Admitted Class for Past 3 Years Compared to Peer Schools (for participating PharmCAS institutions only)

[16U Science GPA Comparison Mean AAMS]

☑ 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

[16V PharmD Applications 2018-2022 peer comparisons]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
16.1. Enrollment management – Student enrollment is managed by college or school administration. Enrollments are in alignment with available physical, educational, financial, faculty, staff, practice site, preceptor, and administrative resources.	✔	○	○
16.2. Admission procedures – A duly constituted committee of the college or school has the responsibility and authority for the selection of students to be offered admission. Admission criteria, policies, and procedures are not compromised regardless of the size or quality of the applicant pool.	✔	○	○
16.3. Program description and quality indicators – The college or school produces and makes available to the public, including prospective students: (1) a complete and accurate description of the professional degree program; (2) the program's current accreditation status; and (3) ACPE-required program performance information including on-time graduation rates and most recent NAPLEX first-attempt pass rates.	✔	○	○
16.4. Admission criteria – The college or school sets 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. Applicant performance on admission criteria is documented; and the related records are maintained by the college or school as per program/university requirements.	✔	○	○
16.5. Admission materials – The college or school produces and makes available to prospective students the criteria, policies, and procedures for admission to the professional degree program. Admission materials clearly state academic expectations, required communication skills, types of personal history disclosures that may be required, and professional and technical standards for graduation.	✔	○	○
16.6. Written and oral communication assessment – Written and oral communication skills are assessed in a standardized manner as part of the admission process.	✔	○	○
16.7. Candidate interviews – Standardized interviews (in-person, telephonic, and/or computer-facilitated) of applicants are conducted as a part of the admission process to assess affective domain characteristics (i.e., the Personal and Professional Development domain articulated in Standard 4).	✔	○	○
16.8. Transfer and waiver policies – A college or school offering multiple professional degree programs, or accepting transfer students from other schools or colleges of pharmacy, establishes and implements policies and procedures for students who request to transfer credits between programs. Such policies and procedures are based on defensible assessments of course equivalency. A college or school offering multiple pathways to a single degree has policies and procedures for students who wish to change from one pathway to another.	✔	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how specific requirements of the standards and guidelines for admissions and enrollment are met, including those for early admission agreements or policies, if applicable.

☑ Describe how admission evaluations of students are documented and how records are maintained.

☑ Describe the college or school's recruitment methods.

☑ Describe the methods used to assess verbal and written communication skills of applicants to the program.

☑ Describe how enrollment is managed in alignment with available physical, financial, staff, faculty, practice site, preceptor and administrative resources.

☑ Describe how curricular outcomes data are correlated and related to admissions data.

☑ Describe 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.

☑ Describe any other notable achievements, innovations or quality improvements.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

Guidelines for Admissions and Enrollment

Complete information regarding admissions criteria, policies, and procedures is made available to prospective students through the Office of Student and Professional Affairs (OSPA) and the UHCOP website. The UHCOP website provides prospective students with a detailed Pharm.D. prerequisite checklist, which includes all required prerequisite coursework and a guided timeline to help students plan completion of prerequisite courses for matriculation. Additionally, information about the Doctor of Pharmacy program including academic policies, admission requirements, degree requirements, and tuition/fees, can be found in the UH Graduate Catalog and the UHCOP 2024-25 Student Handbook, both of which are available on the UHCOP website. The prerequisite requirements for admission to the Doctor of Pharmacy professional program consists of 57-72 hours of coursework in basic sciences, mathematics, physical sciences, and other general education areas of humanities, behavioral sciences, social sciences, and communication skills. Select non-math/science prerequisites such as American History and Government/Political Science are exempt if the core undergraduate curriculum was completed at the time of enrollment at UH from another accredited public Texas college/university, or if the student earned a baccalaureate degree or higher from an accredited U.S. university. This explains the variation in the number of prerequisite hours required. In addition to this information being available on the college website, it is also available on printed recruiting materials for prospective students.

Students can be admitted to UHCOP through three limited cooperative pre-pharmacy (co-op) programs with early acceptance through Lamar University, Stephen F. Austin State University, and South Texas College. **[16B UH-STC student-Coop Memorandum of Agreement_2023-EXAMPLE] [16C UH-SFA student-Coop Memorandum of Agreement_fall 22] [16D UH-LU Coop student-Memorandum of Agreement_fall 2022]** A Memorandum of Understanding between UHCOP and each institution is reviewed and updated annually. Requirements for students to be admitted into these co-op programs are outlined at the UH/Lamar, UH/Stephen F. Austin, and UH/South Texas College co-op program websites. Once a student is accepted into one of the co-op programs, they are required to sign a Memorandum of Agreement, which outlines their conditional admission to the UHCOP Doctor of Pharmacy program and the criteria they must maintain while in the undergraduate co-op program to successfully matriculate into the professional pharmacy program. The UHCOP co-op program offers many benefits to students including mentoring, career counseling, networking, shadowing opportunities and admission to UHCOP if all program requirements are met.

There are three basic admission requirements for the Pharm.D. professional program: completion of the prerequisite coursework (applicants must receive no less than a "C" in all prerequisite courses to be considered for admission), three letters of reference, and at least 25 hours of community service. The PCAT exam has been optional since the 2021 admission cycle and has been phased out as of January 2024. Admissions criteria, policies, and procedures are reviewed and evaluated annually by the Pharm.D. Admissions and Progressions Committee, and recommendations for changes are provided to the Assistant Dean for Student and Professional Affairs (ADSPA) and the Associate Dean for Academic Affairs (ADAA), and then voted on by the faculty. The Pharm.D. Admissions and Progressions Committee consists of a faculty chair appointed by the Dean and five additional faculty members appointed by their respective departments. The

Dean also appoints a pharmacy practitioner alumnus and a student representative to serve as voting members on the committee. The student representative is selected from a pool of candidates submitted by the Pharmacy Council, must be in at least the second professional year, and can serve a maximum of two years. The ADAA, ADSPA, Director of Pharmacy Admissions, Director of Admissions and Enrollment, and Director of Student Services serve as ex-officio members of the Pharm.D. Admissions and Progressions Committee.

Admission Evaluation of Students and Documentation and Maintenance of Records
Prospective students apply through PharmCAS' WebADMIT, a secure, online system used by most colleges of pharmacy. Students also submit a supplemental UHCOP application concurrently with their PharmCAS application which includes additional questions regarding the student's motivation for the profession and other important factors for the committee to review. The Pharm.D. Admissions and Progressions Committee reviews all complete student applications in a thorough and timely manner. Application review includes student academic accomplishments, PCAT (if submitted), letters of recommendation, honors/awards, extracurricular activities, work experience, leadership, and community service. Other items that are taken into consideration include successful careers in other fields, knowledge of a language beyond English and overcoming hardships. After reviewing applications, decisions are made about whether to invite the applicants for an interview. The committee uses a holistic scoring system that provides a comprehensive but consolidated picture of the entire application. This holistic scoring system has been used since the 2017-18 cycle as one of the tools to assess Pharm.D. applicants at UHCOP. The committee also evaluates admissions data from previous years during the application review process which includes the holistic score and GPA ranges accepted per year, as well as number of students accepted per month during the admission cycle. Candidate data is stored securely online in the PharmCAS system. Access to PharmCAS is given with either full applicant file access, as is given to members of the Admissions Committee, or limited access to enter interview scores for faculty helping with interviews. All data is compiled into a secure excel sheet with the applicant's score (holistic score, GPA, MMI, etc.) for the committee's review. Priority decision applicants are applicants whose applications are received prior to a predetermined deadline. These applicants are assured of review by the Admissions and Progressions committee and admissions decision to be rendered by a predetermined date.

College Recruitment Methods

To recruit high-quality applicants, UHCOP uses various recruitment methods online and in-person. These include a presence at high school and college career fairs, conferences and presentations to high school classrooms and pre-pharmacy associations. UHCOP also hosts open houses and summer camps to allow prospective students a first-hand experience of what the college has to offer. Virtual recruiting methods are also used in recruitment strategies including holding webinars and engaging in social media and email campaigns. Faculty in RGV are also heavily involved with recruitment of high school students, assisting with admission of students from underrepresented minority backgrounds into the pharmacy school. The goal is to encourage these students to return to the RGV to practice pharmacy and improve the quality of health care in the region. The college uses a customer relationship management system, Liaison Outcomes, to engage prospective and current applicants in our recruiting process. We also have a dedicated director of recruiting and a newly hired director of admissions and enrollment to focus on recruitment. The admissions and recruiting teams have increased in size to help with recruiting quality applicants. UHCOP has maintained an adequate class size despite the decrease in applications to Pharm.D. programs across the nation due to a variety of factors, including robust recruitment efforts.

Assessment of Verbal and Written Communication Skills of Applicants
Both oral and written communication skills of prospective students are evaluated during the application and interview process. Written communication skills are assessed through a personal statement as part of the PharmCAS online application system and a writing prompt that is given the day of the interview. The personal statement assesses the applicants desires to pursue a career in pharmacy. The writing prompt is evaluated by the University of Houston Writing Center based on a standardized rubric, and these writing scores are reviewed by the Pharm.D. Admissions and Progressions Committee as part of the admissions decisions process. Oral communication skills are assessed by multiple faculty evaluators on interview day. Part of the interview day consists of multiple mini interviews (MMI), where

applicants are evaluated based on verbal responses, listening, and non-verbal communication to a variety of individualized scenarios which are meant to evaluate cognitive and non-cognitive domains of the applicant. The MMI interview format utilizes seven 5-minute interview scenarios, with each scenario evaluated by a different faculty member. Attributes such as conflict resolution, communication skills, empathy, responsibility, accountability, ethical and moral judgment, teamwork/collaboration, problem solving, self-awareness, resilience, and pharmacy motivation are assessed in the MMIs. The MMI scenarios and rubrics utilize validated vignettes provided by a third-party company and then further customized to fit UHCOP's professional program needs.

Management of Enrollment in Alignment with College Resources
For the past five academic years the enrollment at UHCOP has ranged from 108-125 students per year. In Fall 2018, UHCOP moved into a new, larger state-of-the-art building, Health 2 (H2). With the move, all three years (P1-P3) have classes in the same building. This has led to greater interaction amongst the students and easier access for students to their peers, tutors, faculty and the administration. On the third floor of H2, UHCOP has two large stadium-style classrooms with a capacity of 180 each. These classrooms accommodate the traditional didactic portions of the P1-P3 curricula. In addition to the two large classrooms, the third floor hosts a medium-sized classroom with a capacity of 72 and three small classrooms with a capacity of 24. The third floor also has two active-learning classrooms which combine into one large room with a capacity of 128. The active learning classroom has 16 individual monitors that can be used for team-based activities. The fourth floor of H2 hosts a compounding lab, patient counseling and OTC suite, OSCE suite, and sterile products lab. To provide collaboration opportunities for students outside of the classroom, H2 hosts eight enclosed small-group study rooms, enclosed and open quiet study spaces with carrels, student lounge, break room, and an event catering kitchen. The available classrooms, student areas, and labs have adequate capacity to fit Pharm.D. class sizes of 125 students each year, with flexibility available to increase class size if warranted. H2 also houses the Dean's office and administrative suite, the Admissions and Student Services suite, Information Technology (IT) department, the Office of Experiential Programs, and the Central Business Office on the third floor. Floors 4-7 and 9 contain faculty offices, research labs, and write-up spaces for the college's three departments. There is a sufficient supply of rotation sites, preceptors, and teaching faculty members, as documented in subsequent standards.

The college does not formally accept transfer students. All prospective students would apply through the PharmCAS system, and then once accepted may petition the college to receive credit for already completed Pharm.D. courses from another college. The review process includes providing information on the completed courses (syllabus, schedule, lectures) to the appropriate department chair and teaching faculty. The faculty then review documents and decide if the course meets criteria to offer transfer credit at UHCOP. This policy is described on our website [Transfer Weblink].

Curricular Outcomes Data and Admissions Data
The Office of Assessment collects, analyzes and reports outcomes for two annual reports. The Programmatic Assessment Plan (PAP) evaluates all aspects of the program, including organizational governance, culture, and processes driving the program. The Professional Program Student Learning Outcome (PPSLO) Plan assesses student learning and the foundation and structure of the curriculum. Data are reported at a macro level, by class or cohort, rather than at the micro level, by individual student. As part of the overall UHCOP Continuous Quality Improvement (CQI) process and in collaboration with the Office of Admissions and the Admissions and Progression Committee, we have analyzed admissions data, the MMI process, and progression data to identify predictors of student academic success. Based on this analysis, student academic performance thresholds have been developed and integrated into the student performance tracking system managed by the Director of Pharm.D. Academic Program Management and the Office of Student Services. This system provides early intervention to enhance student academic performance and support individual students. Student academic performance is monitored through the Canvas course management system gradebook reports.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant

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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5)   **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

[TEXT BOX] [1,000 character limit, including spaces]

Standard No. 17: Progression: The college or school develops, implements, and assesses its policies and procedures related to student progression through the PharmD program.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Section of Student Handbook, Catalog, and/or policies and procedures regarding student progression, early intervention, academic probation, remediation, missed course work or credit, leaves of absence, dismissal, readmission, due process, and appeals

[17A PharmD Academic Grievance Policy.4.29.2016]

[17B Early Intervention and Student Success Program]

[17C PharmD Academic Standing Requirements for Progression.2016]

[17D PharmD Final Course Grade Appeal Policy and Procedure.9.20.2016]

[17E PharmD Missed Coursework Policy.9.20.2016]

[17F PharmD Probation and Suspension.1.31.2017]

[17G PharmD Professional Pharmacy Conference Scholarship Policy final]

[17H PharmD Remediation Process.1.31.2017]

[17I 2024-2025-pharmd-student-handbook-final]

[17J Student Handbook Related to Progression Standard]

☑ Relationship analysis of student variables, admission variables, and academic performance

[17K Analysis of student variables and progression UH2022]

Data Views and Standardized Tables:

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

[17L acpe-program-disclosure-2023december.pdf]

☑ Analysis of student academic performance throughout the program (e.g. progression rates, academic probation rates, attrition rates)

[17M Analysis of Student Academic Performance Throughout the Program AAMS2024]

☑ On-time graduation rates for the last three admitted classes (compared to national rate)

[17N On-time Graduation Rates AAMS2024]

☑ Percentage total attrition rate for the last three admitted classes (compared to national rate)

[17O Total Attrition Rate AAMS2024]

☑ Percentage academic dismissals for the last three admitted classes (compared to national rate)

[17P Academic Dismissals AAMS2024]

☑ AACP Standardized Survey: Faculty – Question 40

[17Q Standard 17 FSQ 40]

Optional Documentation and Data:

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

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
17.1. Progression policies – The college or school creates, makes available to students and prospective students, and abides by criteria, policies, and procedures related to:	✓	○	○
• Academic progression	✓	○	○
• Remediation	✓	○	○
• Missed course work or credit	✓	○	○
• Academic probation	✓	○	○
• Academic dismissal	✓	○	○
• Dismissal for reasons of misconduct	✓	○	○
• Readmission	✓	○	○
• Leaves of absence	✓	○	○
• Rights to due process	✓	○	○
• Appeal mechanisms (including grade appeals)	✓	○	○
17.2. Early intervention – The college or school's system of monitoring student performance provides for early detection of academic and behavioral issues. The college or school develops and implements appropriate interventions that have the potential for successful resolution of the identified issues.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how student matriculation, progression, and graduation rates relate to admission and transfer variables.

☑ Describe how academic counseling and/or student support staff work with students seeking to retain or regain good academic standing, and how extensively they are utilized.

☑ Describe the early intervention and remediation policies and how these rates affect to progression.

☑   Describe how academic probation, leaves of absence, dismissal, readmission, due process, and appeals rates affect to progression at your program.

☑   Describe any other notable achievements, innovations or quality improvements (if applicable).

[TEXT BOX] [15,000-character limit, including spaces] (Approximately six pages)

The college has established clear policies for ensuring students' successful progression through the program. Criteria and procedures for progression, probation, missed coursework, readmission, leaves of absence, rights to due process and grade appeal and grievances may be found in the UHCOP student handbook. The student handbook is reviewed annually by Assistant Dean for Student and Professional Affairs (ADSPA) and Associate Dean for Academic Affairs (ADAA), Office of Student and Professional Affairs (OSPA), the faculty, staff and students. Furthermore, the college has implemented a comprehensive multi-level early intervention system to assist students facing academic challenges. This proactive approach involves identifying struggling students through both academic performance data and faculty communication.

Student Matriculation and Progression Related to Admission Variables

The college has experienced a significant increase in graduation rates since the last accreditation visit in 2017. While on-time graduation rates declined slightly in 2020, graduation rates have increased significantly since the last accreditation visit due to a variety of factors, including an enhanced focus on early intervention for identified students. Nationally, the on-time graduation rate between 2020 and 2023 was 86-87%. The University of Houston's on-time graduation rate during this period ranged from 81% in 2020 to 93% in 2021, and 86% in 2022. Note that our program's structure and course offerings typically prohibit reattempts of a failed course within the same academic year, meaning failing a course almost always leads to delayed graduation. This is the case at most colleges of pharmacy but has informed our early intervention approach. Our admissions team and the ADSA work closely to monitor factors from the admissions interview that increase a student's likelihood of failing a course. In 2022, a statistical analysis of admissions variables and student progression rates (for years 2019-2021) was conducted to identify variables predictive of progression issues. The analysis identified four predictive variables, which are admissions holistic score (MMI), overall GPA, prerequisite math and science GPA, and PCAT score. Multivariate logistic regression was conducted on the variables. Overall GPA is the lowest predictor of student progression issues, followed by MMI, math and science GPA, and PCAT scores. Age and B.S. degree were not correlated with progression issues. Additionally, recursive partitioning analyzed GPA, holistic scores and prerequisite Math and Science GPA to establish parameters used to monitor student progression. Our early intervention strategies, therefore, begin in P1 with a focus on identifying individuals who were admitted with lower interview variables than their peers and ensuring that these students are appropriately resourced.

Academic Counseling and Student Support to Regain Academic Standing

Our focus on academic progression begins at new student orientation (NSO). During the NSO Program, the ADSPA collaborates with the ADAA to communicate UHCOP's academic policies, covering aspects such as academic progression, academic probation, dismissal and readmission. As part of this process, students are required to formally acknowledge receipt of these policies through the UHCOP Student Handbook and confirm their familiarity with them during orientation. To gauge their understanding, students are quizzed on information within the Student Handbook. This practical evaluation reinforces the significance of clarity and comprehension in the adherence to institutional policies.

The College of Pharmacy provides comprehensive academic counseling and student support through a multi-level early intervention system. This system is designed to assist students who may be struggling academically, either through their performance in coursework or through faculty communication. All incoming students undergo the Learning and Study Strategies Inventory (LASSI) assessment in July before their P1 starts. They then meet with their Pharm.D. advisor before their first semester begins to review their scores and discuss strategies for academic success based on their individualized results and student resources available. Beginning in their first semester and throughout school, students must meet with their Pharm.D. advisors regularly unless specific needs arise that warrant more frequent advising sessions. Students may also participate in our peer tutoring program which pairs students in a course with senior students who performed well in that course in earlier semesters.

The Office of Academic Affairs, in collaboration with the teaching faculty, plays a crucial role in monitoring student progress. They continually track grades posted on the learning management system for each student. Students who perform poorly on an assessment or who consistently underperform in multiple courses are identified and referred to the ADSPA. The ADSPA meets with these students to identify the causes of poor performance and collaborates on creating a plan of action, which may include referrals to the university mental health service (CAPS) or to the student accessibility

center for testing accommodations. This early intervention system is one factor associated with the observed increases in on-time graduation since 2017.

Early intervention procedures continue into IPPE and APPE rotations. IPPE students participate in a week-one check-in to ensure that they are acclimating well to their sites. Students struggling to progress during APPEs are identified by preceptors and referred to the APPE director for early intervention. Student reported data for this intervention process involves check-in surveys conducted at week two of each APPE rotation, which include questions about skills, motivation and factors limiting growth on the rotation. APPE/IPPE directors review survey comments for red flags, such as limitations to student growth, and reach out to students as needed. These check-ins often uncover academic or personal challenges, leading to referrals to appropriate resources. For students facing performance issues, collaboration with preceptors is initiated to address these challenges. Ongoing support and follow-up are provided based on the nature and severity of the issues.

Midpoint APPE evaluations are monitored for low scores and concerning comments, triggering further intervention if necessary. Preceptors are involved in identifying and addressing challenges faced by students during rotations and creating action plans for improvement. Continuous follow-up ensures ongoing support and resolution of identified issues. In summary, the College of Pharmacy's early intervention system is a comprehensive approach that supports students throughout their academic journey. This proactive system aims to identify and address challenges promptly to ensure students' academic success and readiness for their future pharmacy careers.

<u>Remediation Policy</u>

The college's remediation policy permits students to petition for remediation of a D grade within a single semester. However, students with multiple D grades are not granted this option. In the first three years of the professional curriculum, students are entitled to one remediation per semester, and retaking a course when it is next offered does not qualify as remediation. Notably, F grades cannot be remediated under this policy. To be eligible for remediation in a specific course, students must maintain a C or higher in all course requirements (such as exams or other major grades), except for one, which may be below a C. IPPEs and APPEs are exempt from the remediation policy. The remediation process's format and competency assessment are left to the discretion of the course coordinator, and it does not count as a second attempt at the course according to the university's academic standing policy. Typical remediation competency assessments have consisted of a modified exam with assessment questions to determine competency in the course. Remediation occurs after the finals week of each semester, with a letter I (incomplete) grade assigned, and the final grade determined upon successful remediation completion.

Academic Probation, Leave, Dismissal, Readmission, and Due Process for Progression

<u>Grade Appeal</u>

The college's grade appeal policy offers students a structured process for addressing concerns related to their final course grades under specific conditions. These conditions include cases where a faculty member has violated grading rules or policies, made grading errors, applied inconsistent standards, breached written agreements, or deviated from the syllabus. The first step in this process involves the student requesting a meeting with the faculty member to discuss the potential grade change, either in person or over the phone. Following this, the faculty member is expected to respond within two working days, providing a written clarification on the same day and making grade adjustments if necessary. If the student remains dissatisfied after this initial step, they can proceed to the second stage by requesting a meeting with the faculty member's department chair. The student must articulate their concerns in writing, and the chair should respond within two working days, sending a copy of the response to the faculty member. If concerns persist beyond the departmental level, the student enters the formal grade appeal process. They must file a formal grade appeal within seven working days of the online grade posting, using the Grade Appeal Form and submitting it to the ADAA.

Upon receiving the Grade Appeal Form, the Associate Dean presents the complaint to the Pharm.D. Student Affairs Committee and notifies the faculty member involved. Within ten working days, the committee collects relevant facts, obtains the faculty member's written response, and engages in discussions with the student. Subsequently, a decision is reached, either in favor of the student with a recommendation for a grade change or in favor of the faculty member,

resulting in no grade change. In cases where either party disagrees with the committee's decision, they have the option to appeal to the College of Pharmacy Dean within five working days. This entails submitting a formal written complaint, and the Dean responds within five working days, thereby concluding the grade appeal process.

Missed Coursework and Leaves of Absence

The University of Houston College of Pharmacy's Missed Coursework Policy recognizes the importance of regular attendance for students but acknowledges certain valid reasons for granting makeup exams or accommodating required activities. The policy emphasizes that attendance is crucial, as it is integral to professional development, especially in maintaining quality patient care. It outlines procedures for missing class due to religious observance, military service, or participation in school sanctioned events and professional meetings.

The policy emphasizes mandatory attendance for laboratory-based courses and requires attendance of at least 75% of scheduled lectures for didactic courses. Attendance is taken daily, and students are responsible for their attendance records. If students approach ≥ 15% class absences, the ADSPA is informed, and students should meet with course coordinators for extenuating circumstances. In cases of prolonged absences, students should contact the ADSPA. The college does not have a formal leave of absence policy but does have policies and procedures established for general withdrawal for medical or financial reasons, including for those in recovery for substance use disorder.

Academic Probation

Students are placed on academic probation if they receive a semester grade point average below 2.00, received a grade of D, F, or U in any professional courses, or if they have a cumulative grade point average below 2.00. During probation, students may need to repeat specific courses as directed by the Pharm.D. Admissions and Progression Committee before progressing to the next professional semester. Alternatively, they may face suspension, as outlined by the suspension rules. Students on probation must submit a written plan detailing steps to enhance their academic performance before continuing in the program. While on probation, students cannot hold college organization offices, serve on college committees, or receive college-funded travel.

Academic Suspension

Students are placed on academic suspension under several circumstances, such as receiving D, F, or U grades while on probation, achieving a semester GPA below 2.00 while on probation, or falling below 2.00 semester GPA for more than one semester. If placed on probation more than once, obtaining a D, F, or U after retaking a course, or achieving a semester GPA of 1.00 or lower, students may also face suspension. The Pharm.D. Admissions and Progression Committee reviews these cases carefully. Students may petition the committee in writing if they disagree with the decision, leading to a second review. If still dissatisfied, students can appeal to the Dean. The college dean has the authority to place students on probation, suspend them or lift academic probation or suspension based on academic progress. Those suspended must apply to the committee for readmission to the college. Suspension typically lasts for at least one long semester (fall or spring). Students denied re-admission to the college may explore re-admission to another University college or department. All students must graduate in six years.

The University of Houston College of Pharmacy places a strong emphasis on safeguarding students' due process rights throughout various academic procedures. From academic progression to grade appeals, the college ensures fairness and transparency. The policy outlines eligibility criteria and procedures, ensuring that students have a fair and structured process for grade improvement. The grade appeal policy offers students a formal mechanism to challenge grading decisions, with meetings and appeals to the Pharm.D. Student Affairs Committee, ensuring due process in resolving grading disputes. Additionally, the Missed Coursework Policy recognizes valid reasons for excused absences and outlines processes, protecting students' due process rights when addressing missed coursework. In cases of academic probation, dismissal, and readmission, the college defines clear criteria, opportunities for appeal, and transparent processes. Suspension lasts for at least one long semester, allowing students to seek re-admission or explore other opportunities.

For AACP survey data from 2018 to 2023, the faculty strongly agreed that the college has an effective process to manage poor performance of students (faculty Q40 – agree 86-95%), which was consistently about 10-15% points higher in agreement that national data from other colleges throughout the country (national Q40 – agree 78-83%).

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

[TEXT BOX] [1,000 character limit, including spaces

Subsection IID: Resources

Standard No. 18: Faculty and Staff—Quantitative Factors: The college or school has a cohort of faculty and staff with the qualifications and experience needed to effectively deliver and evaluate the professional degree program.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Organizational chart depicting all full-time faculty by department/division

   [18A Organizational Chart Depicting All Full-Time Faculty by Department]

☑ ACPE Faculty Resource Report related to number of full-time and part-time faculty.

   [18B ACPE FacultyResourceReport UHCOP]

☑ List of faculty turnover for the last 5 years, by department/division, with reasons for departure

   [18C List of Faculty Turn Over for the Last 5 Years, by Department, with Reasons for Departure]

☑ List of voluntary or adjunct faculty, with academic title/status (not including preceptors)

   [18D List of Adjunct Faculty, with Academic Title]

☑ An analysis of teaching load of faculty members, including commitments outside the professional degree program.
   [18E An Analysis of Teaching Load of Faculty Members]

☑ Evidence of faculty and staff capacity planning and succession planning.
   [18F Evidence of Faculty and Staff Succession Planning]

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)

   [18G Faculty Addendum]

☑ AACP Standardized Survey: Faculty – Questions –25, 30

   [18H Standard 18 FSQ 25 and 30]

☑ Table: Allocation of Faculty Effort (total for all faculty with ≥ 0.5FTE)

   [18I UHCOP Faculty Allocation of Effort 2023-24]

☑ Table: Distribution of Full-Time Pharmacy Faculty by Rank and Years in Rank

   [18J Distribution of Full-Time Faculty by Rank and Years in Rank]

Optional Documentation and Data

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

[18K UHCOP ALFP Faculty]

[18L UHCOP Cougar Chairs Leadership Academy]

[18M Provost's Faculty Annual Performance Review Policy]

[18N UHCOP Faculty Performance Plan and Semi-Annual Review 2.1.2022]

[18O Faculty Activity Report Form 2023]

[18P Description of Faculty Annual Performance Review]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
18.1. Sufficient faculty – The college or school has a sufficient number of faculty members to effectively address the following programmatic needs:	✓	○	○
Teaching (didactic, simulation, and experiential)	✓	○	○
Professional development	✓	○	○
Research and other scholarly activities	✓	○	○
Assessment activities	✓	○	○
College/school and/or university service	✓	○	○
Intraprofessional and interprofessional collaboration	✓	○	○
Student advising and career counseling	✓	○	○
Faculty mentoring	✓	○	○
Professional service	✓	○	○
Community service	✓	○	○
Pharmacy practice	✓	○	○
Responsibilities in other academic programs (if applicable)	✓	○	○
Support of distance students and campus(es) (if applicable)*	✓	○	○
18.2. Sufficient staff – The college or school has a sufficient number of staff to effectively address the following programmatic needs:	✓	○	○
Student and academic affairs-related services, including recruitment and admission	✓	○	○
Experiential education	✓	○	○
Assessment activities	✓	○	○
Research administration	✓	○	○
Laboratory maintenance	✓	○	○
Information technology infrastructure	✓	○	○
Pedagogical and educational technology support	✓	○	○
Teaching assistance	✓	○	○
General faculty and administration clerical support	✓	○	○
Support of distance students and campus(es) (if applicable)*	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe the process and interval for conducting faculty workload and needs assessments.

☑ Describe the process and interval for conducting staff workload and needs assessments.

☑ Describe the rationale for hiring any part-time faculty, and the anticipated duration of their contract.

☑ Describe how the college or school is planning for faculty and staff capacity and succession planning.

☑ Provide the college or school's student-to-faculty ratio and describe how the ratio ties in with the college or school's mission and goals for the program.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

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Faculty and staff are one of the most important resources at the UHCOP and are dedicated to the mission of the college. The college has three academic departments: the Department of Pharmacological and Pharmaceutical Sciences (PPS), the Department of Pharmacy Practice and Translational Research (PPTR), and the Department of Pharmaceutical Health Outcomes and Policy (PHOP). The PPTR department has 36 faculty (3 of which are Research Scientists), PPS department has 35 faculty (1 of which is a Research Scientist), and the PHOP department has 10 faculty. Prior vacancies in faculty lines have been created primarily due to family moves, new opportunities, or retirement. The college has been very successful in recruiting outstanding junior faculty members to fill open positions.

Faculty Workload
To fulfill the mission of the college, faculty workload is divided into three separate components: teaching, research, and service. Each faculty member has an annual performance review with their department chair that addresses all areas of their academic appointment. Attached is a description of the annual review process **[18P Description of Faculty Annual Performance Review].** Through this process the college assures an adequate number of faculty are present to execute the curriculum, and other mission critical tasks at the college. Feedback provided during the annual performance review is crucial to department leadership when analyzing faculty workload and making teaching changes when curricular change or openings in faculty lines occur to ensure appropriate workload among faculty. In 2019, the college instituted the Faculty Performance Partnership and Semi-Annual/Annual Review **[18N UHCOP Faculty Performance Plan and Semi-Annual Review 2.1.2022]** as a mechanism to enhance the communication of faculty expectations and strengthen career development of college faculty. This plan works in collaboration with the faculty annual performance review to facilitate goal setting and communication between the faculty members and department chairs.

In addition to the professional pharmacy curriculum, faculty teach in the Ph.D. graduate degree programs in pharmacology, pharmaceutics, and pharmacy health outcomes and policy, and the MS degree program in pharmacy leadership and administration. New pharmacy practice faculty members are typically given 6-12 months to develop their experiential sites before precepting students. Teaching loads are assigned based on Pharm.D. vs. graduate school teaching areas, tenure-stream (tenure-track vs. non-tenure track), didactic vs. experiential teaching areas, and administrative responsibilities. Teaching responsibilities for all commitments are documented in the faculty activity report and reviewed with each faculty member by the department chair at the Annual Performance Review. Any changes to the teaching load are discussed between faculty and department chairs during the Annual Performance Review. Course coordinators notify instructors several months in advance of course offerings to finalize the course syllabi and relay other pertinent

information before the start of each semester to allow adequate preparation time. An analysis of teaching load occurs during the Annual Performance Review and by way of an individual discussion with faculty members, input from course coordinators, review of student evaluations, and discussion with practice site leaders, if applicable.

The college does not routinely employ paid, part-time faculty for teaching purposes. In the module courses, guest lecturers are sometimes used due to their clinical expertise in a particular therapeutic area. Most of these clinicians work in neighboring institutions within the Texas Medical Center and would be considered national experts in their fields. Faculty course coordinators are responsible for overseeing the effectiveness of these guest lecturers, including providing feedback to guest lecturers and reviewing their assessment questions for appropriateness. One scenario where the college does employ a paid, part-time faculty member is in our law course. The law course is coordinated by a full-time faculty member with a paid adjunct faculty who teaches many of the lectures due to her expertise in pharmacy law.

Capacity and Succession Planning

Faculty capacity planning and succession planning starts at the annual performance review with the department chair as described above. Progression of each faculty member towards successful promotion is discussed at this time. In addition, formal interim reviews are conducted for tenure-track faculty at time periods designed by the University and College P&T guidelines. Evidence of successful promotion of faculty members is shown in the Faculty Promotion Table. Succession planning of faculty beyond academic promotion also involves faculty promotion into administrative positions. For example, we have had several recent promotions of faculty to college-level Dean positions, and progression of faculty to leadership positions on college or university-wide committees such as the UH Faculty Senate. Faculty assignments to college committees and assignments of college committee chairs are made with consideration of the faculty's interests and abilities to provide them with experience and knowledge in various areas of college function. Committee chairs are assigned by the Dean or department chairs following discussions at an Executive Council Leaders meeting. The college has encouraged and financially supported the participation of several faculty **[18K UHCOP ALFP Faculty]** in the AACP Academic Leadership Fellows Program to enhance faculty leadership skills and network with other leaders in the profession. The university is also committed to leadership development. The Provost has initiated a Cougar Chair's Leadership Academy which is intended to prepare future leaders in academic departments. Several of the college's faculty **[18L UHCOP Cougar Chairs Leadership Academy]** have completed this year long program, and collectively these activities help prepare the leaders of the future.

Success of faculty through promotion or other succession planning requires a vigilant focus on faculty capacity to assure successful execution of the curriculum. Much of this planning starts at the faculty annual performance review described above. As faculty are promoted or change responsibilities, this forms the basis for new faculty positions to take over these responsibilities. For example, in pharmaceutical sciences several senior faculty in the college have recently retired or are approaching retirement. For this reason, several early and mid-career faculty members have been hired to offset these senior faculty. In pharmacy practice, the increased emphasis on hands-on learning has led to new faculty positions with a specific focus on the skills-lab component of the PharmD curriculum. Requirements for new faculty capacity are discussed at department faculty meetings as well as between the Dean and department chairs as part of executive council meetings. The College adapts its recruiting efforts to strategically fill these open positions based on the current and future needs of the College and the best talent available. New faculty lines are included in the annual budget provided to the Provost's office. Faculty members chair search committees and participate in on-site interviews to recruit new faculty to assure a faculty-lead approach to new hires. The College has been remarkably successful in obtaining new faculty lines and recruiting talented new faculty.

The college employs 49 administrative staff. Staff turnover in the college has been consistent since the COVID-19 pandemic started, similar to other academic institutions. Individuals who have resigned in the past three years stated the reasons to be greater opportunity for advancement, relocation, desire to go part-time, and desire to work in a 100% remote position. Turnover in a few staff positions has been the result of inadequate job performance or a reduction in force.

Support staff members are distributed across the various areas of the college to help support the needs of the faculty. The College of Pharmacy's infrastructure has improved with the hiring of a College Information Services Manager for information technology, the creation of an Assistant Dean of Assessment and Accreditation with staff infrastructure, and the improvement in our communications department with the hiring of a multimedia specialist. Staff capacities of the academic departments and dean's office are also discussed during executive council meetings and during the annual budgeting discussions.

The college and university have several mechanisms for staff succession planning. The college has annual staff retreats to provide skill training required for professional advancement. The Dean hosts regular convocations with staff that includes leadership development topics. The EDBO engages regularly with key staff within the departments to assist them in developing a more comprehensive understanding of their role in the college and how the roles of these department-based staff interfaces with the college goals. There are also staff development opportunities available through LinkedIn Learning, Catalyst Development App and Virtual Training Library offered on the UH Human Resources webpage. According to university policy, staff also can obtain release time to enroll in one 3-credit hour course per long academic semester to pursue a degree or seek additional training related to their staff position. At the university level, coursework and training for professional development is available and updated regularly on the UH Human Resources website.

Student to Faculty Ratio
The student-to-faculty ratio for the professional degree program is sufficient to provide individualized instruction and guidance. The student to faculty ratio for the didactic course work in the College of Pharmacy is 6.6:1 (based on 457 students enrolled in Fall 2023 and 69 full-time PharmD teaching faculty). The low student-to-faculty ratio allows for opportunities for individualized instruction with faculty being able to facilitate learning in smaller group settings quite frequently. Students agreed with the opportunity for individualized learning with 92-100% of students agreeing the curriculum provided opportunities to engage in active-learning small group sessions. The student to preceptor ratio for the experiential learning is mostly 1:1, with select rotations having two or sometimes three students per preceptor (see Standards 20 and 22). From 2019-2023, 95-97% of students agreed that preceptors were able to provide them with individualized instruction, guidance, and evaluation, which was slightly higher than peer colleges and the national average during that time.

Notable Improvements and Achievements to Improve Faculty and Staff Support and Productivity
Five new faculty members have been hired to the PPTR department, the clinical teaching department of our Pharm.D. program. These faculty hires have helped the college open a satellite campus in RGV, have strengthened our skills-lab faculty, especially during the double teaching years, and have added research strength in the scholarship of teaching and learning (SoTL). Their addition to the program allows for more faculty-based APPEs, increased development of early and interprofessional experiences in education, and less reliance on outside teaching resources.

Rio Grande Valley - Established in 2017 in collaboration with DHR in Edinburg, the UHCOP RGV Pharm.D. Satellite Program offers prospective students, especially those from the RGV region, an opportunity to be agents of change in a vibrant, growing community that nonetheless faces significant health challenges, especially in the areas of cardiovascular disease, diabetes and obesity. Faculty members at RGV take students on experiential rotations allowing for a unique experience for UH pharmacy students.

Skills lab focus including instructional lab managers - Since our last accreditation, we have incorporated pharmacy technicians into our teaching curriculum to provide graduating pharmacists with a better understanding of the teamwork required between pharmacists and pharmacy technicians. Working side-by-side with pharmacist faculty, the three ILMs train many students with multiple training sessions per week. Specific job duties will include day-to-day maintenance and operation of various labs, such as the community pharmacy laboratory, patient assessment related skills labs, operations of sterile products lab, and maintaining records of student training for skills-based learning.

Scholarship of teaching and learning. Capitalizing on assessment data, our new integrated curriculum and faculty expertise, one of the priorities of our Vision 2030 Strategic Plan is to expand research related to the SoTL. We have

developed a committee to foster SoTL research and provide updates at department and college meetings. This has resulted in an increase in SoTL related publications, state and national presentation invitations, and funding competitiveness.

Assistant Dean of Assessment and Accreditation. The University of Houston College of Pharmacy recently hired Brian Dzwonek, Ed.D., as the college's first Assistant Dean for Assessment and Accreditation. His responsibilities include the design, development and implementation of strategies, tools, and processes to assess student academic performance, faculty teaching effectiveness, course effectiveness, and overall effectiveness of PharmD program.

Premier Center focused on opioid abuse disorders. The Prescription Drug Misuse Education and Research (PREMIER) Center was established in December 2018 with the goal of reversing the devastating effects of controlled substance prescription (CSP) misuse on families, communities, and the health care system. It is the first center at the University of Houston dedicated to prescription drug misuse research and education. One of the goals of the center is to educate key stakeholders, namely patients, and health care providers on proper CSP use and substance use disorder pharmacotherapy when appropriate.

Presidential Frontier Faculty program hires. The Presidential Frontier Faculty program is a competitive, university-wide, interdisciplinary faculty hiring campaign supported by President Renu Khator. The program encompasses hiring a large cohort of convergence research faculty to respond to federal priorities and societal challenges. To date, UHCOP has had three new PFF faculty hired.

Interpretation of AACP Survey Data
AACP survey question 25 asked faculty to evaluate whether the college has sufficient staff to effectively address programmatic needs. For responses obtained yearly from 2019-2023, the faculty either agreed or strongly agreed 63-70% of the time that the college has sufficient staff, which was similar or slightly above national response agreement rates during the same period. Regarding having sufficient faculty, agreement rates significantly increased starting in 2021 (2021 - 88.6% agree), which was over 20% higher than agreement rates in previous years. Most recent survey data for this question in 2023 showed an 86% agreement rate which was significantly higher than the national agreement rate of 60%.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

   [TEXT BOX] [1,000 character limit, including spaces]

Standard No. 19: Faculty and Staff—Qualitative Factors: Faculty and staff have academic and professional credentials and expertise commensurate with their responsibilities to the professional program and their academic rank.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ List of active research areas of faculty and an aggregate summary of faculty publications/presentations over the past three years

[19A List of Active Research Areas of Faculty.pdf]

[19B Research and Scholarly Activity of Full-Time Faculty by Department]

☑ Procedures employed to promote a conceptual understanding of contemporary practice, particularly among non-pharmacist faculty

[19C Procedures Employed to Promote a Conceptual Understanding of Contemporary Practice]

☑ Policies and procedures related to faculty recruitment, performance review, promotion, tenure (if applicable), and retention

[19D UH Non Tenure-Track Policy]

[19E UH Promotion and Tenure Guidelines]

[18M UH Provost's Faculty Annual Performance Review Policy]

[19F UHCOP Guidelines for Appointment, Reappointment and Promotion of NTT Faculty]

[19G UHCOP Guidelines for Promotion and Tenure for Tenure Track Faculty]

[19H UH Faculty Handbook Current]

☑ CVs of faculty and staff

[19I Faculty CVs 07.2024]

[19J Staff Resumes 07.2024]

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 7, 13-24

[19K Standard 19 FSQ 7, 13-24]

☑ Table: Distribution of Full-Time Pharmacy Faculty by Rank, Gender and Race/Ethnicity

[19L 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

[19M Distribution of Full-Time Pharmacy Faculty by Rank and Highest Degree Earned]

☑ Table: Distribution of Full-Time Pharmacy Faculty by Rank and Tenure Status

[19N Distribution of Full-Time Pharmacy Faculty by Rank and Tenure Status]

☑ Table: Distribution of Full-Time Pharmacy Faculty by Department and Tenure Status

[19O Distribution of Full-Time Pharmacy Faculty by Department and Tenure Status]

☑ Table: Research and Scholarly Activity of Full-Time Faculty by Department

[19B Research and Scholarly Activity of Full-Time Faculty by Department]

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.

[19P Departmental Seminars 2018-2024]

[19Q Staff Development Activities 2020-24]

[19R ePerformance Management Guide]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
19.1. Educational effectiveness – Faculty members have the capability and demonstrate a continuous commitment to be effective educators and are able to effectively use contemporary educational techniques to promote student learning in all offered pathways.	✓	○	○
19.2. Scholarly productivity – The college or school creates an environment that both requires and promotes scholarship and also develops mechanisms to assess both the quantity and quality of faculty scholarly productivity.	✓	○	○
19.3. Service commitment – In the aggregate, faculty engage in professional, institutional, and community service that advances the program and the profession of pharmacy.	✓	○	○
19.4. Practice understanding – Faculty members, regardless of their discipline, have a conceptual understanding of and commitment to advancing current and proposed future pharmacy practice.	✓	○	○
19.5. Faculty/staff development – The college or school provides opportunities for career and professional development of its faculty and staff, individually and collectively, to enhance their role-related skills, scholarly productivity, and leadership.	✓	○	○
19.6. Policy application – The college or school ensures that policies and procedures for faculty and staff recruitment, performance review, promotion, tenure (if applicable), and retention are applied in a consistent manner.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe 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.

☑ Describe 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.

☑ Describe 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.

☑ Describe 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.

- ☑ Describe the college or school's policy or expectations regarding research productivity for faculty, including timeline for new faculty.

- ☑ Describe 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 (if applicable).

- ☑ Describe the performance review process for full-time, part-time and voluntary/adjunct faculty and staff.

- ☑ Describe the faculty and staff development programs and opportunities offered or supported by the college or school.

- ☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

- ☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

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Educational Effectiveness

Full-time faculty members have the appropriate education and training to contribute to the professional degree program. Verification of education and training credentials of employees is performed via reference checks during the interview process and verification of academic transcripts for all degrees. An on-site interview is required for all faculty candidates to assure mastery of their subject area and teaching abilities. This is usually demonstrated by a seminar given by faculty candidates during the on-site interview. A list of all faculty and their educational credentials are found in the faculty organizational chart in Standard No. 18. 35 out of 80 full-time faculty are licensed pharmacists. All faculty members with a practice component to their responsibilities have a license to practice pharmacy in the State of Texas and are licensed preceptors through the State Board of Pharmacy. Teaching assignments are based on expertise in each area gained by professional degree, graduate degree, post-graduate experiences, and real-life pharmacy practice experiences.

To ensure that the college has appropriate faculty to meet the teaching needs of the program, the college's recruitment and retention efforts assess the needs of the curriculum as well as strategic goals for research and scholarly activity. The Dean, in consultation with department chairs and faculty, reviews and modifies recruitment and retention plans based on the needs of the college. The college adapts its recruiting efforts to strategically fill open positions based on the current and future needs of the college and the best talent available. Faculty members lead the search committees for these positions and participate in the on-site interviews to recruit new faculty.

Within the college, each department hosts a seminar series that integrates the various missions of the college to create better collaboration and understanding across the faculty **[19P Departmental Seminars 2018-2024]**. Department seminars focus on current and future trends in the scientific basis of biomedical, pharmaceutical, social, administrative, and clinical sciences by inviting local and national leaders in addition to highlighting current faculty strengths. These departmental seminars hosted regularly invite all faculty in the college as well as professional and graduate students. In addition, travel to professional and scientific meetings is encouraged at the College to assure cutting edge knowledge of their discipline. Faculty are also encouraged to attend short courses in their instructional area to stay at the forefront of their practice. AACP survey data demonstrated that faculty overwhelmingly agreed that programs are available to them to improve teaching and facilitate student learning (Fac Q23 – 86-95% agree or strongly agree), which was similar or above national response agreement to this question.

The College of Pharmacy has several initiatives to assure that all faculty members regardless of discipline have a conceptual understanding of all facets of pharmacy including pharmacy practice and professional education. Nearly every faculty meeting or faculty retreat contains time for a faculty-led presentation on a contemporary pharmacy practice initiative or research presentation. Additionally, the disease-state modules in our new curriculum include course co-coordinators specifically chosen across disciplines and academic departments. This has provided all faculty a chance to interact and learn more about pharmacy practice regardless of discipline. College and department seminars routinely focus on pharmacy practice issues as well. These purposeful changes have led to increased rates of faculty agreement (Fac Q22 – 64% in 2021 to 77% in 2023) regarding college level programs to orient non-practice faculty to the profession, which was about 20% higher than national agreement rates during the same years.

Research and Scholarship Productivity

The college faculty are very active in research and other scholarly activities. All faculty members are encouraged to pursue scholarly activities as evidenced by the Promotion and Tenure (P&T) guidelines and the annual Faculty Report. Annual performance metrics that prescribe expected research and scholarly outcomes needed for "acceptable" performance in this area are part of the faculty annual performance partnership with department chairs. Faculty are incentivized to secure extramural research funding by a college policy that provides return of indirect costs to the investigator's lab from indirect costs returned to the college. New faculty are given protected time prior to teaching or taking students on APPE rotations to assure appropriate set-up of their scholarship focus. The University P&T committee has specific timelines for faculty including a mandatory third year review to assess progress towards promotion and/or tenure.

The faculty as a whole average 158 published manuscripts per year (2020: 168; 2021: 177; 2022: 154; 2023:136) as evidenced by a SCOPUS search of all full-time faculty members (accessed 12/11/2023). These publications include manuscripts in the American Journal of Pharmaceutical Education and Currents in Pharmacy Teaching and Learning, demonstrating scholarly activity to enhance teaching or address other issues in academia. Research performed by faculty is cited approximately 4,000 times per year (range: 3,705-4,235). Faculty are successful at grantsmanship having secured more than $7.8 million in research funds in FY2022 and $13 million in research funds in FY2023. Stanford University researchers provide a ranking of the World's 2% most cited scientists as a result of a composite index based on several citation metrics from data sourced on scientific publisher Elsevier's Scopus platform, a curated abstract and citation database of peer-reviewed literature (https://elsevier.digitalcommonsdata.com/datasets/btchxktzyw/5). According to the Stanford rankings, seven University of Houston College of Pharmacy faculty members are among the "world's top 2% most-cited scientists. AACP faculty survey data related to research development demonstrated that faculty agreed that programs are available to develop competence in research at a high rate (Fac Q24 – 75-97%). To enhance this, the college recently added funds to the college department budgets earmarked specifically for faculty development activities which faculty may propose.

Faculty/Staff Development and Evaluation
The college has substantially expanded its commitment to faculty development both in terms of personnel and resources, as well as creating a college committee to identify needs and implement plans to address those needs. The college's significant emphasis on faculty development was first exemplified in 2011 by the appointment of a Director of Faculty Development. Under the leadership of the current director (Tejada-Simon), a comprehensive set of initiatives has been undertaken to address all areas of faculty development for faculty at all stages of their career. One new initiative is the development of a college-specific new faculty orientation program that helps familiarize new faculty with the colleges policies and procedures, teaching technology available to them, giving tips for effectively navigating the university structure, and providing a list of helpful resources. The director also has established a library of faculty development resources covering subjects from different methods of student learning, methods for incorporation of novel classroom technologies into teaching, resources for writing and revising grant proposals, writing effective assessment questions, incorporation of artificial intelligence, and the importance of developing networks to advance your career. Over the last five academic years, the college has hosted over 215 unique professional development programs with a combination of internal faculty experts and visiting lecturers. These activities supplement the mentoring activities provided by department chairs and colleague faculty. The Faculty Development Committee has also recently developed a new, more formalized mentoring program which has been approved by the faculty to be implemented by the department chairs in collaboration with the faculty. The most significant aspect of the mentoring program is the establishment of formal mentoring activities with multiple mentors to achieve specific objectives set forth by agreement of the faculty member and chair. The committee has also developed a peer-evaluation program, matching up faculty members with a peer colleague who sits in on a selected lecture and provides individualized feedback to their colleague.

The college recently has implemented a formative plan for faculty development called the Faculty Performance Partnership. The program consists of annual identification of goals by faculty in a partnership with their department chairs who will provide support for achieving these goals. This program is facilitated by funds that the college provided this

fiscal year to each department to support faculty development activities. Finally, the college and university have provided resources for faculty to engage in additional development activities in leadership. These were outlined previously as part of the college's succession plan. Staff development is the focus of the College's Central Business Administrator and the immediate supervisor of the staff member. The College's Staff council meets monthly to discuss College events and planning and opportunities for continuing education and development. The monthly meeting also helps to develop a personal connection between the staff members.

The College has a rigorous process for the evaluation and credentialing of all faculty candidates and has been successful in recruiting talented faculty with research experience and/or high-level pharmacy practice skills. This includes hiring faculty with multiple R01 NIH grants, successful recruitment of Presidential Frontier Fund Faculty (n=3), and pharmacy practice faculty hiring that are PGY2 trained or with further graduate degrees or significant experience. These and other recent hires have expanded the depth and breadth of our faculty. Key staff hiring has allowed for more advanced use of technology, streamlining of work effort, and an ability to employ cutting edge teaching techniques. While the college has a satellite campus in the RGV, this campus is primarily used as an experiential education site and does not routinely offer distance learning. Finally, there has been greater emphasis placed on strengthening the awareness of the role that each faculty member plays in the curriculum and what knowledge and skills are required for current and future pharmacy practice. To this end, clinical and basic science faculty are paired during interviews for student admission and the college curriculum committee is co-chaired with a pharmacist and non-pharmacist. Oral examinations during the therapeutics class in P3 are evaluated by clinical and basic science faculty, and shadowing between clinical and basic science faculty in their respective workplaces is being planned. In addition to increased focus of contemporary topic in pharmacy practice at college-wide meetings, we hope that the interactions between our pharmacist faculty and non-pharmacist faculty will improve the overall understanding of pharmacy practice at our college.

The University's Provost office mandates that an annual review be conducted for all full-time faculty. The annual performance review for staff is performed using ePerformance Evaluations coordinated by the University of Houston Human Resources department. The majority of faculty agreed that they had access to policies related to their performance as a faculty member (Fac Q13 – 79-87% agree), that their performance assessment criteria were explicit and clear (Fac Q14 – 69-80% agree), and that they receive formal feedback on their performance on a regular basis (Fac Q17 – 69-75% agree), which were all slightly below the national agreement response rates. Based on this feedback from faculty there has been a purposeful effort re-iterating the formal feedback status at our annual performance partnership review meetings.

Staff development activities **[19Q Staff Development Activities 2020-24]** are planned by the CBO office as well as Staff Council and are focused to meet the development and training needs of the staff. There have been several times where faculty development has partnered with staff council for joint professional development sessions. Staff responsibilities and duties that are agreed upon between supervisors and staff are established and documented in the HR system. Each year an evaluation is performed using these metrics and the evaluation is made available to the staff for review. The staff and supervisor then meet to discuss the evaluation and address any noted deficiencies. The staff then can acknowledge the meeting online and add comments they feel appropriate. The evaluation is then forwarded by the supervisor through the college administration and institution human resources department for review.

Notable Achievements and Improvements

Notable achievements and improvements since the last accreditation visit include: 1) greatly expanded commitment to faculty development with a director and a new college committee; 2) performance partnerships and specifically earmarked development funds; 3) development of well-defined metrics for faculty evaluation and greater faculty involvement through peer assessment; and 4) greatly expanded IT and classroom technology staff support. These are substantive changes that evidence the commitment of the college to meet this standard. Other notable achievements include:

National Academy. Faculty members Cuny and Eriksen became members of the National Academy of Inventors. Faculty member Hatfield became a member of the National Academy of Practice in Pharmacy

National Awards. Faculty won several national awards including the ASHP Foundation Literature Awards for Sustained Contribution (Tam and Garey), Presidential Citation from the Society of Critical Care Medicine (Coyle and Wanat), AACP Paul R. Dawson Award for Excellence in Patient Care Research (Aparasu), APhA Generation RX Award (Thornton), and joined the roster of the Fulbright Specialist Program (Salim).

Staff UH awards. Staff have won several university awards including Stephanie Escobar: 2024 Rookie of the Year, Egina Villalobos-Hernandez: 2024 Collaborator Award, Nathan Mortel: 2023 President's Excellence Awards - Administrative Professional, and the UHCOP IT Team: 2022-23 Team Excellence Recognition Award.

UH Top Grant Funding. For the past several years, all three UHCOP departments have been in the top five at the University in regard to research funding per tenured faculty member.

P-HOPER center, population health. Established in 2023, the vision of the Center for Population Health Outcomes and Pharmacoepidemiology Education and Research (P-HOPER) is to improve population health outcomes through innovative research, education, and practices. The P-HOPER mission is to conduct innovative population health outcomes research and offer educational programs and population practices with an impact on the region and the nation.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

 [TEXT BOX] [1,000 character limit, including spaces]

Standard No. 20: Preceptors: The college or school has a sufficient number of preceptors (practice faculty or external practitioners) to effectively deliver and evaluate students in the experiential component of the curriculum. Preceptors have professional credentials and expertise commensurate with their responsibilities to the professional program.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Curriculum vitae of administrator(s) responsible for overseeing the experiential education component of the curriculum

[20A CV_OEP Combined]

☑ List of active preceptors (student placements within the past 3 years) with credentials and practice site

[20B Preceptor List 2022-2024 Final]

☑ Number and percentage of all APPE precepted by non-pharmacists categorized by type of experience.

[20C APPEs precepted by non pharmacists (zero)]

☑ Preceptor recruitment and training manuals and/or programs

[20D Preceptor Orientation Presentation]

[20E UHCOP combined APPE Start of Rotation Email_Redacted]

[20F Preceptor Manual Final Version 2024]

[20G Preceptor Application Information]

☑ Policies and procedures related to preceptor recruitment, orientation, development, performance review, promotion, and retention

[20H UH College of Pharmacy Preceptor CE Combined Agendas]

[20I University of Houston - College of Pharmacy - Evaluation of Preceptor]

[20F Preceptor Manual Final Version 2024]

[20J IPPE Week 1 Check-In]

[20K APPE Week 2 Check-In]

☑ Examples of quality improvements made to improve student learning outcomes as a result of preceptor and site/facility assessment

[20L Student and OEP Interventions Quality Improvement Student Learning Outcomes Examples]

[20M Preceptor Site Interventions_QI Student Learning Outcomes Examples]

Data Views and Standardized Tables:

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

[20N Standard 20 SSQ_53,54_PSQ_1,6-10,30-33]

☑ AACP Standardized Survey: Student – Questions 53-54

☑ AACP Standardized Survey: Preceptor – Questions 1, 6-10, 30-33

Optional Documentation and Data:

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

    [20O OEP Organizational Chart PDF]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
20.1. Preceptor criteria – The college or school makes available and applies quality criteria for preceptor recruitment, orientation, performance, and evaluation. The majority of preceptors for any given student are U.S. licensed pharmacists.	✓	○	○
20.2. Student-to-preceptor ratio – Student to precepting pharmacist ratios allow for the individualized mentoring and targeted professional development of learners.	✓	○	○
20.3. Preceptor education and development – Preceptors are oriented to the program's mission, the specific learning expectations for the experience outlined in the syllabus, and effective performance evaluation techniques before accepting students. The college or school fosters the professional development of its preceptors commensurate with their educational responsibilities to the program.	✓	○	○
20.4. Preceptor engagement – The college or school solicits the active involvement of preceptors in the continuous quality improvement of the educational program, especially the experiential component.	✓	○	○
20.5. Experiential education administration – The experiential education component of the curriculum is led by a pharmacy professional with knowledge and experience in experiential learning. The experiential education program is supported by an appropriate number of qualified faculty and staff.	✓	○	○

3) **College or School's Comments on the Standard: The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.**

☑ Describe experiential education office including faculty/staff and a workload analysis.

☑ Describe how the college or school applies the policies and procedures for preceptor recruitment, orientation, performance, and evaluation.

☑ Discuss the college or school's student-to-preceptor ratio and how the ratio allows for individualized   mentoring and targeted professional development of learners.

☑ Describe how the college or school fosters the professional development of its preceptors commensurate with their educational responsibilities to the program.

☑ Describe the process for soliciting active involvement of preceptors in the continuous quality improvement of the education program, especially the experiential component.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

Experiential Education Administration

The Office of Experiential Programs (OEP) is composed of an Assistant Dean for Experiential Programs (ADEP), three Experiential Directors (IPPE, Ambulatory Care APPEs, Institutional APPEs), and a program manager **[20O OEP**

Organizational Chart PDF]. The Assistant Dean and three experiential directors are licensed pharmacists and pharmacy preceptors in the state of Texas with full-time faculty and administrative appointments. They have extensive knowledge and experience in experiential education, curricular development and preceptor development. The ADEP oversees the administration of IPPE and APPE curriculums, execution of affiliation agreements and management of financial affairs related to experiential education. The IPPE director also serves as the interprofessional education (IPE) director, facilitating cohesiveness between the two programs. The ADEP and IPPE/APPE directors work closely together to orient and mentor students and preceptors, develop programming for preceptor development, and arrange student site placements. The program manager is a certified pharmacy technician and supports OEP faculty by managing site onboarding requirements such as immunizations, maintaining the learning management system, CORE ELMS, and coordinating programs such as the P4 job fair and the preceptor conference. The ADEP and IPPE/APPE directors are integrated throughout the three didactic years of the curriculum as lecturers, skills lab facilitators and course coordinators. This helps facilitate awareness and sharing of pertinent information including knowledge and skills learned in the classroom along with performance and preceptor feedback on experiential rotations.

Preceptor Recruitment, Orientation, Performance, and Evaluation

Recruitment of new preceptors is based primarily on OEP assessment of need secondary to pharmacy practice trends and student practice area interests. The college continues to foster strong relationships with preceptors in the world's largest medical center, TMC, which provides access to dedicated preceptors who are willing to mentor pharmacy students when a need is identified. For example, with the increased implementation of electronic medical records and branching of community pharmacy to specialty medications, OEP developed rotations such as pharmacy informatics and community specialty pharmacy with input from preceptors in those fields. The growth of local student organizations such as the Academy of Managed Care Pharmacy and Industry Pharmacists Organization has spurred the OEP to enlist preceptors in managed care and pharmaceutical industry. The OEP faculty actively engage with potential new preceptors when conducting site visits, attending professional pharmacy conferences, and networking events. New preceptors are often considered after outreach from alumni, current preceptors and student requests. UHCOP has an application process for new preceptors which includes submission of background information, a recommendation form and curriculum vitae. **[20G Preceptor Application Information]** OEP reviews the documentation prior to approval of the preceptor, including eligibility confirmation by meeting the Texas State Board of Pharmacy (TSBP) Preceptor Certification requirements.

Preceptors are oriented to their respective rotations using the OEP Preceptor Manual, a guide for preceptors that includes contact information, an overview of the curriculum, student learning outcomes and an instructional guide for CORE ELMS. Preceptor and student-related policies and procedures including quality assurance, honor code violations, Title IX and professional misconduct are also detailed in the preceptor manual. There is a Preceptor Orientation Video **[20D Preceptor Orientation Presentation]** that is posted in CORE ELMS for the preceptors to view prior to taking a pharmacist intern. For each rotation, IPPE/APPE directors email preceptors two weeks prior to the start with information including the experiential course syllabus, preceptor manual, deadlines of evaluations and assignments, policies, and other important updates for the rotation **[20E UHCOP combined APPE Start of Rotation Email_Redacted]**.

Experiential directors review student check-ins during week one of IPPEs and week two of APPEs, and reach out to students and preceptors to discuss any matters, including preceptor performance, that may affect the rotation outcome. Students evaluate preceptors at the end of each rotation, and the preceptors receive these student evaluations annually through CORE ELMS at the end of the academic year **[20I University of Houston - College of Pharmacy - Evaluation of Preceptor]**. Learning how to run reports and access evaluations is anticipated to be easier for preceptors who have learners from different institutions compared to when the college utilized a different learning management system. Additionally, OEP offered informational sessions and developed guides posted to CORE ELMS after the transition, including how to access preceptor evaluations. OEP faculty review the student evaluations of preceptors after each rotation block, and if any issues need immediate attention, the OEP will contact the preceptor to discuss. Preceptors with exceptional performance are recognized at the college's annual graduation awards banquet based on their practice area.

Student-to-Preceptor Ratio

Although the TSBP has no ratio requirements for preceptors supervising pharmacist interns as part of a Texas college of pharmacy program, most of the pharmacy practice experiences at UHCOP have a 1:1 or 2:1 student-to-preceptor ratio. In some cases, a higher ratio of 3:1 occurs in settings where there are co-preceptors or utilization of a team-based approach to precepting students, especially in sites that are in large medical centers or clinics. The TSBP does stipulate that direct supervision of pharmacist intern by a preceptor is required with preparation and delivery of prescription or medication orders, and in these cases, the college strives to maintain a 1:1 ratio. The current ratio is optimal for experiential learning in that preceptors can provide feedback tailored to each student's individual needs while allowing students to learn from peers, other pharmacists, and other healthcare practitioners. Many of the health-systems sites use a layered learning model utilizing post-graduate pharmacists to mentor interns. About 15-20% of P4 students participate in a longitudinal APPE (LAPPE) or longitudinal clinical experiences program (LCEP) where they receive structured professional development and longitudinal mentorship by a preceptor throughout their tenure at the site.

Professional Development of Preceptors

The college is committed to providing quality preceptor development programs to foster preceptor growth and development. Prior to 2020, the OEP in collaboration with the college's PREMIER Center provided an annual, live, 4-hour preceptor conference at the college that included three hours of preceptor continuing education. The live events were attended by at least 100 pharmacists each year; however, starting in 2020 due to the COVID-19 pandemic, the event transitioned to a live webinar that was open to all UHCOP preceptors. This transition led to improved access to the preceptor conference, with 200-300 in attendance annually. Robust topics have been presented at the preceptor conferences each year, including contemporary precepting topics such as entrustable professional activities, professional identity formation, preceptor well-being, and emotional intelligence **[20H UH College of Pharmacy Preceptor CE Combined Agendas]**. The preceptor conference is supported by the college and is available at no cost to all preceptors each year. Preceptor conference evaluations in 2023 scored > 4.8/5 in the items related to increasing participant knowledge and meeting educational needs. The impact of these presentations is also illustrated by responses to what will be done differently after participation in the program, such as "to be sure that I take a moment before giving feedback to be sure that I am not responding emotionally", and "will apply the EPA structure as I think about where I expect students to be at beginning and end of rotation." In addition to the college's preceptor conference, the OEP is a member of the Texas Consortium on Experiential Programs, which consists of experiential education faculty from all the pharmacy colleges in Texas. The consortium develops programming for preceptor development for the pharmacy state organizations. UHCOP experiential faculty have also presented outstanding preceptor education in local, state and national professional meetings.

Involvement of Preceptors in Continuous Quality Improvement

Preceptors have many opportunities to participate in the continuous quality improvement of experiential education at the college. There are preceptors who serve on various committees at the college including the Dean's Advisory Council, Curriculum Committee, Student Affairs, and the Pharm.D. Admissions and Progressions Committee. Specifically related to experiential education, multiple preceptors serve as members on the Pharm.D. Experiential Advisory Committee. This committee includes two non-faculty preceptors representing institutional and ambulatory care practice as well as at least one clinical faculty member who serves as a preceptor. The advisory committee has addressed topics such as experiential emergency response, site visit form revisions, and preceptor education. The site visits conducted by the OEP provide an opportunity for direct feedback from preceptors to the college. This feedback has been incorporated to improve experiential orientation and other activities. For example, when a trend in preceptor feedback for final evaluations suggested that the current year students need additional guidance on patient work-ups, a Patient Care Pathway was provided and reviewed with students during on-campus day and subsequent APPE orientations. If the feedback is not related to experiential, it is disseminated to the appropriate college committee. Preceptors are also incorporated into IPPE and APPE orientation and assist with the P4 professional development series which addresses networking, career planning and postgraduate training.

Notable Achievements, Innovations or Quality Improvements

Along with preceptors, the OEP puts forth a purposeful effort to follow students closely, and proactively provide individualized mentorship and guidance when a need is identified related to any of the student learning outcomes. For

example, when a student was struggling with independently interviewing and counseling on an ambulatory care rotation, the OEP worked closely with the preceptor to provide additional practice counseling sessions with OEP faculty and other strategies for improving counseling and interviewing techniques. This collaboration not only provided support to preceptors but allowed for enhanced professional growth by having a team with different teaching styles and perspectives focused on a specific area needing improvement for an individual student.

The students benefit from the cutting-edge practice of clinical faculty and preceptors at progressive and nationally ranked health care sites such as the renowned oncology center at University of Texas MD Anderson Cancer Center, and the progressive ambulatory care practices at the Michael E. DeBakey Veterans Affairs Medical Center and Harris Health Systems where pharmacists practice at the top of their professional license with many having delegated prescriptive authority under a collaborative practice agreement. Many preceptors work in academic medical centers or patient-centered medical homes with large interprofessional teams that provide opportunity for students to interact not only with physicians and nurses but also other operational staff and allied health professionals. For example, at Vecino's Denver Harbor Family Health Center, both IPE and APPE students observe roles and interact with behavioral health, community health workers, social workers and referral coordinators.

Along with progressive clinical and pharmacy practice, UHCOP practice sites and preceptors are engaged in programs for additional student professional development and strive for precepting excellence. The college has established relationships with healthcare systems that have allowed UHCOP student application to internships during P1-, application-based APPEs, and longitudinal APPE programs. Longitudinal APPE programs provide enhanced professional development and mentorship for approximately 20-25 UHCOP students per year. Many student research posters are mentored by preceptors. UHCOP practice sites and preceptors have been recognized at the state and national level for their preceptors and training programs, including the 2023 American Society of Health-Systems Pharmacy - Pharmacy Residency Excellence Program Award for Houston Methodist Hospital.

Administrative innovations include the transition of all nine colleges of pharmacy in Texas to one electronic learning management system, helping preceptors who take students from multiple schools have ease of access and efficiency with utilization of one platform. Additionally, in response to the COVID-19 pandemic and weather-related events impacting experiential rotations, the OEP in conjunction with the Pharm.D. Experiential Advisory Committee developed the Experiential Programs Policy on Unexpected Events which outlines communication, safety and completion of rotation considerations when such events occur.

AACP Survey Data

Student responses from the 2019-2023 AACP standardized survey questions related to this standard indicated that students overwhelmingly agreed or strongly agreed that preceptors modeled professional attributes and behaviors (Student Q53 – 95-99% agree). Students also overwhelmingly agreed that preceptors provided them with individualized instruction and evaluation (Student Q54 – 95-98% agree), which was at or above agreement with responses at the national level. Preceptor responses related to this standard indicated strong agreement with communication between the college and preceptors (Preceptor Q1, 6-7, 30), which was at national agreement rates. Preceptors agreed the college has effective professional development efforts (Q33 – 88-91% agree). Preceptors mostly agreed criteria for performance evaluation was clear (Q7 – 78-85% agree). Agreement with this question was in-line with national response rates for most years, but the college hopes to improve this perception with its enhanced efforts around making preceptor evaluations more readily accessible.

4) **College or School's Final Self-Evaluation: Self-assess** how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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	Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it	• Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise

	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.	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.	compliance does not exist or has not yet been initiated **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring: If applicable, briefly describe issues or elements of the standard that may require further monitoring.**

   [TEXT BOX] [1,000 character limit, including spaces]

Standard No. 21: Physical Facilities and Educational Resources: The college or school has adequate and appropriately equipped physical and educational facilities to achieve its mission and goals.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Floor plans for college or school's facilities and descriptions of the use(s) of available space

[21A 21A3-HBSB2 – 05215_COP room number plans]

[21B Floor Plan with Descriptions of Use of Available Space]

☑ Analysis of the quantity and quality of space available to the program and plans to address identified inadequacies

[21C Analysis of the Quantity and Quality of Space Available to the Program and Plans to Address Identified

Inadequacies]

☑ Documentation of Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC) or other nationally recognized accreditation of animal care facilities, if applicable

[21D 2023 AAALAC Accreditation Letter]

Required Documentation for On-Site Review:

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

[21E 2017 Health 2 Building Architectural Drawings Levels 1 through 9]

[21E2 2020 Health 2 Building Architectural Drawings Levels 8,9]

Data Views and Standardized Tables:

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

[21F Standard 21 FSQ_26-29,31_SSQ_60-68_PSQ_34,35]

☑ AACP Standardized Survey: Faculty – Questions 26-29, 31

☑ AACP Standardized Survey: Student – Questions 60-68

☑ AACP Standardized Survey: Preceptor – Questions 34-35

Optional Documentation and Data:

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

[21G HelbingCVMay24]

[21H UHCOP Health Building II Classroom Space]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U

21.1. Physical facilities – The college or school's physical facilities (or the access to other facilities) meet legal and safety standards, utilize current educational technology, and are clean and well maintained.	✓	○	○
21.2. Physical facilities' attributes – The college or school's physical facilities also include adequate:	✓	○	○
• Faculty office space with sufficient privacy to permit accomplishment of responsibilities	✓	○	○
• Space that facilitates interaction of administrators, faculty, students, and interprofessional collaborators	✓	○	○
• Classrooms that comfortably accommodate the student body and that are equipped to allow for the use of required technology	✓	○	○
• Laboratories suitable for skills practice, demonstration, and competency evaluation	✓	○	○
• Access to educational simulation capabilities	✓	○	○
• Faculty research laboratories with well-maintained equipment including research support services within the college or school and the university	✓	○	○
• Animal facilities that meet care regulations (if applicable)	✓	○	○
• Individual and group student study space and student meeting facilities	✓	○	○
21.3. Educational resource access – The college or school makes available technological access to current scientific literature and other academic and educational resources by students, faculty, and preceptors.	✓	○	○
21.4 Librarian expertise access – The college or school has access to librarian resources with the expertise needed to work with students, faculty, and preceptors on effective literature and database search and retrieval strategies.	✓	○	○

3) **College or School's Comments on the Standard: The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.**

☑ Describe the physical facilities, including available square footage for all areas outlined by research facilities, lecture halls, faculty offices, laboratories, etc.

☑ Describe how the college or school's physical facilities (or access to other facilities) utilize current educational technology.

☑ Describe the educational resources available to faculty, preceptors, and students (library, internet access, etc.).

☑ Describe how the college or school makes available technological access to current scientific literature and other academic and educational resources to students, faculty, and preceptors.

☑ Describe the equipment for educational activities, including classroom and simulation areas.

☑ Describe the equipment for the facilities for research activities.

☑ Describe the facility resources available for student organizations.

☑ Describe the facilities available for individual or group student studying and meetings.

☑ Describe any shared space and how the facilities encourage and support interprofessional interactions.

☑ Describe any other notable achievements, innovations, or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [15,000-character limit, including spaces] (Approximately six pages)

In 2017, the College of Pharmacy moved into the state-of-the-art Health 2 Building (H2) on the university's main campus. The college of pharmacy occupies space on six floors of H2 encompassing 157,000 out of 300,000 square feet in the

building. In addition to the COP, H2 houses space belonging to the College of Medicine, Nursing, Department of Biomedical Engineering, Health Sciences Library, and Population Health. H2 clinical facilities include CAPS, Student Health Center, UH Family Medicine Clinic, and Campus Pharmacy.

The third floor serves as the hub of UHCOP with the main entrance, the Dean's Office, Student Services, Experiential Education, Central Business operations, IT suite, and a large open area multi-use space (5,600 sq.ft.) where students regularly gather, study, and socialize. The OSPA has monthly themed displays focused on culture and celebration in this multi-use space, and it serves as an important networking part of the college. The third floor has a student kitchen with a wall of 21 microwaves, two large refrigerators/freezers, and kitchen sink. The third floor is equipped with a Student Resource Center, an office containing multifunctional printers for students, and numerous study suites. In total, the college has 37 individual study carrels and eight group study rooms (reserved via an online system). Each study room is equipped with large television monitors with wireless presentation capability. After classes end, students can also utilize the large classrooms as study or meeting space. The Health Sciences Library and other libraries on campus have reservable individual and group study spaces. The educational spaces associated with the PharmD program are located on the third and fourth floors of H2. The third floor has two very large lecture halls (each 4200 sq.ft.; capacity 187), two interactive classrooms (that can be joined to create one large active learning classroom (3468 sq.ft., capacity 130)), one medium lecture hall (1,857 sq.ft., capacity 72), and three smaller sized classrooms. Educational spaces on the fourth floor include the OSCE suites, the PCCA Pharmacy Care Lab, and the Sterile Products Lab.

Faculty offices and research labs are housed on floors four through seven and nine of H2. Faculty offices and translational research lab space for the Departments of Pharmacy Practice and Translational Research (PPTR) and Pharmaceutical Health Outcomes and Policy (PHOP) are on the fourth floor. The H2 fifth, sixth, and seventh floors are occupied by the Department of Pharmacological and Pharmaceutical Sciences (PPS), where faculty offices reside and there is more than 35,000 sq.ft. of research space. The sixth floor houses the college's research administrators and is shared with UH Population Health. The college has 365 sq.ft. in the Animal Care Operations (ACO) facility located on the H1 fifth floor. The ninth floor houses the PREMIER Center including seven offices (853.74 sq.ft.) and a shared conference room. The UHCOP RGV Satellite Program in Edinburg has a classroom and extended office space at DHR Health. This provides nearly 800 sq.ft. of total space including a 16-person classroom and 12 cubicles of extended office space.

Library Resources and Educational Technology
The University Health Sciences Library is located on the second floor of H2 (6121sq.ft.) and has 160 seats, three reservable group study rooms, 1407 print books, and 127 anatomical models. Subscriptions to electronic scientific literature resources, including e-journals, e-books, and e-databases, are managed centrally through the UH Libraries system. The UH Libraries system comprises of 5 campus library locations with over 1000 collective seats, and pharmacy students can utilize any location. UH Libraries provides access to 400+ databases, 150,000+ current journal subscriptions, and 3 million+ books. Current subscriptions to notable journals in pharmacology and pharmacy include the American Journal of Health-System Pharmacy, Annals of Pharmacotherapy, Nature Reviews Drug Discovery, and many more. Pharmacy students, faculty, and preceptors (with sponsored UH accounts) have full access to these, including from off-campus. The college has worked to improve the process for preceptors who request library access to be granted a sponsored UH account. A health-services librarian is available to provide instruction, collection development, and research support for the COP.

The college is committed to providing state-of-the-art educational technology to students, faculty, and staff. Our facilities contain modern lecture halls and classrooms with computers, multiple projector screens, and confidence monitors for lecturers. In the three largest lecture halls, microphones are placed between seats for interaction between students and the instructor. Cameras with presenter tracking support both online and in person lecturing. Each large classroom is equipped with a 50-inch digital Vibe board. Smaller classrooms have a podium with computer, microphone, camera, and Wacom digital display. Classrooms are equipped with Mediasite recorders for automated recording and posting to Canvas, and cameras for Teaching Assistants to remotely take attendance. The college has 9 conference rooms equipped with video conferencing technology, touch screen computers, and large display screens.

Continuous support for the use of this educational technology is provided by the college's IT department. The COPIT Team improved all classrooms in the building to support both in-person and off-campus learning, allowing students to receive and learn from off-campus speakers. The team has received 100% satisfaction ratings on yearly surveys given to faculty and staff at the college. The team has led several successful projects since moving into H2, including migrating the college's learning management system from Blackboard to Canvas, setting up and maintaining 18 servers on-site, and setup of the new space at DHR. This team received the UH 2022-23 Team Excellence Award for their outstanding performance and level of support.

Educational Lab Spaces

The college has an active learning classroom (3001/7) that is used for skills lab activities, lecturing, various assessments, student organization meetings, seminars, faculty, and staff meetings. Each table is equipped with a computer, a microphone, network ports, and HDMI cables to allow students to present using their own laptop. The room can be configured so each table can present independently, or one table can present to all screens. The room can also be split into two independent classrooms. The room is equipped with 30 3-ft wide by 4-ft tall, wheeled marker boards that students use to illustrate systems, processes, and graphs in relation to their coursework.

The Pharmacy Care Lab (4005) has 16 pods with four stations at each pod. Each pod is equipped with four workstations and chairs, one printer, two electronic class A balances, four hot plates, 20 drawers and eight overhead cabinets, three cameras, and a Murphy table. The Murphy table folds downward to be used as an exam table or for group work. The lab has 65 computers with wireless keyboards and mice, displays at each computer, a large instructor display with touch screen technology, and instructor front and rear cameras for demonstrations. Views of the instructor and their PC can be broadcast to all stations simultaneously. There are ten 6-ft lab tables in the center of the Care Lab that are used for demonstrations where close-up live viewing is appropriate. There is a mock pharmacy stocked with medication containers, a pick-up window desk with two computers for processing, a consultation room, overhead cameras, and a display with a computer to simulate a drive through scenario. This lab is used for lab activities, non-sterile compounding, lecturing, and various standardized assessments.

The Sterile Lab has touchless sliding doors and is equipped with 20 simulation IV hoods for sterile compounding labs. Speakers and cameras are installed behind each hood and in the ceiling for recording, demonstrations, and for instructions to be given from a control room. There is a simulated ante room equipped with two large storage closets, stainless steel racks for drug products, and 5 foot-pedal controlled stainless-steel handwashing sinks.

The college has a 9-station OSCE Center with a control room that is used for standardized assessments, skills labs, and multiple-mini-interviews. Each room is equipped with a Murphy table and sink, two cameras, ceiling speakers, a microphone, display, computer, wireless keyboard, and mouse. The control room has multiple displays and technology needed to communicate and facilitate events in the OSCE suites. Three programmable medical mannequins (sim-ALEX) are available for activities such as obtaining heart rate, blood pressure, counting breaths per minute or getting patient histories. The recordings from SimIQ are used for asynchronous evaluator grading, and the videos can be released to students for feedback.

The college strives to provide an equitable learning experience for students with disabilities. The Care Lab has 4 pods that are wheelchair accessible. The sterile compounding room has height adjustable compounding hoods, and the lecture halls have removable chairs on the first few rows to accommodate wheelchairs. The lecture halls also have captioning available in the presentation software, and lectures are recorded for student viewing.

The college utilizes Zoom Pro (17 accounts) and Microsoft Teams for teaching and communication within and outside of the college. Each of the 4 PharmD classes has a designated Zoom Pro account connected in all PharmD courses and available for virtual viewing for students. Faculty and staff utilize Zoom for department meetings and presentations to allow off-campus participation and remote presentations. Zoom is also utilized for interprofessional education events, student interviews, P4 on campus days, continuing preceptor education, student organization meetings, and for sharing college events with alumni and friends. Microsoft Teams is used for virtual meetings and phone communication within

the College and University. Outside the classroom, three wireless SSIDs and a hardwired ethernet are available throughout the facility. Through this network, all students have access to Canvas, Office 365 products, and other applications provided by the University.

Student Organization Resources
With over 20 pharmacy student organizations, a culture of collaboration and working together to share and preserve space at the college is a requirement. Student organizations generally hold monthly meetings within floor three space during lunch hour and can reserve building space for fundraisers, seminars, and events. Each student organization has access to a locked closet to store materials. Student organizations have access to Zoom Pro accounts.

Shared space
Floor one of H2 has shared bathrooms, a loading dock, and shares a waste staging area with the H1 building. Floors one and two of H2 have a coffee shop, Health Sciences Library, dentist office, pharmacy, and primary care clinic. These floors are continuous with H1 which houses the COO and ambulatory eye surgery center. The shared space within the Health Science Library also allows for student collaboration. The teaching lab spaces, while owned by the college of pharmacy, are regularly used for interprofessional education activities with other disciplines. The conference rooms on floors 3-7 are used for research meetings, skills-based education prelab meetings, shared workspace, journal scans, and other collaborative activities. The small lecture hall is used with video technology for collaboration between departments and RGV campus. Floors five through seven have shared kitchenettes, bathrooms and conference rooms. Floor five has 7,044 sq.ft. of open lab concept with shared equipment space. Floor six has a shared kitchenette, bathrooms, and conference room with PHOP. Biomedical engineering and Medicine also have offices in H2. Floor seven has 1,453 sq.ft. of shared equipment space for the research labs. Private offices allow for student meetings, and conference rooms are used for collaborative workspace with students. Shared space can be reserved via the room reservations system on Outlook.

Research Facilities
The college has a significant research mission as part of its contribution to the University as a R1 top-tier pubic research university. The college's state-of-the-art, world-class research facility encompasses major portions of H2 totaling 35,775 sq.ft. of lab and lab support space and an additional 365 sq.ft. in H1. Included in this is more than 5,000 sq.ft. of labs designed for tissue culture and infectious disease work. Graduate students and research staff have over 2,700 sq.ft. of write-up space. We have a variety of research equipment including a core lab featuring high resolution LCMS, NMR, in vivo imaging with CT and X-ray capability, ultrasound imaging, super-resolution confocal microscopy, digital PCR and real-time PCR machines, and flow cytometry cell sorters. Researchers also have access to AAALAC-accredited animal facilities located in H1. Floor five of H2 is continuous with that of the ACO in H1, allowing for easy access to the ACO and transport of research subjects.

Notable Achievements and Limitations
The quality of space and high level of technology are truly notable and allow faculty to train students at a very high level as indicated by our AACP survey data. The college facilities have also managed to remain structurally sound after major hurricane and weather related events in the region. Additionally, the level of service that our IT team provides to the faculty and students is excellent and has been honored at the university and college levels.

The sheer number of student organizations creates a meeting space challenge during the lunch hour; while Pharmacy Council effectively manages this process, some organizations and students feel it would be nice for more space. As we have grown recently, faculty office and research space is nearly at capacity, and we will need to look for creative ways to manage these challenges.

Interpretation of AACP Survey Data
Data from the AACP survey from faculty overwhelmingly indicates the college has appropriate resources to deliver the PharmD program. From 2019-2023, faculty agreed or strongly agreed 94-98% of the time that office space permits accomplishment of their responsibilities (Fac Q26), which was higher than the national average. The vast majority of faculty also agreed the college has resources to address research (Fac Q27 – 80-91% agree), instructional technology (Fac

Q28 – 95-98% agree), and academic program needs (Fac Q29 – 91-100%), which was significantly higher than national averages for those questions. For students, questions 60-68 relate to facilities and resources. Students overwhelming agreed classrooms, labs, common areas, and educational resources were appropriate to meet their learning needs, and these responses were at or above averages for peer institutions and national data. Lastly, preceptors agreed there were adequate facilities and resources to precept students (PQ34 – 92-96% agree), and generally agreed that the college provides access to library and educational resources (PQ35 – 64-78% agree), which was slightly below the national average for this question. The OEP has piloted a new process for preceptor library access and plans to roll out this process to all preceptors during the 2024-25 academic year.

4) **College or School's Final Self-Evaluation: Self-assess** how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

Standard No. 22: Practice Facilities: The college or school has the appropriate number and mix of facilities in which required and elective practice experiences are conducted to accommodate all students. Practice sites are appropriately licensed and selected based on quality criteria to ensure the effective and timely delivery of the experiential component of the curriculum.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Examples of affiliation agreements between college/school and practice sites (all agreements will be reviewed during site visits)

      [22A University of Houston College of Pharmacy affiliationagreement_ogc-s-1998-21_revised03.05.2018 TEMPLATE]

      [22B K-23-H0413-025 Fully Executed_Agreement Only_Redacted]

      [22C K-23-H0413-025 The UTMDACC IPPE_Fully Executed_Agreement Only]

☑ 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 with student placements in the past 3 years should be identified.)

      [22D Experiential Practice Sites 2022-2024 Master List Final]

☑ ACPE IPPE Capacity Chart (Template available for download)

      [22E IPPECapacityChart - IPPEs 2023-24]

☑ ACPE APPE Capacity Chart (Template available for download)

      [22F UH College of Pharmacy APPECapacityChart]

Optional Documentation and Data:

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

      [22G EXPERIENTIAL SITE EVALUATION FORM - 2019-2020 rev 6-25-2019]

      [22H University of Houston - College of Pharmacy - Evaluation of Site]

      [20L Student and OEP Interventions Quality Improvement Student Learning Outcomes Examples]

      [20M Preceptor Site Interventions_QI Student Learning Outcomes Examples]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
22.1. Quality criteria – The college or school employs quality criteria for practice facility recruitment and selection, as well as setting forth expectations and evaluation based on student opportunity to achieve the required Educational Outcomes as articulated in Standards 1–4.	✓	○	○
22.2. Affiliation agreements – The college or school secures and maintains signed affiliation agreements with the practice facilities it utilizes for the experiential component of the curriculum. At a minimum, each affiliation agreement ensures that all experiences are conducted in accordance with state and federal laws.	✓	○	○
22.3. Evaluation – Practice sites are regularly evaluated. Quality enhancement initiatives and processes are established, as needed, to improve student learning outcomes.	✓	○	○

3) **College or School's Comments on the Standard: The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.**

☑ Provide a 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.

☑ Describe the strategies used for the ongoing quantitative and qualitative development of sites and preceptors and formalization of affiliation agreements.

☑ Describe how the college or school assures, measures, and maintains the quality of sites and preceptors used for practice experiences.

☑ Describe how quality improvements are made based on assessment data from practice sites.

☑ Describe how the college or school determines the need to discontinue a relationship that does not meet preset quality criteria.

☑ Describe any other notable achievements, innovations or quality improvements

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

Capacity Assessment

The capacity of the required IPPEs and APPEs as well as elective APPEs are adequate for the current and future cohorts of UHCOP pharmacy students with sufficient overage to anticipate any changes in site and preceptor availabilities. Community IPPE experiential learning requires 160 hours and is completed in the summer of P1. Institutional IPPE experiential learning requires 160 hours and is completed in the summer of P2. The IPPE capacity assessment for the last two academic years has had a significant surplus of preceptor availability to meet the needs of our students and any anticipated future student enrollment changes **[22E IPPECapacityChart - IPPEs 2023-24]**. The APPE capacity assessment for the last two academic years has also had surplus of preceptor availability to meet the needs of both required and elective APPE rotations **[22F UH College of Pharmacy APPECapacityChart]**. The college has more than 10% surplus in APPE capacity for all of the required and elective rotations for students, including a 23% surplus in ambulatory care APPE rotation availability (134 APPE capacity for 109 students) and a 52% surplus in internal medicine APPE rotation availability (166 APPE capacity for 109 students) for the upcoming academic year.

Of the seven APPE rotations that students complete in P4, four are required: internal medicine, ambulatory care, advanced community, and advanced hospital. Students choose three electives, two of which must be patient-care focused, and one which may be either patient-care focused or non-patient care focused. The Office of Experiential Programs (OEP) sends requests for site/preceptor availability at least 7 months prior to the beginning of the experiential year, allowing ample time for preceptor planning and early identification of major changes to site availabilities. Since 2018, the college has expanded its APPE ambulatory care sites with the addition of full-time clinical faculty at Vecino's Denver Harbor Family Health Center and the University of Texas Physicians Comprehensive Sickle Cell Center. The OEP has also increased collaboration with Humana to establish CenterWell clinics as a practice site and utilized new models of ambulatory care such as VillageMD clinics associated with Walgreens Pharmacy. The college also collaborates with multiple health-systems (Houston, Dallas, and Temple, TX) who offer longitudinal APPEs and multi-site LAPPEs, which has increased the availability of APPEs to our students and provided the added benefit of enhanced professional development that come with longitudinal programs. In 2023-2024, there were 20-25 UHCOP students who applied and were selected for LAPPE programs. The ability of the college to provide adequate sites in case of unanticipated changes was demonstrated in the first year of the COVID-19 pandemic where students were able to progress despite rotation cancellations due to availability of alternate sites.

Strategies For Development of Sites and Preceptors and Affiliation Agreements

The college continues to offer strong practice experiences characteristic of current pharmacy trends and the pharmacists advancing scope of practice. The OEP faculty keep well-informed of the pharmacy practice trends through their participation in national, state, and local pharmacy associations and by monitoring student career interests to identify areas where additional site development may be needed. The college is fortunate to have a steady interest from alumni who generously offer their expertise and time to serve as preceptors and encourage their colleagues to do so as well. For example, an alumni recently facilitated multiple rotation offerings at a new site in the pharmaceutical industry due to their positive experience while they were completing a pharmaceutical industry rotation as a student. New collaborations between the college and Humana as well as the implementation of the RGV satellite campus have led to development of new sites with diverse rotation experiences and patient populations served. The partnership with RGV satellite campus allowed for the addition of DHR Health as a site, which provided access to 17 preceptors and numerous pharmacy practice experience offerings. Recruitment of preceptors from new sites also occurs during networking events, professional meetings, peer to peer communication among professionals, and by sites who reach out and are interested in precepting our students.

All practice sites must have a fully executed affiliation agreement with the University of Houston prior to precepting students. The site can use the standard affiliation agreement approved by the University's legal counsel and contract administration **[22A University of Houston College of Pharmacy affiliationagreement_ogc-s-1998-21_revised03.05.2018 TEMPLATE].** Alternatively, the practice site can utilize their own agreement, and the agreement will be reviewed and approved by the university's office of contract administration.

Quality Assurance and Quality Improvement of Sites and Preceptors

All students evaluate their practice sites and preceptors at the end of their IPPE and APPE rotation experience through the electronic learning management system, CORE ELMS **[22H University of Houston - College of Pharmacy - Evaluation of Site].** The evaluations are reviewed by the OEP after every rotation and any opportunities for improvement or deficits identified are addressed with the site and/or preceptor as applicable. Students also submit a Week 1 IPPE Check-in and Week 2 APPE Check-in form through CORE ELMS which helps with proactively identifying any site-related issues, including the inability of the site to meet learning objectives for the given rotation.

The OEP conducts routine site visits of practice sites on a three-year basis for community pharmacy rotation sites and a three-year basis for non-community pharmacy rotation sites. Additional site visits may be scheduled sooner if there are concerns identified during the routine site visit or substantive changes occurring at a practice site. A standardized site visit form is utilized by the OEP to document and assess information related to the practice site covering the patient population served, patient volume, student access to patient information and resources, administrative and pharmacy personnel support for student learning, interprofessional activities, orientation process, and the types of operational and clinical services provided.

Student evaluations and site visit information are reviewed by the OEP to evaluate quality and ensure the practice site and preceptors provide a learning experience that meets the college's student learning outcomes. During site visits, the OEP meets with the practice sites and preceptors to discuss opportunities for improvement and to ensure required criteria for the rotation is being met. Select examples of quality improvement that have come from site visits include discussions with a precepting group to improve communication between sites and students, providing preceptor guidance to effectively evaluate students when prior evaluations did not provide sufficient details for student improvement, and education to help preceptors set overall expectations for a rotation to their students. More examples are provided in the preceptor site quality improvement examples document (Student and OEP Interventions Quality Improvement Student Learning Outcomes Examples). After careful consideration of the factors involved, if the site or preceptor is unable to meet rotation objectives and requirements, or there is a lack of preceptors to successfully complete the rotation, the site and/or preceptor relationship with the college will be discontinued. Practice site evaluations from students are also used to triage site difficulties and further discussions with practice sites. Sites and preceptors that have consistently provided excellent practice experiences for students are recognized during the annual UHCOP Graduation Banquet. Additionally, AACP Crosswalk Data shows consistent favorable trends that graduating students felt their IPPEs/APPEs were of high quality, allowed for direct interactions with diverse populations, and allowed for collaboration with other health care professionals.

Notable Achievements, Innovations, and Quality Improvements

The college has maintained long standing relationships with many high-quality rotation sites in TMC and throughout Texas. Many practice sites, especially those in academic medical centers, provide experiences in progressive pharmacy practice programs with opportunities for our students to provide highly specialized services, care for diverse patient populations, and interact with global experts in various areas of health care. The College has expanded its diversity of APPE rotations that help enhance student professional growth and broaden exposure to diverse career pathways including rotations in managed care, pharmaceutical industry, regulatory affairs, association management, and federal professional organizations. Students continue to have opportunities for rotations at the federal level in organizations such as the Centers for Disease Control and Prevention, Indian Health Services, and the Food and Drug Administration, as well as with the Texas State Board of Pharmacy at the state level. The development of our satellite campus at RGV has opened opportunities for students in IPPEs and APPEs to experience providing patient care to a medically underserved, predominantly Hispanic patient population with varying health disparities. Multiple students have completed these unique experiential rotations in the Rio Grande Valley and have gone on to residency training programs or taken jobs in the same location.

There are three IPPE block schedules in the summer which provide students flexibility in P2 and P3 to explore their areas of interest through other summer internships and didactic elective courses. Participation in these internships and didactic elective courses have propelled student professional development towards new areas of interest, and students have been accepted to nationally competitive APPE rotations such as with Bristol Myers Squibb. These learning opportunities have propelled students career pathways into unique opportunities, and many of these alumni now offer new rotations to the college in these practice areas.

Lastly, to further enhance the quality assurance process, the OEP in conjunction with the Pharm.D. Experiential Advisory Committee has recently worked to update the site visit form to further enhance the college's ability to characterize sites, anticipate student experiences on rotation, and patient populations served. This additional detail collected on volume and clinical services for community rotations, scope of student practice and disease states on ambulatory care rotations, and types of consult services on institutional rotations has provided additional information very useful to the OEP for quality assurance evaluations of our practice sites.

4) **College or School's Final Self-Evaluation: Self-assess** how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring: If applicable, briefly describe issues or elements of the standard that may require further monitoring.**

   [TEXT BOX] [1,000 character limit, including spaces]

Standard No. 23: Financial Resources: The college or school has current and anticipated financial resources to support the stability of the educational program and accomplish its mission, goals, and strategic plan.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ Detailed budget plan or proforma (previous, current, and subsequent years)

> **[23A Detailed Budget Plan-Financial Resources FY2023]**

> **[23A2 Detailed Budget Plan-Financial Summary - Self Study Report 2023]**

☑ In-state and out-of-state tuition compared to peer schools

> **[23B In-state Tuition Compared to Peer Schools 2019-2023]**

> **[23B2 Out-State Tuition Compared to Peer Schools 2019-2023]**

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

> **[23C Analysis of Federal and State Governmental Support, Tuition, Grant Funding and Private Giving]**

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

> **[23D Assessment of Faculty Generated External Funding Support in Terms of its Contribution to Total Program Revenue]**

Data Views and Standardized Tables:

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

> **[23E Standard 23 FSQ_27,28_PSQ_34]**

☑ AACP Standardized Survey: Faculty – Questions 27, 28

☑ AACP Standardized Survey: Preceptor – Question 34

☑ In-state tuition for past five years compared to national data

> **[23F In-State Tuition Comparison 2019-23 AAMS]**

☑ Out-of-state tuition for past five years compared to national data

[23G Out-of-State Tuition Comparison 2019-23 AAMS]

☑ Grant funding for past five years compared to national data

[23H Grant Funding Comparison 2018-22 AAMS]

Optional Documentation and Data:

☑ In-state tuition for past five years, with peer school comparisons –

[23B In-state Tuition Compared to Peer Schools 2019-2023]

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

[23B2 Out-State Tuition Compared to Peer Schools 2019-2023]

☑ Total grant funding for past five years, with peer school comparisons

[23I Total Grant Funding Compared to Peer Schools 2018-2022]

☑ NIH funding for past five years, with peer school comparisons

[23J NIH Funding Compared to Peer Schools 2018-2022]

☑ Faculty salaries by academic rank expressed as a percentile against a selected peer group of colleges and schools. *N/A*

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

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
23.1. Enrollment support – The college or school ensures that student enrollment is commensurate with resources.	✓	○	○
23.2. Budgetary input – The college or school provides input into the development and operation of a budget that is planned, executed, and managed in accordance with sound and accepted business practices.	✓	○	○
23.3. Revenue allocation – Tuition and fees for pharmacy students are not increased to support other educational programs if it compromises the quality of the professional program.	✓	○	○
23.4. Equitable allocation – The college or school ensures that funds are sufficient to maintain equitable facilities (commensurate with services and activities) across all program pathways.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that

the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe 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.

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

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

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

☑ Describe any other notable achievements, innovations or quality improvements.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

The financial resources of the UHCOP have been deployed efficiently and effectively in support of all missions, goals, and objectives, and have been provided in accord with the Vision 2030 strategic plan of the college. The college operates with a budget planned, developed, and managed in accordance with sound and accepted business practice and follows established guidelines of the University of Houston System Board of Regents. The budget planning process begins with the Provost notifying the College Deans that the budget planning cycle has begun and providing an outline of what information should be included in the college plan and budget proposal. The University budget allocations are based on the university's goals of student success, national competitiveness, and what the university forecasts for the next fiscal year in terms of local, state, and national resources.

The college and university provide valuable input into the development and operation of a budget that is planned, executed, and managed in accordance with sound and accepted business practices. The University Administration allocates to the college a portion of state funds generated through formula funding. The Dean along with the Executive Director of Business Operations (EDBO) project the level of additional funding available to the college (i.e., gifts, research, special funds, etc.). When the total amount of funds available has been determined, the Dean, after consultation with the College Executive Leadership Team, allocates funds within the college.

All program and budget decisions are finalized by the Dean, based on discussions with the Chairs, Assistant/Associate Deans, and Faculty in conjunction with an analysis of the college's critical needs. The EDBO is responsible for the management and oversight of the financial processes within the college. The EDBO, who reports to the Dean and the Associate Provost of Finance and Administration, is responsible for communicating policy and procedural changes to the departments. In addition, the EDBO ensures that each department has appropriate policies in place to comply with all necessary policies and standards. The EDBO is ultimately responsible for the budgetary control procedures within the college.

The financial resources of the college are composed of four categories: 1) state funding (including local premium tuition), 2) research grants, 3) gifts, and 4) UH DOR start-up funds. Percentage distributions of these categories for FY 2022-2023 are 69, 28, 1%, and 1%, respectively. The resources available in the past six years, September 1, 2017, to August 31, 2023, are summarized with these categories. The Financial Summary for Standard 23 of Self Study Report demonstrates a growth in both revenues and expenses for the college compared to the last report. **[23A2 Detailed Budget Plan-Financial Summary - Self Study Report 2023]**

The college has been able to secure the resources necessary to deliver the professional pharmacy program and achieve its stated mission in the years since the last site visit. Financial resources available to the College have increased over the past six years. The FY 2022-23 budget of $32,888,639 reflects an increase of 36.5% when compared to FY 2015-16 ($24.1 million in the last report). The increased available funding has resulted from increases in the College's revenues from a special legislative line-item appropriation of $4.5 million/year for two years in 2022-2023. The increased funds to the College have directly benefited the students in the professional program.

The college ensures that student enrollment is commensurate with resources. Enrollment is planned and managed in accordance with resource capabilities, including tuition and professional fees. These funds are dedicated to support the professional pharmacy program.

The resource requirements of the college's strategic plan are consistently addressed in each annual budget planning cycle. The College's current strategic plan, Vision 2030, was developed over a 10-month period and included a review by all college stakeholders (faculty, staff, the pharmacy student body, Dean's Advisory Council, Alumni and Preceptors) throughout the process and ended in a final faculty strategic plan ratification meeting and approval. The implementation of the plan began in Fall 2023 and is ongoing. The college tracks the progress of each strategic initiative using an excel file designed in a living document format. The college provides updates and reports to all the college's constituencies to maintain focus and momentum surrounding the Vision 2030 Strategic Plan.

Additionally, college income is generated via external funding from a broad base of sources. These sources include private giving, contracts, royalty income, drug information service contracts and research analyses.
The college's total research expenditures remained steady in recent years. In FY 2017 – 2023 research grants and contract expenditures averaged $8,905,785 with an average of $7,329,581 from Federal sources. This average is an increase from the last year of the prior report ($5,287,904) and is attributable to the increased productivity of both existing and newly hired research faculty. Resources and quality enhancements have been provided by the College and the University to offer grant writing consultants and pre-grant review, which has led to an overall increase in the number and quality of submitted proposals.

Although federal funding is the college's primary goal, awards are also obtained from many other sources including private companies and foundations. These company and foundation awards are extremely useful for conducting preliminary studies that can be leveraged into larger federally funded projects. In FY 2017-2023, Busulfex® Royalty income was notable. In January 2019, an additional income was received by the college totaling $3,100,000 related to Busulfex®. The gifts from philanthropic giving (including earnings from endowments) were also noteworthy and totaled $2,316,602 for the six-year period.

The college has been very successful in obtaining three Presidential Frontier Faculty program hires within the past three years. This competitive, university wide faculty hiring program focuses on colleges submitting proposals to obtain PFF positions that will help build a research enterprise, assist in increasing federal research expenditures and in enhancing our reputation through recognition of their work.

Notable Achievements
A special line item from the State of Texas legislature had continued over FY 2017 - 2023, with the current amount of $4.5 million/year, for two years (FYs 2022 and 2023). Similar funding has been secured through FY 2025 and will bring the total amount received by the College to $41M. These funds have been used to enhance research activities (e.g., NTT-research faculty, equipment and instrumentation purchases, and start-up packages for new faculty). In November 2023, the citizens of Texas voted to approve a constitutional amendment creating the Texas University Fund (TUF), a $3.9 billion endowment that the University of Houston will be a part of. The college expects to receive additional support from these funds as shared start-up packages from the UH Division of Research and also for support of new faculty hired as part of the University of Houston's Presidential Frontier Faculty initiative.

Since 2017 the College has occupied Health Building 2, which provides a state-of-the-art facility (157,000 sq. ft.) for teaching, research, and service. In addition, the College has made significant investments ($6,937,176) over the past six years in cutting-edge instrumentation and equipment. This includes a JEOL 600 MHz NMR, a Leica Sted 8 confocal microscope, AB Sciex Qtrap 5500 and Qtrap 7500 LCMS systems, an IVIS CT system for 3D in vivo imaging, two ThermoFisher Exploris 480 high resolution LCMS systems (one with Biopharma option and another with MALDI imaging) and a Cytoflex SRT cell sorter. These resources further enhance the College's impactful research and its

competitiveness in securing research funding. The College has also invested in teaching, such as simulation mannequins and software.

Over the past six years the college has been fortunate to receive a number of gifts including $1M in funds to establish the Humana Endowed Dean's Chair in Pharmacy, $340K to support for a therapeutic drug target for treatment of heart failure, $250K to establish the Buckley Quasi-Endowed Professorship in Drug Discovery, $125k to establish the Lokhandwala Endowed College Professorship in Health Outcomes and Policy, $125K to establish the Eikenburg Endowed Professorship in CNS Neuropharmacology and $47K to provide pharmacy clinical sciences and administration educational support.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

   [TEXT BOX] [1,000 character limit, including spaces]

Section III:
Assessment of Standards and Key Elements

Standard No. 24: Assessment Elements for Section I: Educational Outcomes: The college or school develops, resources, and implements a plan to assess attainment of educational outcomes to ensure that graduates are prepared to enter practice.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ The college or school's assessment plan (or equivalent) (plan should cover curriculum, structure, and process)

> **[24A PPSLO Assessment Plans 2020-2023]**

☑ Description of formative, summative, standardized and comparative assessments of student learning and professional development used by college or school (Template available for download)

> **[24B ACPE_Standard_24_Assessment_Tools_UHCOP]**

> **[24C UHCOP Assessment of Student Learning]**

☑ Examples of assessment and documentation of student performance and the attainment of desired core knowledge, skills and values

> **[24A PPSLO Assessment Plans 2020-2023]**

> **[24D UHCOP ePortfolio Requirements and Rubrics]**

☑ Performance of graduates (passing rates of first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 3 years (only NABP provided documents required for upload)

> **[24E UHCOP NAPLEX 2021-2023]**

☑ Performance of graduates (passing rates of first-time candidates on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 3 years broken down by campus/branch/pathway *(only required for multi-campus and/or multi-pathway programs)* (Template available for download) ***N/A for UHCOP***

☑ Performance of graduates (passing rate of **first-time candidates**) on Multistate Pharmacy Jurisprudence Examination® (MPJE®) for the last 3 years (only NABP provided documents required for upload)

> **[24F UHCOP MPJE 2021-2023]**

☑ Outcome assessment data summarizing students' overall achievement of educational outcomes/professional competencies in the pre-APPE and APPE curriculum

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[24A PPSLO Assessment Plans 2020-2023]

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 4-22

    [24G AACP Standardized Survey Student – Questions 4-22]

☑ AACP Standardized Survey: Alumni – Questions 14-32

    [24H AACP Standardized Survey Alumni – Questions 14-32]

☑ AACP Standardized Survey: Preceptor – Question 11-29

    [24I AACP Standardized Survey Preceptor – Question 11-29]

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

    [24J UHCOP PPSLOs]

    [24K PPSLO Mapping Curriculum Tabbed Spreadsheet]

    [24L Course Assessment Inventory Form]

    [24M Post course review process and documents]

    [24N Protocol for Curriculum Changes]

    [24O UHCOP PCOA 2020 to 2023]

    [24P LASSI]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
24.1. Formative and summative assessment – The assessment plan incorporates systematic, valid, and reliable knowledge-based and performance-based formative and summative assessments.	✓	○	○
24.2. Standardized and comparative assessments – The assessment plan includes standardized assessments as required by ACPE (see Appendix 3) that allow for national comparisons and college- or school-determined peer comparisons.	✓	○	○
24.3. Student achievement and readiness – The assessment plan measures student achievement at defined levels of the professional competencies that support attainment of the Educational Outcomes in aggregate and at the individual student level. In addition to college/school desired assessments, the plan includes an assessment of student readiness to:	✓	○	○
• Enter advanced pharmacy practice experiences	✓	○	○
• Provide direct patient care in a variety of healthcare settings	✓	○	○

• Contribute as a member of an interprofessional collaborative patient care team	✓	○	○
24.4. Continuous improvement – The college or school uses the analysis of assessment measures to improve student learning and the level of achievement of the Educational Outcomes.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ Describe how the assessment plan measures student achievement at defined levels of the professional competencies that support attainment of the educational outcomes in aggregate and at the individual student level.

☑ Describe how the college or school uses the analysis of assessment measures to improve student learning and the level of achievement of the educational outcomes.

☑ Describe how the college or school assesses student competence in professional knowledge, knowledge application, patient and population-based care, medication therapy management skills, and the attitudes important to success in the advanced experiential program prior to the first APPE.

☑ Describe 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

☑ Describe how the assessment plan measures student achievement at defined levels of the professional competencies in aggregate and at the individual student level.

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

☑ Describe how feedback from the assessments is used to improve student learning, outcomes, and curricular effectiveness.

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

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The college is dedicated to preparing graduates who excel in patient care across diverse healthcare settings. In addition, we aspire to cultivate innovative practitioners who embody professionalism, leadership, critical thinking, lifelong learning, and ethical behavior. To achieve these goals, the College has adopted program-level outcomes known as the Professional Pharmacy Student Learning Outcomes (PPSLOs), which are based on the 2013 CAPE outcomes. **[24J UHCOP PPSLOs]**

The PPSLOs comprise ten domains, each containing between two and eight sub-domains. These domains include Communication, Foundational Sciences, Critical and Innovative Thinking, and Patient-Centered Care. The PPSLOs are mapped to all didactic and experiential course proficiencies, as well as the co-curriculum. Annually, the College assesses the PPSLOs through the PPSLO Assessment Plan. Assessment data is drawn from course exams, skills labs, MRSL OSCEs, rubrics, assignments and reflections which are tagged in ExamSoft. In addition, preceptor evaluations, co-curricular activities, PCOA or other capstone exam performance, and aggregate data from college reports, such as professionalism charges are evaluated. **[24A PPSLO Assessment Plans 2020-2023] [24K PPSLO Mapping Curriculum Tabbed Spreadsheet].**

In addition to student learning, the PPSLO Assessment Plan is designed to evaluate the foundation and structure of the curriculum. Aggregate outcomes, including NAPLEX, MPJE, PCOA/capstone results, IPPE and APPE competencies, progression rates, graduation rates, AACP Cross Walk Surveys, and course evaluation data are utilized in reviewing curriculum effectiveness.

The PPSLO Assessment data is reviewed by the Assessment Committee twice yearly, with a mid-spring review of fall data after it has been collected and inputted into the tracking document, and a late summer review of spring data. After all the data from the year has been collected and reviewed by the Assessment Committee, targeted areas of concern are then communicated to the relevant stakeholders for further action and follow-up. The process is completed when those responsible for action acknowledge receipt of the information. The completed yearly assessment report is collated and made available to stakeholders each year. Since 2018, we have completed all yearly PPSLO Assessment plans, including those for AY 2020-21, AY 2021-22 and AY 2022-23 and are currently in progress with the AY 2023-2024 plan. **[24A PPSLO Assessment Plans 2020-2023]**

The PPSLO Assessment Plan is designed to align with our college's curricular procedures. With the rollout of the new/integrated curriculum, we have continuously reviewed the processes for assessment of the foundational aspects of the curriculum (course preview, curriculum mapping, course & faculty evaluation, course review) and implemented these into the PPSLO Plan. The comprehensive course preview process for our new curriculum was completed in Spring 2020, with the preview of the final P3 spring semester of the didactic curriculum. We also conducted a one-year focused post-course review of all first delivery of courses in the new curriculum. This focused review was completed in the summer of 2021 as our first cohort started APPEs.

Upon the completion of the curricular preview and one-year reviews, the routine 3-year course review process was initiated in 2022. UHCOP's standard curriculum assessment first starts at the course level with routine course inventory submissions, formal course reviews, and the PPSLO assessment. All courses submit a Course Inventory Form at the end of each semester to reflect on and inform the committee how the course was delivered and what changes may be implemented. **[24L Course Assessment Inventory Form]** In addition, every course undergoes a formal post-course review after initial delivery and then every 3 years, unless prompted by recommendations from the curriculum committee. The review includes evaluation of the course proficiency assessment outcomes from ExamSoft, yearly grade distributions, changes made to the course since last review, course evaluations, content delivery, active learning incorporation, student workload, and student feedback (formative and summative). **[24M Post course review process and documents]** Any changes to courses are formally submitted to the curriculum committee before the semester of delivery per the curriculum committee course change procedures. **[24N Protocol for Curriculum Changes]**

The College's objective and systematic curricular review processes have been instrumental in ensuring adherence to the designed curriculum and minimizing curricular drift. These evaluations also enabled us to keep on track as we pivoted to an on-line delivery of classes during the COVID-19 pandemic while continuing to deliver the new curriculum. These proactive processes helped us avoid the need to make major curricular changes. To date, our college has only had minor adjustments in content delivery and assessments. Most modifications were identified in the course review process from evaluation data, student feedback and curricular mapping from assessments using ExamSoft. Modifications to the P1 curriculum have included decreased density of information and increased formative feedback on assignments in the first-year course Foundations in Medicinal Chemistry, Microbiology and Receptor Action (FIMMRA course). Second year modifications have included increased application of literature review in the Literature Evaluation Course and increased integration of this application in the Module Related Skills Labs (MRSLs) as well as additional journal clubs in Skills III. In addition, the MRSLs worked to better align with specific module content to allow for more case presentations and integration of knowledge throughout the course sequence. Third year changes were primarily related to assessments in the Ambulatory Clinical Practice Management course where projects and assignments were utilized as the primary assessments in Fall 2020. However, student feedback was not as positive due to students not having as much of a gauge on their semester grade, so in Fall 2021 a rebalancing of projects and exams was implemented. In the third year, we changed the delivery of the Pharmacy Law course to twice a week from once a week to enhance engagement and understanding of the material.

Beyond grades and academic progression, we also utilize our Pharmacy Curriculum Outcomes Assessment (PCOA) results to evaluate student learning outcomes and readiness for Advanced Pharmacy Practice Experiences (APPEs). Since 2014, the PCOA has been utilized as a knowledge focused assessment to provide individual student feedback as well as

evaluate how well the UHCOP curriculum aligns with the desired outcomes of the Doctor of Pharmacy program. The PCOA was administered during the first week of classes in the spring semester, serving as a formative assessment for P1 and P2 students and a high-stakes assessment for P3 students. Third year students had to meet a minimum PCOA score to progress to APPEs. On average about 4 students per year had to retake the exam before progressing to APPEs. Due to the discontinuation of the PCOA, the College investigated other options for a knowledge capstone and piloted the 225 multiple-choice question (MCQ) exam developed by Exam Master that was formatted like the PCOA. Results of this first year were promising and mirrored the PCOA outcomes therefore the College has decided to continue to utilize the Exam Master platform and will evaluate trends over the next few years to determine the minimum competency to utilize as the high-stake assessment for APPE readiness. **[24O UHCOP PCOA 2020 to 2023]**

Through our PPSLO Assessment data analysis, including NAPLEX and PCOA results, along with faculty observations (both didactic and experiential), revealed a foundational deficiency in calculations. Consequently, instead of the replacement capstone, the P1 exam will now focus specifically on calculations. Consequently, in 2024, the P1 students took the Calculations Assessment—an 80-question exam also developed by Exam Master. This formative assessment targets calculations, addressing the identified deficiency, and students received a percent correct score and a performance report after the exam. The Assessment Committee is continuing to review this data to determine if this is the most appropriate capstone exam for our first-year students.

As part of the overall UHCOP Continuous Quality Improvement (CQI) process, every incoming student completes a Learning and Study Strategies Inventory **[24P LASSI]** and meet with their academic advisors to review the results and discuss a learning and time management plan prior to starting their first-year classes. This information helps form a foundation for our early intervention procedures to enhance student academic performance and support individual students. Student academic performance is monitored through the Canvas course management system gradebook reports in collaboration with the Academic Affairs and Student Affairs Offices. Students are identified who are having difficulties in multiple courses so advisors can reach out to meet with the students. This is in addition to the course coordinators meeting with students who fall below a 70 percent average on assessments or in the class.

Individual student achievement is tracked using a comprehensive ePortfolio. The ePortfolio measures and tracks not only personal and professional growth, but also the 9 other domains contained in the PPSLOs: Communication, Foundational Sciences, Critical and Innovative Thinking, Health Information Evaluation, Medication Order Evaluation and Preparation, Patient-Centered Care, Professionalism and Teamwork, Health Care Management, and Population-Based Care. The ePortfolio is structured similarly to the layout of the PPSLOs. At the beginning of each academic year, students receive a summary description of the required artifacts for each of the ten PPSLO domains. It's important to note that not all domains require uploads every year but ensures that documentation of proficiency in all of the PPSLOs is documented before starting APPEs. The required uploads encompass a variety of elements, including assignments with associated rubrics that demonstrate specific skills, documentation of essential tasks (such as community outreach for the Population-Based Care domain), PCOA results, certifications (e.g., CPR, immunizations, sterile compounding) all artifacts that have been given either summative or formative feedback. In addition, students complete directed reflections in ExamSoft to enhance their self-awareness of their professional development. **[24D UHCOP ePortfolio Requirements and Rubrics]**

The P1 and P2 ePortfolios are evaluated for completion at the end of the year. The P3 ePortfolios are given an assigned pharmacy professional who reviews the content, the updated CV and career goals, and meets with the students to provide mentorship and career advice. Reviewers include pharmacists from the UHCOP Pharmacy Leadership Masters/PGY2 Health-System Pharmacy Administration and Leadership program, academic fellows, and faculty. Additional individual markers include PCOA data and Capstone OSCEs. Results of each are released individually to allow students to assess their individual performance in comparison to the class. Through focused educational sessions led by our Director of Faculty Development, faculty are trained in how to best utilize tools and resources to ensure reliability of assessments for student performance. Sessions include education on ExamSoft, question writing and coordinator expectations. Student performance on APPEs has been positive and informal feedback from preceptors has also been good. Our full assessment of this year's APPE scores will be part of the 2023-24 PPSLO Assessment Plan as well as the class of 2024's NAPLEX

and MPJE results. Overall, our assessment processes have been instrumental in the success of our new curriculum as well as being able to make appropriate adjustments.

The PPSLO Assessment plan has been substantial in the ability to continuously evaluate and improve the curriculum and student outcomes. Course evaluations from the students have helped us streamline course content and integration between the skills and didactic courses. The module coordinators coming together and meeting regularly to evaluate consistency in module delivery and integration has been instrumental in the integrated module delivery, in addition we continuously evaluate to what extent and depth the topics are taught to address curricular hoarding. Examples of improvements and streamlining include moving topics around to better flow in the Cardiovascular I and II courses and decreasing duplicity of discussions in the Gastrointestinal and Endocrine Modules that led to increased time for active learning/case discussions. Lastly, the ad hoc Calculations Task Force has worked to improve the reinforcement of calculations throughout the curriculum as well as worked with the Offices of Student Affairs to pilot a calculations self-paced review for all incoming students for Fall 2024.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 **/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.	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 **/or** • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring.

   [TEXT BOX] [1,000 character limit, including spaces]

Standard No. 25: Assessment Elements for Section II: Structure and Process: The college or school develops, resources, and implements a plan to assess attainment of the Key Elements within Standards 5–23.

1) **Documentation and Data:**

Required Documentation and Data:

Uploads:

☑ List of the individual(s) and/or committee(s) involved in developing and overseeing the assessment plan

[25A Assessment Responsibilities]

☑ Examples of instruments used in assessment and evaluation (of structure and process)

[25B1 Programmatic Assessment Plan Table]
[25B2 Programmatic Assessment Plans 2020-2023]

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 Summary Report (all questions)

[25C AACP Graduating Student Surveys 2020-2023]

☑ Faculty Survey Summary Report (all questions)

[25D AACP Faculty Surveys 2020-2023]

☑ Preceptor Survey Summary Report (all questions)

[25E AACP Preceptor Surveys 2020-2023]

☑ Alumni Survey Summary Report (all questions)

[25F AACP Alumni Surveys 2020-2023]

Responses to Open-Ended Questions on AACP Standardized Surveys:

Note: These data will have restricted access. For the open-ended questions, ACPE provides the opportunity for programs to redact (not remove) offensive text, names, and identifying characteristics. In the EXCEL document downloaded from the AACP Survey System with the results from each survey, redaction can be achieved through highlighting in black the specific items listed previously. The document can then be saved as a PDF and emailed directly to ACPE. No comments should be completely removed.

[25G AACP Open Ended Question 2020-2023 - all responses]

☑ Graduating Student Survey: Responses to Open-Ended Question 72

☑ Faculty Survey: Responses to Open-Ended Question 45

☑ Preceptor Survey: Responses to Open-Ended Question 36

☑ Alumni Survey: Responses to Open-Ended Question 36

Optional Documentation and Data:

☑   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

[25H Assessment Operating Procedures 23-24]

[25H2 UHCOP Assessment Calendar 2024]

[25I UHCOP Administrator Survey Report – 2024]

[25J Strategic Plan outcomes progress document]

[25K Faculty Annual Report and Performance Partnership]

[25L Relationship AACP Data to UHCOP Assessment Plans]

2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program on the requirements of the standard and accompanying guidelines:

	S	N.I.	U
25.1. Assessment of organizational effectiveness – The college or school's assessment plan is designed to provide insight into the effectiveness of the organizational structure in engaging and uniting constituents and positioning the college or school for success through purposeful planning.	✓	○	○
25.2. Program evaluation by stakeholders – The assessment plan includes the use of data from AACP standardized surveys of graduating students, faculty, preceptors, and alumni.	✓	○	○
25.3. Curriculum assessment and improvement – The college or school systematically assesses its curricular structure, content, organization, and outcomes. The college or school documents the use of assessment data for continuous improvement of the curriculum and its delivery.	✓	○	○
25.4. Faculty productivity assessment – The college or school systematically assesses the productivity of its faculty in scholarship, teaching effectiveness, and professional and community service.	✓	○	○
25.5. Pathway comparability* – The assessment plan includes a variety of assessments that will allow comparison and establishment of educational parity of alternative program pathways to degree completion, including geographically dispersed campuses and online or distance learning-based programs.	✓	○	○
25.6. Interprofessional preparedness – The college or school assesses the preparedness of all students to function effectively and professionally on an interprofessional healthcare team.	✓	○	○
25.7. Clinical reasoning skills – Evidence-based clinical reasoning skills, the ability to apply these skills across the patient's lifespan, and the retention of knowledge that underpins these skills, are regularly assessed throughout the curriculum.	✓	○	○
25.8. APPE preparedness – The Pre-APPE curriculum leads to a defined level of competence in professional knowledge, knowledge application, patient and population-based care, medication therapy management skills, and the attitudes important to success in the advanced experiential program. Competence in these areas is assessed prior to the first APPE.	✓	○	○
25.9. Admission criteria – The college or school regularly assesses the criteria, policies, and procedures to ensure the selection of a qualified and diverse student body, members of which have the potential for academic success and the ability to practice in team-centered and culturally diverse environments.	✓	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should specifically address the following. Use a check ☑ to indicate that the topic has been adequately addressed. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight 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 provide evidence that the plan is working. Wherever possible and applicable, data/results should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

☑ For each of the following, describe the process for assessment, and how the outcomes/results of the process advance overall programmatic quality:

    a.   effectiveness of the organizational structure

    b.   mission and goals

    c.   didactic curriculum

    d.   experiential curriculum

    e.   co-curriculum activities

    f.   clinical reasoning skills

    g.   interprofessional education

    h.   faculty effectiveness in scholarship, teaching, and professional/community service

    i.   admissions process to ensure the selection of a qualified and diverse student body who have the potential for academic success and the ability to practice in team-centered and culturally diverse environments

    j.   alternative program pathways to degree completion

☑ Describe any other notable achievements, innovations or quality improvements (if applicable).

☑ Describe how the AACP Curriculum Quality Surveys results inform decision making, quality assurance, and quality improvement; and reflect on strengths and limitations of data.

[TEXT BOX] [15,000 character limit, including spaces] (Approximately six pages)

The University of Houston College of Pharmacy (UHCOP) is committed to being a world-class college of pharmacy through innovative education and pioneering research to transform health outcomes. The College's mission is to provide comprehensive interdisciplinary education and training in pharmaceutical sciences and pharmacy practice to advance scientific discovery, serve diverse communities, improve health, and quality of life. The mission encompasses several core values: curiosity and passion striving for excellence in lifelong learning research and patient care; inspiration and exploration; collaboration and collegiality; leadership and advocacy; diversity and inclusion; integrity and respect.

Guided by this mission, UHCOP has developed a plan for continuous assessment and improvement of the Doctor of Pharmacy professional program. The Programmatic Assessment Plan (PAP) is designed to evaluate all aspects of the program including organizational governance, culture and processes that drive the program. The Professional Program Student Learning Outcome (PPSLO) Plan is designed to evaluate and assess student learning as well as the foundation and structure of the curriculum. Both assessment plans utilize direct and indirect measures from a variety of activities to guide continuous quality improvement for the College.

The purpose of collecting assessment data is to inform the College and its stakeholders of the College's strengths and to identify areas where improvement is needed. Quantitative and qualitative data is collected through multiple sources to make meaningful recommendations. Data is intended to evaluate the College as a whole and not individual faculty. The focus of this process is to document how well we are achieving the desired outcomes of our program.

Assessment is a collaborative effort that involves all members of the College. Specific assessment processes are utilized to gather necessary data, and are distributed across several entities within the College, including the Office of Assessment, the Assessment Committee, the Curriculum Committee, faculty and staff, departments and areas, students, and administration. Each area plays a vital role in contributing to the assessment process. The Office of Assessment coordinates overall assessment activities, including data collection and analysis for the professional program. The Assessment Committee focuses on ongoing assessment of the curriculum and program outcomes, providing

recommendations to the responsible entity. Similarly, the Curriculum Committee evaluates the curriculum's design, delivery, and outcomes. Faculty, staff, departments, areas, students, and administration all contribute to data provision and response to recommendations. The administration oversees strategic planning, committee assignments, and governance for the College.

The Programmatic Assessment Plan (PAP) is the foundation for how our college continuously assesses the effectiveness of our structure and processes. The PAP is comprehensive and includes assessment data covering strategic initiatives, committee progress, stakeholder feedback, admissions data, faculty development, graduating student statistics, and assessment of student learning. Each entity—such as the Office of Assessment, Assessment Committee, Curriculum Committee, faculty, staff, departments, areas, students, and administration—plays a vital role in contributing to data provision and responding to recommendations. The administration oversees strategic planning, committee assignments, and governance for the College.

The Programmatic Assessment Plan is reviewed annually by the Assessment Committee based upon the yearly assessment cycle. [**25H2 UHCOP Assessment Calendar 2024**] After the Assessment Committee has reviewed the Programmatic Assessment Plan, results are shared with the responsible parties. Any areas identified as needing improvement require a response and/or plan of action by the responsible party to the Assessment Committee. Progress and improvement are monitored by the Assessment Committee until identified issues have been resolved.

Shared accountability for organizational success underscores our commitment to assessment and the effectiveness of the PAP. Routine surveys allow faculty and staff to evaluate leadership. College leadership, excluding the Dean, undergoes evaluation every 3 years, informing development goals. The Dean's evaluation occurs every 5 years through a standardized process involving input from faculty, staff, students, and other stakeholders. [**25I UHCOP Administrator Survey Report - 2024**]

In Fall 2021, the faculty completed a comprehensive strategic plan setting the foundation for our Vision 2030. Through the faculty led process, strategic imperatives were developed that align with the University's goals. Committees and other responsible parties have been tasked with appropriate charges in meeting the strategic imperatives and outcomes are routinely reported to all stakeholders. [**25J Strategic Plan outcomes progress document**]

Faculty effectiveness, encompassing teaching, service, and research, is aggregated within the PAP. This includes research expenditures, publications, and achievement of student learning outcomes. Faculty submit annual reports documenting their activities, as part of the summative faculty annual review and outcomes. In addition, Department Chairs discuss performance partnership plans with each faculty member to review these outcomes and establish individualized annual goals. [**25K Faculty Annual Report and Performance Partnership**] Student evaluations of teaching are completed at the end of each semester and data is reviewed by the Assessment committee. Department chairs are sent notification of faculty whose evaluation scores are more than 2 standard deviations of the mean, and the information is utilized by the department chairs to assess faculty workload, teaching assignments and opportunities for faculty development.

Committee productivity is an essential part of the effectiveness of the College and is a key part of the Programmatic Assessment. Committee chairs submit reports in the spring and fall detailing the accomplishments and how many times the committee has met. In the summer, the faculty and staff are surveyed via Qualtrics on suggestions for committee initiatives. At the beginning of each academic year the Executive Council Leaders (ECL) review the suggestions and collate them into charges for the responsible committee(s). In addition, the previous charges for each committee are reviewed for completion.

The college's admissions and graduating student statistics are also an integral part of the College's success and is included in the Programmatic Assessment Plan. At the end of each admissions cycle the Student Services Office collates the data for the incoming class including comparisons from previous years, in addition to continual updates at faculty and administrative meetings. The Office of Academic Affairs reports on progressions and professionalism issues each semester as well as graduating student statistics including post-graduate and employment rates. Parallel to the PAP, our

overall curriculum undergoes continuous assessment through the Professional Program Student Learning Objective (PPSLO) Assessment Plan. [25H Assessment Operating Procedures 23-24] This comprehensive plan evaluates the effectiveness of various components, including the didactic and experiential curriculum, co-curricular activities, clinical reasoning skills, and interprofessional education. The PPSLO Data provides insights into curricular effectiveness and identifies areas for improvement from both the student learning side (NAPLEX, PCOA, PPSLO Assessments, IPPE Competencies, APPE Readiness, Performance-Based Assessments, ePortfolio, professional development and IPE) as well as the foundations of student learning (course review, curriculum mapping, PPSLO evaluation, stakeholder feedback, course evaluation). [25H Assessment Operating Procedures 23-24] As a result of this process, we have established an integrated module coordinator subteam to routinely review module content and promote standardization and awareness of best practices across the integrated modules in the curriculum. In addition, we have a dedicated calculations task force actively developing strategies to support the achievement of foundational outcomes.

The PPSLO Assessment Plan undergoes biannual review by the Assessment Committee. In mid-spring, the committee reviews fall data after it has been collected and inputted into the tracking document. Later, during late summer, the committee assesses spring data. Once all data for the year has been collected, reviewed by the Assessment Committee, and referred to either the course coordinator or the Curriculum Committee, it is shared with the entire faculty.

Outcomes from the yearly AACP Curriculum Quality Surveys are an integral component of both the Professional Program Student Learning Outcome (PPSLO) and Programmatic Assessment Plans. AACP data is integrated into the Stakeholder Feedback section of the annual Programmatic Assessment Plan and the Assessment of the Curriculum for the annual PPSLO Assessment Plan. Taken together these plans form the basis of the continuous quality improvement plan for UHCOP. The figure below shows the UHCOP Assessment Map and where in this process AACP Curriculum Quality Survey data are used. [25L Relationship AACP Data to UHCOP Assessment Plans]

Following the publication of the AACP Curriculum Quality Surveys, data from each survey year are extracted and transferred to the UHCOP AACP Data Crosswalk document. When analyzing and reporting results, data is evaluated from the Disagree/Strongly Disagree categories. Questions with a Mean of 10%-20% Disagree/Strongly Disagree are monitored and questions with a Mean of 20% or more Disagree/Strongly Disagree are sent to committee/area for review. Each year the AACP Data Crosswalk is presented to the Assessment and the Executive Council Committees and is shared to all stakeholder in the yearly Programmatic and PPSLO Assessment Plans.

4) **College or School's Final Self-Evaluation:** Self-assess how well the program is in compliance with the standard by putting a check in the appropriate box ☑:

Compliant	Compliant with Monitoring	Partially Compliant	Non Compliant
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 /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.	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 /or • Adequate information was not provided to assess compliance
☑ **Compliant**	☐ **Compliant with Monitoring**	☐ **Partially Compliant**	☐ **Non Compliant**

5) **Recommended Monitoring:** If applicable, briefly describe issues or elements of the standard that may require further monitoring