College of Pharmacy
UNIVERSITY OF **HOUSTON**

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

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.

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

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 as who served as chair, and other faculty, staff, students, and alumni. A reading team was formed to provide editorial review once the document 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 "kick off" meeting on February 27th, 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. It was determined at the first task force meeting that the steering committee would meet monthly to discuss deliverables and share information about the process to ensure collaboration and success.

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 had the opportunity to present an initial assessment of their standards, with evidence to support what the college is doing to meet the standard or areas for improvement. 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 good feedback from the faculty as a whole 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 break out group sessions related to the self-study. These breakout groups consisted of subcommittee members, administrators, and faculty assigned to the reading team, and were used to provide additional feedback on the standard narratives as they entered their final stage. Final draft narratives for each standard were submitted by December 31st, 2023. These final draft narratives were presented once more at two faculty retreat days in January 2024, with another chance 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 input, which was incorporated in the 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 6th and 16th, 2024. During these ratification meetings, the stakeholders provided the final refinement of the document and voted to approve the self-study. The UHCOP Self-Study was submitted to ACPE on August 31st, 2024, and the site visit was scheduled to occur on October 15-17th, 2024.

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
CEPC	Code of Ethical and Professional Conduct
CM	Crisis Management
COO	College of Optometry
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 Clinic
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

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	4th Year Medical Student
MAPSA	Mexican American Pharmacy Student Association
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 Institute 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&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
PhD	Doctor of Philosophy
PHOP	Pharmacy Health Outcomes and Policies (dept)
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)
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	Commission on Colleges of the Southern Association of Colleges and Schools
SAMSHA	Substance Abuse and Mental Health Service Administration Grant
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	Stephan F. Austin State University
SOAP	Subjective, Objective, Assessment, and Plan
SoTL	Scholarship of Teaching and Learning
SNPhA	Student National Pharmaceutical Association
SSHP	Student Society of Health-System Pharmacist
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
THECB	Texas Higher Education Coordinating Board
TCEP	Texas Consortium of 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	Veteran's Affairs Medical Center
VA	Veteran's 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 2020-2023 PPSLO Assessment Report]
      [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 the first year (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 4th year. **[1A Professional Curriculum P1_P4]**

Description of Foundational Knowledge and Integration

The P1-year didactic courses provide a strong background in foundational knowledge. It includes basic science courses (such as physiology, biochemistry, pharmaceutics, calculations, and immunology) and clinical sciences courses (such as 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 in practice course that emphasizes community pharmacy law and immunizations as part of their IPPE preparedness. The P1 year also includes the first two management courses with Introduction to Healthcare and Patient, Medication Safety, and Informatics. The pharmacy skills program in the first year complements their knowledge by providing practical skills aligned with the corresponding didactic coursework.

The second (P2)- and third (P3)-year didactic courses build upon the basics or the first year 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. The 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.

The pharmacy skills program continues in the P2 and P3 years and incorporates both traditional skills labs and Module-Related Skills Labs (MRSLs). During the fall of the P2 year, 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. The 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 the 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 the P1 year, the curriculum intentionally incorporates both basic and clinical sciences to establish a foundational base before the commencement of the integrated modules in the P2 year. For instance, students learn about renal, gastrointestinal, and respiratory physiology in the P1 year. This knowledge is further built upon in the P2 year, where the pathophysiology of these systems is covered in the respective integrated modules. The functional groups component of FIMMRA, taught in the P1 year, lays the groundwork for medicinal chemistry in the P2 and P3 years. 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 the fall of the P1 year, 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 Programs, MRSLs, IPPEs, and APPEs. Students are introduced to a simulated electronic medical record (EHRGo) in the P1 Patient Assessment and Skills courses, where they learn to access, navigate, and work up a patient. This familiarity with EHRGo is reintroduced in Skills III and all MRSLs, where students assess and plan for simulated patients using the patient information in EHRGo. Lastly, the final course in the P3 spring semester before their APPE is a capstone course, Complex Problems. This course equips students with the ability to engage with and apply the skills and knowledge developed over the P1-P3 years. 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 APPEs.

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 the knowledge of structural-activity relationships to then apply pharmacological principles. The knowledge of these two disciplines plays a vital role in understanding therapeutics. Pathophysiology builds upon the foundations of the 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 therapy goals in patient-centered care.

The curriculum introduces various topics in the didactic lectures, which are then reinforced in the corresponding skills courses: Pharmacy Skills Programs I-III and Module-Related Skills Labs (MRSLs) I-IV. For instance, 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. For example, MRSL III reinforces the content covered in modules from the semester (neurology, immunology, infectious diseases 1 and 2) as well as integrating the knowledge and skills obtained previously such as calculations related to dose recommendations, renal dose adjustment, antimicrobial dosing, assessment for medication-related problems, and developing therapeutic care plan given a simulated electronic medical record. **[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 the course's content flow and depth are consistent, 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 Programs and Module-Related Skills Labs (MRSLs) provide additional opportunities for integration. The coordinators and teaching faculty from various courses collaborate to create active learning experiences and design assessments. This collaborative approach ensures a comprehensive and cohesive learning experience for the students.

Evidence of Foundational Knowledge
The College's program level outcomes, Professional Pharmacy Student Learning Outcomes (PPSLOs), are based on the 2013 CAPE outcomes and consist of 10 domains and multiple subdomains. For standard 1, PPSLO 2 (Foundational Knowledge) is most relevant. The PPSLOs are mapped to the proficiencies in our didactic and experiential courses. Data is captured via resources such as ExamSoft, 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 a greater than 70% competency in PPSLO 2 except for pharmacokinetics for second year students. For the community and institutional IPPEs, preceptor evaluations averaged 9.3 on a 10-point Likert scale which is above the meets expectations of 8.7. This was also the trend for APPEs with a 9.2. **[1F UHCOP PPSLOs, 1G PPSLO Mapping Curriculum, 1H UHCOP Curricular Schematic, 1I UHCOP PPSLO Assessment Plan, 1J 2020-2023 PPSLO Assessment Report]**

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. Third year 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 7students per year had to retake the PCOA before starting APPES. Over the past 5 years, all students were able to meet minimal competency and start APPEs on time. Overall, the scaled score averages from our P3 students have consistently scored above the NSS. For the P1 and P2 students, there has been variation in the scaled scores, but in 2020 the P2's overall percentile was higher than the P3's (66 versus 64) which was the first cohort of the integrated curriculum. However, in the following years the numbers declined, due to several factors including the effect of on-line learning during Covid. The College's Assessment and Curriculum Committees have continued to look at trends in the core content areas to determine if any curricular changes are warranted. Most notably we have seen a decline in the calculations and pharmacokinetic content areas and are working on how to improve delivery and assessment throughout the curriculum. After the retirement of the PCOA in June 2023, the College piloted assessment options in January 2024 including a directed calculations capstone assessment in the P1 year and a PCOA-like assessment through ExamMaster® for the P2 and P3 years. 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. A few notable improvements include in the first year 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 to reinforce the learning which led to better summative assessments and student satisfaction the following years. A second example is the integrated flow of the courses and skills labs where students felt that what was covered skills lagged what was covered in the courses. The skills team worked with the didactic course coordinators to improve the cohesive reinforcement of key concepts in the labs. Student feedback was positive in that the flow helped them better apply the foundational concepts covered in class. Currently we have convened a calculations task force to evaluate calculations 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 all collaborative aspects of the curriculum. The multidisciplinary team-based approach to courses and assessments serves as a pillar for the collegiality of the integrated curriculum. We have a dedicated skills lab team consisting of a faculty Director of Skills lab, plus 6 clinical faculty and 3 instructional lab managers. The skills team works cohesively to coordinate and lead the skills-related experiences that are paramount in the integrated curriculum. One of the courses in the management sequence, Leadership, and Principles of IPE, provides each student opportunity to learn and apply their teamwork and leadership skills utilizing tools such as the emotional intelligence scales and strength finders. Furthermore, in another management course, Pharmacoeconomics and Hospital Management, students work on group projects throughout the semester to build on

interdisciplinary skills, communication, and 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 annual reviews the AACP standardized surveys, and any questions that have > 20% disagree or strongly disagrees is 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.   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. **[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

   [2D Std 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, IPPEs and APPEs]
   [2G promotion of health and wellness and population health team]
   [2H PPLSO Mapping Beginner to Proficient P1_P4]
   [2I MRSL and Skills Assessment]
   [2J Counseling and case-based question rubrics]
   [2K Social Determinants of health examples]
   [2L IPPE and APPE Rubrics]
   [2M PPSLO Assessment Plan AY 22-23]
   [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)

The UHCOP curriculum, through didactic, experiential, and co-curricular activities, aims to equip students with the knowledge, skills, and behaviors necessary for comprehensive patient care. This includes 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 2020-2023 PPSLO Reports]** These concepts 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, Interprofessional Education (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. On APPEs students can refine patient-centered care, medication management, and health and wellness in a variety of patient care settings.

Patient-Centered Care

In the P1 year, students are introduced to the pharmacists' patient care process (PPCP), which develops in complexity as the curriculum progresses. Students first learn to gather information directly from simulated electronic medical records (EMR) 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 (including vital signs like blood pressure and blood glucose), and interpreting lab results over time. These foundational patient-care skills are then integrated into courses and skills labs and MRSLs during the P2 and P3 years.

In the MRSLs the students practice working up patients using monitoring forms and writing progress notes (including 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.

In the P1 fall semester, 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. As part of their interprofessional experiences (IPE), students engage in case-based IPE during their P2 year and participate in clinic experiences at HOMES clinical or Vecino Health Centers alongside UHCOP faculty. In the P3 IPE students participate in patient home visits (No Place Like Home) with Baylor College of Medicine. Please refer to standard 11 for more details on our IPE. Additional direct patient-centered care experiences include the community and institutional IPPEs between the P2 and P3 years as well as the 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 the P1 fall with Introduction to the Healthcare System covering Medicare and Medicaid and foundations of the US healthcare and pharmacists' roles. In the summer of the P1 year, students take the Patient, Medication Safety and Informatics course providing students with the basics of medication safety, patient safety, quality improvement and informatics optimizing patient care. In the P2 and P3 years, management courses focus on medication distribution systems, controlled substance management, and medication and formulary management in institutional and ambulatory settings. **[2B Courses Teaching Methods and Assessments]**

In parallel to the management course sequence, other courses and skills labs integrate and apply knowledge of medication use systems. For example, in the Fundamentals of Pharmacy Practice course, while learning the community pharmacy law, students also learn the community pharmacy workflow and process. This is then simulated in Pharmacy Skills Program II. This application is continued in Pharmacy Skills Program III where activities such as clear telecommunication between nurse-pharmacists is performed. The MRSLs sequence has embedded order/prescription verification, medication reconciliations, 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 healthcare 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 what was learned in the classroom and skills labs. Specifically, in the P2 spring all students must participate in an IPE medication error case with local medical and nursing colleges. The IPPE experiences include medication use systems as part of the core competencies checklist. Medication use systems are a core outcome of the required APPE experiences. In addition, there are APPE elective opportunities in medication safety, healthcare management in either a community or institutional pharmacy setting, and disease state management. **[2F medication use systems in IPE, IPPEs and APPEs]**

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 the P1 orientation all students receive certification in mental health first aid, basic life support (BLS) and blood borne pathogen training. In the P1 fall, students complete group projects in public health as part of the Social, Behavioral and Communications 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. Students then practice and apply these skills in Pharmacy Skills Program II. In addition, the College utilizes the APhA immunization certification and naloxone training in the P1 year. Students also learn to counsel patients on the results of assessments and educate on interventions to improve health. This all is purposefully completed before the community IPPE so students are able to apply these skills on their summer rotation.

In the second and third years of the curriculum, evaluation of evidence-based medicine and clinical practice guidelines is introduced in 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 the MRSLs. Additionally, nonpharmacological preventive measures and interventions for chronic diseases are considered, especially in the application of the PCPP. Lastly in the Complex Problems course, students extensively apply practice guidelines and literature evaluation skills to assess and plan in the group-based case presentations focusing on social determinants of health and population-based care. The first three years of the curriculum provides the students with comprehensive preparation to work with diverse patient populations across various healthcare environments during their APPEs. **[2G promotion of health and wellness and population health team]**

Assessment of Patient-Centered Care, Medication Use Systems, Health and Wellness, and Population Based Care
As was described in Standard 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. Specifically for this standard, PPSLO 6 (Patient-Centered Care), 9 (Health Care Management) and 10 (Population Based Care) are most relevant although others may apply. **[2C UHCOP PPSLO Assessment Plan_2024**] By evaluating the 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 the P1 year, students learn the basic skills of patient-centered care, medication use systems, health and wellness and population-based care in counseling patients. During the Skills Program I (fall P1) final OSCE, students undergo evaluation of their communication abilities during counseling sessions, followed by an assessment of information accuracy in the subsequent spring. This gives students a foundation to build upon during their community introductory pharmacy practice experience (IPPE) where they are directly assessed on their patient communication skills. In the P2 year the focus moves to discharge counseling and medication reconciliation and is assessed in the MRSL II final OSCE and P2 summer Institutional IPPE. Patient counseling and communication continues to be emphasized in the P3 year with MRSLs III and IV as well as Complex Problems before going on to APPEs. **[2I MRSL and Skills Assessment] [2J Counseling and case-based question rubrics] [2K Social Determinants of health examples] [2L IPPE and APPE Rubrics]**

Data from the 2022-2023 PPSLO Assessment Plan **[2M PPSLO Assessment Plan AY 22-23]** shows that PPSLOs 6, 9 and 10 were consistently assessed from P1 to P4 year including exams, skills assessments, and IPPE and APPE evaluations. Based on ExamSoft data, in the pre-APPE curriculum all students showed an average of 85% competency in these PPSLOs. For the community and institutional IPPEs, preceptor evaluations averaged 9.5 on a 10-point Likert scale which is above the meets expectations of 8.7. This was also the trend for APPEs with a 9.5 for PPSLOs 6, 9, and 10.

Since the start of the integrated curriculum, PCOA scores for the P2 and P3 students in the area 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 or far below achievement on. **[2O UHCOP NAPLEX 2021_2023]** The assessment and curriculum continue to evaluate areas to improve this outcome and have identified gaps in content delivery and reinforcement in skills labs that were changed during Covid as well as rotation experience limitations that has improved upon returning to normal operating procedures.

Notable Achievements
The success of our integrated curriculum would not be feasible without the dedicated skills team to help "glue" the continuity of education and assessment of our students. Two skills lab activities have received honorable mention by AACP Lab Sig – one for an activity related to the role of pharmacy staff in a community pharmacy (medication use systems), and another

for a simulated activity with a focus on patient safety and clear telecommunication between nurse-pharmacists (medication use systems).

The College's co-curriculum is vital in the professional development of our students with respect to patient-centered care and population-based care. The service-learning events led by student organizations allow for direct involvement of patient-care and health education activities in a variety of patient populations, such as the an annual Mayor's Back to School Fest and numerous health fairs in Houston's diverse communities. In addition, the IPE requirements include interactions with varied social determinants of heath such as older age, low-income, and low health literacy through experiences at Vecino and HOMES clinics and No Place Like Home (NPLH). Lastly, students have the opportunity to receive a Hispanic Health Certificate upon graduation through 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%. The College's Department of Experiential Education strives to continuously improve preceptor feedback and communication. **[2D Standard 2 AACP Surveys]**

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 in these are measured with 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. In the P1 year Pharmacy Skills Program I and II incorporate several problem-solving activities and assessments. The Foundations in Medicinal Chemistry, Microbiology, and Receptor Action (FIMMRA) course in the P1 spring includes problem-solving activities such as working out medicinal chemistry functional group structure questions and connecting resistance mechanisms to specific pathogenic bacteria. In the community IPPE students much reflect on at least 8 interventions they encountered in the retail setting.

As clinical knowledge increases in the P2 and P3 years case-based activities and/or assignments are included in the active learning in the modules. Students work together or as a group inside and outside of class to evaluate patient cases to identify and resolve medication-related problems. In many modules, there is a debrief session where the cases are reviewed and discussed as a group. Some modules also include these activities as part of the quiz grade for the course. Problem-solving skills carry over into the respective MRSLs and increase in complexity. The final bridge before APPES comes in the capstone Complex Problems course spring of the P3 year where students apply everything learned to solve complex cases and healthcare issues that do not necessarily have a right or wrong answer. The activities compel the students to use all their knowledge and critical thinking to come up with a plan. Examples include group presentations, case-based policy and

procedure projects and drug information questions. This gives the students increased confidence in problem solving as they finish the didactic courses and go on to 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 TEAMStepps is covered.   Students then apply their knowledge and skills through patient counseling assessments and health education posters. Starting in the P1 spring, students participate in co-curriculum patient education activities such as naloxone education and diabetes education with the student organizations. The Skills courses and the MRSLs assess patient counseling, drug information education and discharge patient counseling. They also include a variety of scenarios and assignments that incorporate education delivery. For example, in Pharmacy Skills Program III, an activity 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 MRSLs sequence, students must also respond to questions from faculty or residents role-playing as preceptors, and use the identify, situation, background, assessment, and recommendation (ISBAR) technique to resolve medication-related problems on an order or medication reconciliation issue.

In the P3 year, students receive Screening, Brief Intervention, and Referral to Treatment (SBIRT) training in the Integrated Psychiatric Module, then in the MRSL they apply this to educate patients about the risky use of substances. IPPEs and APPEs include many educational experiences and requirements such as interventions in the Community IPPE and topic presentations on Institutional IPPE. **[3C Examples of the IPPE Requirements]**

Patient Advocacy
Patient Advocacy is incorporated throughout the professional program starting P1 year with the introduction of mental health first aid and motivational interviewing. These concepts serve as a foundation to include and encourage patients to be informed and self-advocate in their healthcare decisions. Students are also trained in TeamSTEPPS, a teamwork system, to help provide safer patient care. These skills are then integrated throughout the curriculum in the integrated modules, skills labs and MRSLs utilizing the PCPP. A capstone for patient advocacy application is embedded in the case-based group projects in the Complex Problem course where the team presentations must consider patient-preferred values and belief systems.

Co-curricular activities including IPEs provide experience and instruction regarding patient advocacy. Each year there is a required advocacy convocation that focuses on the profession in meeting patient needs through legislative and regulatory efforts or patient education. For example, the 2021 Advocacy Convocation provided pharmacy students with information on the newly released COVID vaccines and vaccine hesitancy. Patient advocacy is highlighted in the IPE experiences at the HOMES clinic and Vecino Health Center, which include comprehensive healthcare for underserved populations. During the No Place Like Home (NPLH) IPE in the P3 year, students visit the homes of elderly patients with other healthcare professionals to learn the challenges experienced by the aging patient. Using the PCPP process the students must serve as advocates in the resolution of the patient's issues. These skills are applied in the IPPEs and APPEs in various patient populations.

Interprofessional Collaboration & incorporation into the curriculum
Interprofessional education (IPE) activities are purposefully embedded throughout the curriculum to reinforce the importance of healthcare professional collaboration in all patient care settings. Although most activities are part of the co-curriculum, the students do learn foundational knowledge provided in the Social, Behavioral, & Communication Aspects of Pharmacy Practice in the P1 year and in the IPE and Leadership course in the P2 year. The IPE plan 2023-2024 highlights how the UHCOP curriculum purposefully builds upon skills and knowledge gained as they progress through the curriculum. **[3D IPE Plan 2023-2024]** In addition to the IPE activities discussed in this standard, see standard 11 for more details about the robust IPE curriculum.

Social Determinants of Health
A priority for UHCOP is to provide students with exposure to various patient populations, and how 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 PCPP. 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 Social, Behavioral and Communications course and applied in the skills labs and the Patient Assessment course. The P2 and P3 didactic courses, along with MRSLs, include patient cases that integrate SDOH to optimize patient health and outcomes. The P3 Complex Problem course includes a group-based project in which SDOH must be factored into the decision-making process for a given patient case such as health literacy skills, financial resources, healthcare access, and social and community environments. **[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 healthcare barriers. With guidance from UHCOP faculty, preceptors, and other healthcare professional students can address many obstacles for patients including access to healthcare, language barriers, and literacy skills.

Communication
Communication skills are introduced early in the curriculum during the P1 fall semester in the Social, Behavioral & and Communication Aspects of Pharmacy. The topics range from pharmacist's patient care process (PPCP), medical terminology, communication with patients using layman's terms, nonverbal communication, and communication with the presence of barriers, etc. Patient counseling and education are first introduced in the P1 fall semester with an emphasis on utilizing the three prime questions. This skill set is further developed and assessed during various time points in the PharmD curriculum. In addition to emphasizing communication with patients, students also focus on developing effective communication with healthcare providers. This includes conflict resolution using the 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.   Lastly, communication is assessed throughout the experiential curriculum. Specific examples include the formal IPPE-institutional and APPE case presentations and the journal club presentations required on various APPE rotations. Also, the required internal medicine APPE has a written assignment evaluated using a rubric. **[3F IPPE and APPE Rubrics]**

Assessment Data Resulting in Curricular Improvements
As previously described, the College's PPSLO Assessment Plan utilizes data from various assessments to evaluate student achievement. The most relevant for problem-solving is PPSLO 3, for education PPSLOs 1 (subdomain 1.6) and 10, Patient Advocacy PPSLOs 6 and 8 (subdomains 6.8 and 8.5), Social Determinants of Health 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.

As described above, the P1 year lays the foundation for education, communication, problem-solving and patient advocacy, including social determinants of health. At the end of the P1 year fall, students have a few assignments in the Social, Behavioral and Communications 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 Skills Programs I & II and the MRSLs also incorporate the core principles of problem solving, patient advocacy and social determinants of health 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 year including exams, skills assessments, and IPPE and APPE evaluations. **[3A PPLSO Asssessment Plans 2020-2030]** Based on ExamSoft data in the pre-APPE curriculum, P1's ranged from 84.4% to 95.47%, with the lowest in professionalism and teamwork (PPSLO 7) and highest in problem-solving (PPSLO 3). P2's ranged from 80% to 99.45%

with the lowest in population-based care (PPSLO 10) and highest in communication (PPSLO 1). For P3's, the range was 83.88% to 100% with the lowest in population-based care (PPSLO 10) and highest 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 of 8.7. This was similar for APPEs with a 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 the 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 did fall to the fourth highest in 2023. **[3I PCOA ExamMaster Data] [3J UHCOP NAPLEX 2021_2023]**

Through feedback from student evaluations, course coordinators, and preceptors (including faculty) has indicated that while students displayed appropriate skills in putting together SOAP notes and general professional communication, improvement is needed on being concise when talking to healthcare professionals. In addition, case-based problem-solving and critical thinking need to not only be in the skills labs but also in the modules and other courses. As a result, the courses have worked on increasing active learning. For example, a team-based case assignment was added to the P1 patient assessment course and case-based activity assignments in several of the integrated modules.

Notable Achievements
As stated in standard 2, our P2 and P3 IPE co-curricular requirements include interactions with varied social determinants of health such as older age, low-income, and low health literacy through experiences at Vecino and HOMES clinics and No Place Like Home (NPLH). The Complex Problems P3 capstone course has been instrumental in students displaying competency in communication, problem-solving, education, and patient advocacy including social determinants of health as well as increasing their confidence in doing so before starting APPES. Lastly, UHCOP faculty member, Dr. Austin De La Cruz was awarded a grant from the Substance Abuse and Mental Health Service Administration (SAMSHA) to create an educational program for the P3 year 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 healthcare" fell below 90% (89.23%). We will continue to watch the trends and intervene per our programmatic and PPSLO assessment 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	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

	evidence already exists that the plan is addressing the factors and will bring the program into full 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 Reports 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

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

    [4_ Std 4 AACP Survey]

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
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 are provided with the development of self-awareness, leadership, innovation, entrepreneurship and professionalism throughout 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 the ePortfolio and co-curricular data. **[4C PPSLO Assessment Plan] [4D ePortfolio description]**

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 plan has eight domains (advocacy, cultural sensitivity, innovation/entrepreneurship, leadership, professionalism, self-awareness, IPE, and service learning) mapped to the 2013 CAPE outcomes 3 and 4 as well as the College's professional outcomes (PPSLOs). Co-curricular activities include formal convocations, professional workshops, and wellness activities. A number of the formal events are mandatory; however, many activities allow the students choice of participation for specific requirements. This allows for students to personalize their professional development and encourages participation in student organizations and activities of interest. **[4E UHCOP CoCurricular Plan 2023].**

Capturing the students personal/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 learning outcomes (PPSLO). The curricular artifacts are from completed activities and assessments where feedback has been given. **[4D ePortofilio P1-P3 requirements].** For required Co-curricular activities or events, students complete a snapshot reflection shortly afterwards asking the student 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 short answers on the most important lesson they learned from the activity. Data is reviewed and assessed to ensure co-curricular activities continue to meet the intent of the programming and needs of the students. **[4E Selected Snapshot reflection survey]**

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 IPE course students complete the EQ 2.0 and Strength Finders Assessments to help the 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 wellbeing is captured in the P1-P3 years through the anonymous CCAPS-62 survey, a professional instrument utilized to assess psychological symptoms and distress in college students. **[4F CCAPS-62 Instrument AND ICAAS] [4G EQ2with student examples]**

Commitment to continuous professional development and to self-directed lifelong learning.
UHCOP students commit to professional development and life-long learning even before classes begin. Prior to new student orientation, students complete the Learning and Study Strategies Inventory (LASSI) and meet with academic advisors to

review the results and discuss a learning and time management plan. In addition, at orientation a seminar on notetaking and study tips is given by the faculty. During the fall P1 semester, students develop academic goals using the SMART method and create their curriculum vitae (CV). These are then reviewed, and feedback is provided and then followed up in the P3 year before APPEs. In the P2 year, students are provided a P2 Success Series by the faculty providing insights and resources on transitioning successfully to the integrated modules and MRSLs. In the capstone Complex Problems course, students complete a reflection on self-awareness / student's plan for APPE success. **[4H LASSI] [4I Combined Examples Smart goals and CV templates, P2 success series agenda, Complex Problems self-awareness]**

As part of their professional development and life-long learning, students receive guidance and exposure to various career options throughout their time in school. To start, the Office of Student Affairs meets individually with students during the P1 year to discuss areas of pharmacy interest. The APhA Career Pathways is delivered to the P1 students as part of Pharmacy Skills Program I. This is followed in the spring semester with a P1 career pathways workshop in the co-curriculum which also exposes the students to research opportunities and dual degree programs (PharmD/MBA or PharmD/PhD). The College hosts an evening where students meet with various companies for summer internships and opportunities in order to gain further experience. Student organizations offer valuable opportunities for students to explore professional pathways. For instance, 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 Pharmacy Organization (IPhO) organize roundtable events for networking with industry and managed care pharmacists. **[4J Career Exploration Events and Professional Networking during AY2324]**

The commitment to professional development and lifelong 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 student 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. **[4K Oath of a pharmacist]** Throughout the didactic curriculum, OSCE's consistently assess student professionalism and communication. Lastly, on P4 year On Campus Days, students share clinical or professional pearls they have gained on their APPE rotations. **[4L Examples of 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. Starting with orientation, the student-developed professional dress code is introduced and is self-enforced throughout the professional program. [4M Standard 4 Domains Chart Curricular Cocurricular Activities] Students are also introduced to the College's Honor Code to foster their professional integrity. **[4N HONOR CODE]** Phi Lambda Sigma (PLS) introduces the 5 voices of leadership and provides the GIANT assessment to build upon throughout the curriculum. Lastly, students are trained in Mental Health First Aid for both their own self-awareness and empathy for others.

This foundation sets the stage as students begin their P1 year where they are introduced to professionalism and team-dynamics through TEAMStepps in the Social, Behavioral and Communications Course. In addition, the public health poster and presentation in this course offers students the chance to be creative professionals. In the P2 Leadership and Principles of IPE course, students complete and reflect on their EQ-i 2.0 and Strength Finders 2.0 results through a variety of reflections and class discussion. The students also develop a vision of how their career will advance through the creation of a personal strategic plan. During community and institutional IPPEs, students complete and submit a CE as part of their continual professional development. Professionalism and self-awareness are emphasized in the Skills Programs and MRSLs with assessment of tardiness, attendance, dress code and communication. Ethics, research, and scientific writing electives offer opportunities for students to be creative in their professional growth. Lastly, in the P3 Complex Problems course students are expected to work on a team project and creatively problem solve difficult cases and scenarios. At the completion of the project, students reflect on areas where the course helped them become APPE ready. **[4O complex problems examples]**

Numerous co-curricular opportunities allow students to become self-aware and develop into creative and professional leaders. Students' complete sessions in TAO Connect in order to identify the stressors they have and through attendance of wellness convocations they can familiarize themselves with resources available to support their well-being through the

College and University programs.   Student organizations also offer activities such as the resiliency / grit workshop and sessions for practicing self-care activities. **[4P 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 Rho Chi Boblitt Lecture annually features a speaker discussing creative problem-solving in healthcare. 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 researchers for student engagement and project opportunities.

As described above, the foundation of leadership is introduced at P1 orientation and is 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 healthcare. Student organizations provide opportunities to focus on honing leadership skills through events such as the presidents' retreat and leadership workshops held by PLS.   Students can achieve national involvement through opportunities such as the APhA-ASP Summer Leadership Institute or NCPA Pharmacy Ownership and Leadership Academy. Students are also encouraged to take on leadership roles in student organizations or College committees. The College's 24 student organizations provide several 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 the factors impacting the delivery of patient care. Others, such as Social, Behavioral, & Communications Aspects of Pharmacy Practice and Leadership and Principals of IPE provide students with tools to interact with patients, collaborate with members of the healthcare team, and develop their self-awareness and leadership skills to support the care of patients. The 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 cases. **[4Q 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 impressions and concerns from students. For instance, 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 "BIRD" test but found it had limited resources for continued leadership development. In 2022 the GIANT leadership assessment replaced the BIRD 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, emotional intelligence (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 that students complete the personal assessment of their EQ 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 students 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 APhA project diabetes and the PLS Leadership Challenge have received accolades. Annually, 1 or 2 pharmacy student(s) participate 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. We will continue to watch the trends and intervene per our programmatic and PPSLO assessment if warranted. **[4R AACP Appendices]**

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 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

   [University Organizational Chart Depicting the Reporting Relationship for the Dean of the college]

   [uhcop-orgchart-5-24]

   [Chancellor-Org-Chart]

☑ Document(s) verifying institutional accreditation

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

☑ Complete institutional accreditation reports identifying any applicable deficiencies

☑ 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

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 –Presidents Office – University of Houston].** The Chancellor of the University of Houston System also serves as President of the system flagship institution, the University of Houston **[5A2 –Presidents Office – University of Houston]**. In the organizational structure, UHCOP is an autonomous unit within the university structure and is led by Dean F. Lamar Pritchard, Ph.D. who reports to the Senior Vice President for Academic Affairs and Provost **[5A3 – 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 sixteen 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 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 UHCOP Executive Council Leadership team **[5K_uhcop-bylaws-4-1-2022]** 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. 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 space on the 9th floor of the Health 2 building to house the 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 **[5I_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, works 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 **[5J and 5G 2023-2024 UHCOP COMMITTEES ROSTER]** 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. 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 makes every effort to maintain an autonomous relationship within the bounds of UH policies and procedures as well as the State of Texas and federal regulations.

UHCOP operates autonomously within the University of Houston (UH) and the University of Houston System. 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. 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, UHCOP also has additional policies and procedures outlined in the UHCOP Bylaws **[5K_uhcop-bylaws-4-1-2022].** 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 recruitment but exercises full autonomy in selection. 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 Pharmacy 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 **[PPS Department Bylaws, 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]

      [6A2_UHCOP Vision, Mission Goals]

      [6A3_PPTR vision, mission, and values]

      [6A4_PPS vision, mission, and values]

      [6A5_PHOP vision, mission and core values]

Optional Documentation and Data:

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

      [6K_Residency Showcase - University of Houston]

      [6K2_Academic Pharmacy Fellowship - University of Houston]

      [6K3_I.D. Fellowship]

      [6K4_MS Pharmacy Leadership and Admin]

      [6L_PharmD-MBA - University of Houston]

      [6L2_PharmD_PhD_Program _UH]

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

      [Advocacy Appendix 2024]

      [CVVO for Pharmacy Summer Camp 2021 Handout]

      [Research Poster Appendix_Student Posters 2017-present]

      [Student Leadership Appendix_Pharm.D.-accolades]

      [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 **[6A2_UHCOP Vision, Mission Goals]** statements and the academic departments' mission and vision statements are consistent with the UH Mission, Vision, Values, and Goals **[6A_Mission, Vision & Values – University of Houston].** All of the College's and academic departments' vision and mission statements parallel the university's mission and vision but are specifically geared more toward the education and preparation of professional pharmacy students, future pharmacy practitioners, and graduate students in various fields of pharmacy and research. **[6A3 PPTR Vision, mission and values, 6A4 PPS vision, mission, and core values, 6A5_PHOP vision, mission, and core values].**

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, improve health and quality of life in a transformative way. The seven outcomes (or long-term goals) that make up our strategic imperatives describe how we plan to carry out our mission and vision statements. It is the focus of serving others by improving health and quality of life in the UHCOP's mission statement that the College must always keep in the forefront of everything it does, to ensure a steady course in achieving its overall vision and mission. These long-term goals are the guide upon which the UHCOP Strategic Plan was developed and include short-term goals that, when reached, ensure that the mission and vision of the College is continuously achieved.

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, alumni, etc. The mission, vision, and values were revised and adopted in December of 2021. The College's Strategic Planning Committee began work on Vision 2030 in October of 2019, and the entire process took approximately 22 months to complete, with progress slowed due to the COVID pandemic.

Several additional groups of college stakeholders were also allowed to participate 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 process. The college's mission, vision, and values are published in the UHCOP PharmD Student Handbook, which is reviewed at each New Student Orientation 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 to be 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 also were elected or appointed to leadership positions at the national, regional, or state level in such organizations as the American Society of Health-System Pharmacists Pharmacy Student Forum, the Texas Pharmacy Association-Academy of Student Pharmacists, and the Student National Pharmaceutical Association. Our students continually work within student organizations to provide community wellness events and outreach. See notable achievements below for details.

Professional Pharmacy Certificate in Hispanic Healthcare. The UH College of Pharmacy 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 healthcare delivery skills. This 18-credit-hour certificate program includes a series of 2 core courses (6 hours) 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 2 core courses are followed by 12 hours of APPEs in healthcare settings serving predominantly Hispanic populations. This program capitalizes on both the assets of the University of Houston (UH) and the needs of the Houston community, the State of Texas, 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 10,000 patient care interventions in CORE ELMS annually, documenting their impact on patient medication usage and outcomes for thousands of patients. Of the 10,000, about 1,850 of the interventions come from IPPE experiences while the balance comes from 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 (PAP) is designed to evaluate all aspects of the program including organizational governance, culture and process that drive the program, and the Professional Program Student Learning Outcomes (PPSLO) Plan is designed to evaluate and assess 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 the Texas Pharmacy Association (TPA). During this biennial event, pharmacy students, pharmacists, and pharmacy technicians meet with lawmakers at the State Capitol in Austin to discuss legal and regulatory matters relevant to the pharmacy profession and patient care. Moreover, individual student organizations within the college host advocacy-focused meetings. For instance, the UHCOP Chapter of the National Community Pharmacists Association 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 healthcare. **[Advocacy Appendix].**

Pharmacist Postgraduate Professional Education and Training Initiatives
Post-graduate Residency/Fellowship Programs.
Through formal affiliations with various Texas Medical Center (TMC) institutions and other healthcare organizations, the College of Pharmacy provides several post-graduate residency and fellowship opportunities. Notably, in 2017, the college introduced 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 **[as highlighted in the *Academic Pharmacy Fellowship Programs to Improve Faculty Pipeline*, AJPE 20230 and the *Academic Pharmacy Fellowship UHCOP*].** 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 a junior faculty experience, enabling a seamless transition into faculty roles. Now in its sixth year, the academic fellowship has graduated ten 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 program is a 24-month program focused on training the next generation of pharmacy leaders. The college of pharmacy offers a Master of Science in Pharmacy Leadership and Administration to PGY1 and PGY2 residents within the Texas Medical Center who are concurrently in a Health-System Pharmacy Administration residency program.

PharmD/MBA Degree Program. The college established a combined PharmD/MBA degree program in the Fall of 2017 with the UH Bauer College of Business to provide additional business, administrative, and leadership opportunities for its students.

PharmD/PhD Degree Program. This is a consecutive degree program **[6L2_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 academics or research.

Pharmacist CE Opportunities. The college also promotes lifelong learning opportunities for pharmacists. Examples of these professional development opportunities include an annual Preceptor Continuing Education Conference (ACPE credit provided through the Texas Society of Health-System Pharmacists) which covers topics such as best practices for preceptor-student interactions and Texas pharmacy law updates. In 2020, the Office of Experiential Education partnered with the college's PREMIER center to widen this annual professional development event to include three hours of preceptor CE and one additional hour related to prescribing and monitoring controlled substances, which was a Texas Board of Pharmacy mandatory CE requirement for all pharmacists. In addition to this annual event, the PREMIER center hosts a wide variety of home study CE programs available for all pharmacists to take on their website **[UHCOP PREMIER Center Pharmacist CE]. 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 2000 hours of CPE credits for pharmacists.

Interprofessional Training Initiatives
The College also supports the development of pharmacy graduates trained with other health professionals to provide patient care through various programs and initiatives. As documented in the **[IPE Plan 2023-2024],** has a very robust required interprofessional curriculum of activities that build on each other. A foundation for interprofessional education begins in the fall of the P1 year with training in TeamSTEPPS which introduces interprofessional communication and team building strategies. The P1 year also has an interprofessional case-based activity with medical, nursing, and optometry students in the spring in which students begin working together on a patient case, utilize their communication strategies and learn about their roles and responsibilities and how the professions can work together.

In the P2 year, the students begin their IPPEs with a 4-week community-based experience, have a patient safety case-based IPE with medical and nursing students, and have their first interprofessional experience in an ambulatory clinic with a UHCOP faculty or fellow. For this ambulatory IPE experience, the students attend a 4-hour clinic visit at either HOMES Clinic or Venico Clinic, both of which have UHCOP preceptors. At their ambulatory clinic-based IPE, the P2 students have direct patient care experience with other healthcare professionals yet have an immediate pharmacy preceptor available. The

P3 year continues to build on this framework with the completion of a 4-week institutional IPPE that includes a 2-hour shadowing IPE experience. The P3 students also serve as the pharmacy representative on an interprofessional team with medical students and Baylor College of Medicine preceptors. On this interprofessional team, the P3 students visit 3-4 patients in their homes and help deliver care to Houston area residents who might not review care otherwise. This is a program available through Harris Health. Finally, the P4 students complete their 7 APPE rotations, most of which have an interprofessional component, and 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 the hospital-based setting and communication strategies for working in teams.

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 continuing education 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 AY2019-20 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. The COVID-19 Pandemic restrictions curtailed these activities. However, during times of social distancing, the College students and faculty assisted in efforts that provided over 69,000 COVID-19 vaccines to patients in the Greater Houston Area through the COVID Vaccine Volunteer Opportunity process **[CVVO for Pharmacy Summer Camp 2021 Handout].** Additionally, faculty and students assisted in COVID immunizations through their respective experiential and practice sites. Specifically, our faculty and students in the Rio Grande Valley administered about 30,0000 COVID vaccines alongside the DHR Health pharmacy team.   In person Service-Learning Events resumed in May 2022. In what continues to be a rebuilding process, during AY 2022-23 UHCOP student pharmacists provided more than 3,600 service encounters including over 1,900 PCA's and 1600 HEAs.

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 the local, state, and national levels. Recent examples include the 1st Place in the 2023 Texas Society of Health-System Pharmacists Research & Education Foundation Student Poster Competition, 1st Place in the 2023 Student National Pharmaceutical Association National Convention, and first in Texas/top 5 in the U.S. in total number of posters (42) accepted for presentation at the 2023 American Society of Health-System Pharmacists Midyear Clinical Meeting (the second consecutive year of statewide top spot) **[Research Poster Appendix].**

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	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

	evidence already exists that the plan is addressing the factors and will bring the program into full 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. 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

      [UHCOP Strategic Plan FINAL high]

      [Strategic Plan Creation and Implementation Process Vision 2030]

      [Strategic Imperative #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

      [Standard 7 FSQ_11,12]

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'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" **[UHCOP Strategic Plan FINAL].** The developmental process **[Strategic Plan Creation and Implementation]** 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 the COVID pandemic, the shift of focus to teaching and learning in a virtual environment as well as the healthcare 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, ranging from securing a physical presence in the Texas Medical Center (TMC) to 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 the TMC, we position ourselves strategically for nationally competitive research, in line with UH Goal 2. Simultaneously, we foster collaboration with the Rio Grande Valley (RGV), particularly in health disparities research, further supporting 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, 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—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 analysis) within our environment; and our strategy (strategic imperatives along with overarching goals) to achieve our future goals and move the college forward. The "Vision 2030" Strategic Plan 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 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 in a living document format. The college's Strategic Planning Committee (SPC) and Executive Council Leadership (ECL) team have worked together to assign the responsibility of meeting the short-term, mid-term, and long-term goals associated with each strategic imperative contained in the "Vision 2030" Strategic Plan to the appropriate individuals and/or committees and groups. Currently the Executive Associate Dean along with each of the team leads and ECL is responsible for tracking and reporting on progress related to the "Vision 2030" Strategic Plan. This is done through a Strategic Plan Tracking Document updated by the Strategic Planning Committee 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 continues to further refine and develop its programmatic assessment process, the 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 the "Vision 2030" Strategic Plan. These updates occur during faculty meetings, Dean's Advisory Council meetings, Dean meetings with the Provost who communicates with the Chancellor, and through emails from the Dean to faculty, staff, and students. Updates on the various initiatives in the strategic plan are also communicated through the college's *Interactions* publication (twice per year), the Interactions Refill email newsletter (every other month), as well as in publications presented at the Texas Pharmacy Congress 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 (Qualtrics) to provide potential charges for the college to work on for the upcoming year. The ECL meets to discuss those charges and works to prioritize those that align best with the current strategic plan. Appropriate parties and committees are then assigned the charges. Much effort is made to identify charges that will help the college move closer to achieving the strategic imperatives. If a new taskforce is deemed necessary to focus on accomplishing some of the initiatives, the ECL has input on putting those taskforces together.

Notable Achievements

In line with Strategic Imperative 4, 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 to strengthen research infrastructure, administration, training, and resources. The committee's primary focus is to foster collaboration between the University of Houston (UH) and the Rio Grande Valley (RGV), particularly in health disparities research. Established in fall 2021, 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. The faculty have been integral in helping write the college's "Vision 2030" Strategic plan as was reflected in the AACP Faculty Surveys over the past 4 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 about the effectiveness of strategic planning at the college, 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. 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

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

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

☑ List of committees with their members and designated charges

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

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

☑ Evidence of faculty participation in university governance

Data Views and Standardized Tables:

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

[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

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

The UHCOP is one of fifteen 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 the Chief Executive Officer of the College **[8a uhcop-orgchart-04-23]** and is appointed by the Senior Vice President for Academic Affairs and Provost of the University with the approval of the President and the Board of Regents of the University of Houston System. Deans of all colleges report to the Senior Vice President 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. He meets with the Senior Vice President of 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 of the Dean with University officers such as the Provost, Vice President for Research, and the 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 Membership Spring 2023_College],** which provides a framework for cooperation and communication between UH faculty and the administration. The UHCOP has six seats on the Faculty Senate, and senators are elected by the faculty to represent the College and the faculty. UHCOP senators have taken on leadership roles for many Senate subcommittees and many routinely serve on university committees and task forces.

College Organization and Structure
The organizational structure within the college has been set up in such a way as to facilitate 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, the Office of Research and Graduate Programs, and the Office of Academic Affairs **[8a uhcop-orgchart-04-23]**. As dictated by college bylaws, the Dean appoints associate deans, assistant deans, and directors, who serve at the discretion of the Dean. The Executive Associate Dean (EAD) **[Administrator Job Descriptions]** is the administrator with primary responsibilities for the entire College, serving as the CEO and College representative in the absence of the Dean. The EAD oversees the Office of Development, Student and Professional Affairs, the Communications Department, and the College 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, Assistant Dean for Assessment, and Director of Information Technology (IT) Resources. The Assistant Dean for Assessment has the primary responsibility for assessment of the College of Pharmacy. The Assistant Dean for Experiential Programs is responsible for directing/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 of Pharmacy policies related to graduate study for the College of Pharmacy. 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 three academic departments of the College include the Pharmacological and Pharmaceutical Sciences Department (PPS), the Pharmacy Practice and Translational Research Department (PPTR), and the 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. The 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 the College faculty, staff, and members of their respective departments. The Dean's performance is evaluated every 5 years by the University Provost and every three years by the College faculty and staff. The APPE/IPPE/IPE directors are faculty with part-time administrative duties. There are also directors for business operations, development, pharmacy admissions, pharmacy recruiting, and student services and these are full-time staff positions. The staff are evaluated by the annual university ePerformance review process and the 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 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 the Accreditation Council for Pharmacy Education (ACPE) standards. In addition, they must ensure the college's operations are performed efficiently with minimal disruption through a wide range of emergencies. All departments/areas have developed business continuity plans **[Business continuity planning documents]** which provide a management process whereby the areas, departments, and college overall can conduct their individual as well as overall college essential mission and functions under all threats and conditions to address potential systems failures, including

technical, administrative, and curricular failures. In addition to departmental/division and college business continuity plans, the college also has an IT COP Disaster Recovery Plan **[IT COP Disaster Recovery Plan]** in the event of an IT systems failure.

The Dean's philosophy of management is "from the bottom up," meaning that the Dean empowers the 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 **[2023-2024 UHCOP Committees Roster; 2019 -faculty-handbook]** 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 the 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; all faculty and staff have access. 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., the self-study process, the curricular revision process, and for 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 with each faculty member to discuss their annual faculty activity report, discuss their 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 **[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 Executive Vice Dean for Research, 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 30 years of combined experience. 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), both 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 Executive Dean for Research and the 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 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 the Academic Leadership Fellows Program (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 in 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 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 the Department of Pharmaceutical Health Outcomes and Policy. Approval for two additional faculty positions—one in pharmacology and another in medicinal chemistry within the PPS department—reflects 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 of 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

> **[9A1 PharmD Code of Ethical and Professional Conduct. 2.13.23]**
>
> **[9A2 UHCOP Faculty Professional Responsibilities]**
>
> **[9A3 PharmD Student Handbook 2022-2023]**

☑ Examples of intra/interprofessional and intra/interdisciplinary collaboration

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

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

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

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

> **[9E 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).

☑ 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

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)

Behavior, Professionalism, and Leadership

Faculty, staff, and students share the responsibility of supporting the 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) **[9A1 PharmD Code of Ethical and Professional Conduct 2.13.23],** and defines the board's operating procedures. The PharmD Student Affairs Committee is responsible for the periodic review and revision, as necessary, 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 the faculty **[9A2 UHCOP Faculty Professional Responsibilities]** that promote excellence in education and maintain professionalism are published in the UHCOP Faculty Handbook with the goal of providing the best education, development, and learning experience for the students. 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. Tenured faculty members undergo the post-tenure review process **[UHCOP post-tenure review policy 2024]** as a periodic performance evaluation to ensure that a tenured faculty member consistently performs at an acceptable professional level, to provide for a plan of faculty development where necessary, and finally, in the instance of failure to correct deficiencies, to provide 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'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 are understood and the assessment of the staff member's performance.

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 about 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 **[2023 UHCOP Golf Tournament Flyer]** encourages students, faculty, alumni, and friends to engage and raise scholarship money at the same time. 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 **[2023 International Day Flyer]** 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 UH Pharmacy Alumni Association works with the college to host social events including the well-attended football tailgates and alumni socials and allow the students to network. The college's Staff Council hosts and organizes the December College Holiday Party **[2023 Holiday Party Flyer],** for all college faculty and staff with a potluck menu, a gift exchange game, and the traditional White Elephant gift exchange. 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, and the Annual End of School Picnic **[2023 Annual Picnic Flyer]** and Rho Chi Challenge at the end of the spring semester, which allow the students, faculty, staff, and alumni to celebrate another year of completion of pharmacy school.

In addition, the college hosts an annual P4 Career Placement Conference **[2023 P4 Career Placement Conference Flyer],** connecting graduating PharmD Candidates with dozens of recruiters offering career opportunities throughout Houston and across the US. Recruiters, both alums and non-alums, 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, **[2023 P1 Networking Mixer Flyer],** which provides an opportunity for P1 students to meet and interact with recruiters and colleagues who offer summer job internships to students who have completed the first 30 hours of the professional program. This even 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 to 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 fall and spring semester, 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.

At our College, students have abundant opportunities for self-governance and leadership development. Twenty-one 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, the Phi Lambda Sigma and Rho Chi Honor Societies sponsor annual leadership and professionalism lectures, where industry leaders discuss relevant topics. Phi Lambda Sigma

also offers various student development activities, including the PLS Leadership Challenge, workshops, and panels. Notably, our UHCOP PLS chapter has received accolades, including the 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 Advanced Pharmacy Practice Experiences (APPEs) at the Texas State Board of Pharmacy and the Texas Pharmacy Association. They can also participate in the annual Residency Showcase, organized by the UHCOP Student Society of Health Systems 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 US, learning from 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 the Texas Medical Center, 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 Center, a Federally Qualified Health Center in Houston. Vecino Health Center is a family medicine clinic focused on delivering health care to underserved communities. Students can complete the required practice rotations at Vecino Health Center in a predominantly Spanish-speaking community for the Pharmacy Certificate in Hispanic Health Care. Three Texas Prepharmacy Co-op program affiliations continue to open much-needed two-way pipelines for students to seamlessly transition into the Pharm.D. program at the University of Houston and provide East Texas and South Texas communities expanded access to pharmacists. These affiliations include Lamar University (Beaumont), Stephen F. Austin University (Nacogdoches), and South Texas College (McAllen).

The University of Houston College of Pharmacy (UHCOP) offers three dual and consecutive degree programs. One notable collaboration is with the CT Bauer College of Business, resulting in the dual PharmD/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 PharmD 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 **[APPE/IPPE Institutional Affiliations]** along with more than 500 available preceptors. It is all these relationships, collaborations, and partnerships that help advance the desired outcomes of the professional degree program and service 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. UH College of Pharmacy faculty researchers have developed strong, productive collaborative relationships with colleagues at other colleges within the UH System, fellow Texas Medical Center institutions, and academic, and 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. Within education, the center aims to offer professional development and academic experiences to undergraduate, professional, and graduate students interested in population health and 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. The Center's director is the only pharmacist on the Texas Opioid Abatement Fund Council and the assistant director for research development has led a national effort with NABP and NCPA to create practice guidelines for community pharmacists nationwide. These local through national leadership opportunities are taught to all levels of trainees of the center including professional pharmacy students.

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.

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 adn 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 UHCOP 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 healthcare settings in addition to being innovative practitioners who embody professionalism, leadership, critical thinking, lifelong 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 in turn are aligned to professional competencies such as 2013 CAPE and Entrustable Professional Activities (EPAs). **[10B Curricular Mapping]**

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 PharmD program spanning four years. The curriculum includes three years of didactic courses (P1 – P3) including 6 hours of electives, 320 hours of Introductory Pharmacy Practice Experiences (IPPE), and co-curricular activities. In the fourth year (P4), students complete seven six-week Advanced Pharmacy Practice Experiences (APPEs), consisting of four required rotations (Advanced Community, Advanced Institutional, Ambulatory Care and Internal Medicine) and three elective rotations.**[10L course descriptions].** Additionally, students can explore joint PharmD/MBA or PharmD/PhD tracks. **[10M-https://uh.edu/pharmacy/current-students/dual-and-consecutive-programs/]**

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 that serve as a building block and introduction for 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 the P1 fall with an Introduction to the Health Care System course. This series continues in the P2 and P3 years with the Leadership and Principles of Interprofessional Education (IPE), followed by the Pharmacoeconomics and Hospital Management and lastly Ambulatory Clinical Practice Management. Overall, the curriculum lays the groundwork for integration in the P1 year and progresses to more advanced topics in the P2 and P3 years.

The integrated modules are spread throughout the P2 and P3 years.   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 go over the 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 the P2 year. In the P3 spring semester, 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 electronic medical record use, role-play, and group-based discussions. In the P1 year, 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 the P2 and P3 years, MRSLs spirally integrate material previously learned, emphasizing PCPP, **[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.**[10I Syllabi]**

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 the P1 Fall and reinforced through skills labs. Students then encounter more complex scenarios, such as drug knowledge accuracy in the P1 spring, discharge counseling in the P2 spring, and answering patient questions during the P3 spring semester. 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 (PollEverywhere), gaming, team-based and case-based learning throughout 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 PharmD Curriculum Committee (CC), in collaboration with the Office of Academic Affairs, according to UHCOP bylaws. The CC is made up of representation from each of the College's departments, students, alumni, and ex-Officio members. **[10E Curriculum Committee]** The curriculum committee meets approximately 15-20 times a year.

Overall 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. **[10R Course 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. **[10S Post-course review]** Any changes to courses are formally submitted to the curriculum committee before the semester of delivery per the curriculum committee 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 24.

Through routine curricular assessment, content streaming and decrease redundancy between courses has improved, such as the overlap between the Self-Care and OTC Products and the Patient Assessment courses during the P1 year. Course coordinators collaborated with the Pharmacy Skills Program II coordinators, to minimize redundancies. This has resulted in enhanced case-based learning and ensured 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 asthe 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. Starting in the P2 year, the integrated modules and MRSL I-IV courses reinforce the incorporation of basic skills into therapeutic plans utilizing the PCPP through patient case workups and presentations. **[10V MRSLs and Skills]** The College's Co-Curriculum develops professionalism, leadership, and self-awareness through seminars, interprofessional education (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 UHCOP 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. **[10Z SDL 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 the Information Technology department to maximize the benefits of the College's advanced technology.

Interpretation of AACP Survey Data

Data from the past 3 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 2021) and our integrated curriculum and is instrumental in the evaluation of the efficacy of our curriculum in the effectiveness of preparing our graduates for pharmacy practice and patient care. **[10Z Std 10 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. 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 IPE Evaluation Data- P10P4 IPEs V2 wTools]

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

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 healthcare professions can learn about, from, and with one another to enable effective collaboration and to eventually improve patient outcomes **[11A IPE Vision Mission Goals 2023-2024].** The vision is to create a culture where students from various healthcare disciplines will work as one cohesive unit in the delivery of patient-centered care. Interprofessional education and practice (IPEP) at the UHCOP is an important part of the culture **[11B IPEP Statements in Handbooks]**, is woven throughout the curriculum, and steadily builds in the roles and responsibilities for the pharmacy student in the healthcare 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 to help with IPE facilitation needs. The UHCOP instructional technology 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 Service (HOMES) Clinic/Denver Harbor Family Clinic (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 (University of Houston College of Medicine/UHCOM, University of Houston College of Optometry/UHCOO, University of Houston College of Nursing/UHCON, Baylor College of Medicine/BCM, and Texas Women's University/TWU) 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 in the role and responsibilities of the pharmacy student. This preparation begins in the fall of the P1 year with a foundation of TeamSTEPPS training in the Social, Behavioral, and Communications 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 long with 3 hours occurring in lecture and 1.5 hours occurring in lab. In the P1 year, 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 the P1 year. In Community IPPE (PHAR 5493), students spend 4 weeks working on communication skills both intra- and interprofessionally. In the Leadership and IPE course (PHAR 5111), students continue working on communication skills. In this course, the students 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. The event used prior to 2024 was an online health-care-related escape room where students needed to work together in their virtual teams to gather patient information to "escape" (or get discharged) from the hospital. While this event worked on communication skills in a stressful and time sensitive environment, it wasn't interprofessional and has been a placeholder for the Sickle Cell IPE that has been in development for a couple of years. The new Sickle Cell IPE will begin in fall 2024 and involves large and small group discussions surrounding communication difficulties in the interprofessional healthcare environment. This event is currently titled Special Populations – Sickle Cell IPE and focuses on working with other disciplines in the healthcare 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. The P2 year also includes the first direct patient care experience with an in-person clinic visit that occurs with a UHCOP faculty or fellow for a 4-hour experience at either HOMES or DHFC. During these ambulatory clinic visits, pharmacy students are expected to work with their healthcare 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.

The P3 year has 2 main IPE events, the Institutional IPPE (PHAR 5457) and No Place Like Home (NPLH). Institutional IPPE is a 4-week experience where students continue to work on their role in the interprofessional team. They also participate in a 2-hour shadowing experience with a non-pharmacy healthcare professional and reflect on their experience. In this reflection, they write about how they see pharmacy interacting and overlapping with this other 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 (8 hours) visiting 3-4 patients in their homes with a Baylor College of Medicine 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 healthcare team and often help with medication management, medication organization, and patient counseling.

In the P4 year, the 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 crisis management scenario and how communication and teamwork can be improved. Utilization of interprofessional education outcome assessment data are continuously reviewed and used to improve the IPE curriculum **[11D IPE Evaluation Data – IPPE] [11E IPE Evaluation Data – APPE] [11F IPE Evaluation Data P1-P4 IPEs wTools].** Data are reviewed to ensure IPE objectives are being met. Preceptor final evaluation data from the last 3 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].**

The IPE expectations are much higher on APPE rotations when compared to IPPE rotations. For the 4 required APPE rotations (Advanced Community, Advanced Hospital, Internal Medicine, and Ambulatory Care), there have been 6 additional questions that focus on interprofessional ability and engagement added to the preceptor-completed final evaluation of the student [IPE Evaluation Data – APPE]. Data pulled from CORE ELMS for the last 3 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 6 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 wTools].** For the P1, P2 and P3 IPEs activities, the assessment tool used for IPE evaluation is the ICCAS-R (The Interprofessional Collaborative Competency Attainment Scale (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 2022-2023 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 tool is utilized to capture how well senior-level healthcare 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. What this means is that if there are 2 or 3 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, and this facilitator is completing this assessment for all professional students on their assigned team. Data for pharmacy students from the ICM Team Assessment tool shows that our students are meeting these objectives **[11F IPE Evaluation Data – P1-P4 IPEs wTools].**

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 4 hours to 8 hours to allow the novelty to dissipate, dropping the number of medical and pharmacy students on each team from 4-5 to 2-3, 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 Baylor College of Medicine and Texas Woman's University 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 healthcare, (7) adding IPE to the geriatrics elective, (8) the IPE program and plan has had consistent growth and refinement annually, (9) successful oversight and coordination of large scale (450+) IPE events with the support of the UHCOP IT department, (10) P4 CM IPE has had consistent development and refinement over time, and (11) innovative IPE activities were developed and continued successfully throughout the COVID pandemic, and we compared data to pre-COVID to confirm an equal learning opportunity of IPE outcomes.

Overall, the graduating student data for IPE were all above 80% agrees or strongly disagrees cutoff (> 20% disagree or strongly disagrees) utilized in the College's Programmatic Assessment, 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

      [Curriculum PPSLO_and Assessments]

      [University of Houston Curricular Mapping 2024]

      [PPSLO Mapping Curriculum Spreadsheet ALL YEARS]

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

      [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

      [PHAR 5493 IPPE Community rotation 2023 Manual]

      [PHAR 5457 IPPE Institutional rotation 2023 Manual]

☑ Introductory pharmacy practice experiences preceptor manual

      [UHCOP OEP Preceptor Manual]

☑ Introductory pharmacy practice experiences student and preceptor assessment tools

      [PHAR 5493 IPPE Community Assessment Tools]

      [PHAR 5457 IPPE Institutional Assessment Tools]

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

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

      [IPPE CORE ELMS instructions]

      [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).

      [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.

[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 to shape their professional identity formation as a pharmacist. During their P1 year, students have a pharmacy skills program that involves community practice lab and compounding lab, 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 be able to complete the IPPE Introductory Community rotation during the summer after their P1 year.

During their P2 year, students have integrated modules that encompass pathophysiology, pharmacology, medicinal chemistry, pharmacotherapeutics, and the pharmacists' patient care process (PCPP) that form their foundational knowledge. Students also obtain a certification in sterile product preparation in the fall semester and take a class in pharmacoeconomics and hospital management in the spring semester to round out their preparation for the IPPE Institutional in the summer after their P2 year. For further information about the pre-APPE curriculum, please refer to Standard 10.

Description of 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.

The Introductory Pharmacy Practice Experiences (IPPE) curriculum consists of two experiential courses at UHCOP: IPPE Introductory Community Pharmacy and IPPE Institutional Pharmacy [Overview of IPPE curriculum][PHAR 5493 IPPE Community rotation 2023 Manual][PHAR 5457 IPPE Institutional rotation 2023 Manual]. IPPE courses occur in-person in pharmacy practice settings under the supervision of a licensed pharmacist preceptor. Students take the IPPE Introductory Community course (PHAR 5493) in the summer semester after their P1 year and obtain 160 hours of practice experience in a community pharmacy setting in this course. The IPPE Institutional rotation (PHAR 5457) is taken in the summer semester after the P2 year 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-systems pharmacy practice settings. The rotation hour requirement for both Community and Institutional IPPE is gained over a 4-week period, with students spending an average of 40 hours per week in these settings.

Description of how student performance is assessed and documented in IPPEs, including the nature and extent of patient and health care professional interactions.

Student performance is assessed and documented for IPPEs in CORE ELMS [PHAR 5493 IPPE Community Assessment Tools][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 IPPE courses 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, 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 professional student learning outcomes (PPSLO), CAPE outcomes, and EPAs. The evaluation form allows preceptors to evaluate the IPPE students on their interactions with other healthcare 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 IPPE Institutional rotation has an assignment in which the students present a case presentation to the preceptor and other healthcare professionals based on a patient that they monitored utilizing the JCPP PPCP worksheet. The IPPE Institutional rotation also has an interprofessional education assignment for students to spend two or more hours with other healthcare professionals and write a reflection on their experience documenting how they see pharmacy working alongside this other profession. These activities help students to be APPE ready.

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

The IPPE practice experiences 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 Rio Grande Valley sites has also given students opportunities to rotate in a predominantly Hispanic area in both IPPE Community and IPPE Institutional. For both Community and Institutional IPPE, 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 IPPE Introductory Community course students are integrated in the community pharmacy workflow under the supervision of a preceptor. They 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 sites used are chain drug stores such as Kroger, Walgreens, CVS, Randalls, Tom Thumb, and Walmart. All the sites used have a full over the counter section and provide a similar experience for introductory community IPPE. The college has continued to foster relationships with many different types of community pharmacies not only in Houston, but also other cities in Texas.

The IPPE Institutional rotation 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 the Texas Medical Center, all of which serve different patient populations and disease states. The sites used are various hospitals throughout the greater Houston area and Rio Grande Valley. The hospital systems commonly used for the IPPE institutional 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.

Description of how the college or school establishes objectives and criteria to distinguish 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 IPPE Community final evaluation to the APPE Advanced Community final evaluation. For example, in the IPPE Community final evaluation, under the Foundational Knowledge section, the student is expected to "Understand the pharmacotherapy principles in patient care decisions." For the APPE Advanced Community Pharmacy 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 IPPE Institutional final evaluation to the APPE Advanced Hospital Pharmacy final evaluation. For example, in the Pharmacy Practice skills section, the IPPE Institutional final evaluation objective is to "Demonstrate the ability to collaborate with other interprofessional team members to achieve a shared goal and/or optimize care." However, in the APPE Advanced Hospital final evaluation, the statement reads "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 Rio Grande Valley (RGV) collaboration for both IPPE institutional and IPPE community, which has provided valuable opportunities to work with patients in an underserved and a 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 years with spiral integration and purposeful sequencing to maximize the IPPE experiences, (2) AACP Experiential Award during COVID pandemic, and (3) during COVID, 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.)*

    [Mapping with Appendix 2 2024]

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

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

☑ Advanced pharmacy practice experience student manual

    [APPE Manual_2023-24]

    [Ambulatory Care APPE Manual 2023-24]

    [APPE Manual 2023-2024 – Institutional APPEs]

☑ Advanced pharmacy practice experience preceptor manual

    [Preceptor Manual Final Version 2024]

☑ Advanced pharmacy practice experience student and preceptor assessment tools

    [TCEP_DRUG_INFORMATION_INQUIRY_EVALUATION_FORM]

    [TCEP_JOURNAL_CLUB_EVALUATION]

    [TCEP_PRESENTATION_EVALUATION_FORM]

    [TCEP_SOAP_NOTE_FORM]

    [WRITTEN_ASSIGNMENT_EVALUATON_FORM]

    [Advanced Community Midpoint and Final Evaluation]

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

    [Ambulatory Care Midpoint and Final Evaluation]

    [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

    [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

> **[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)

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

In the fourth professional year (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 the required APPEs are completed within the United States, and students do not receive any payment for APPEs. Each rotation requires students to document onsite rotation hours on CORE ELMS. All onsite rotation hours are confirmed with the preceptor, ensuring the hours are fulfilled for each rotation and the required four practice settings. The APPE experiences 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 which hopefully continue to forge their professional identity as a pharmacist and prepare students to be practice ready upon graduation.

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

The college is in the nation's fourth largest city, Houston, with an expansive healthcare infrastructure that includes the world's largest medical center, the Texas Medical Center (TMC). In addition to Houston and its surrounding cities, students can do rotations at affiliated sites in other cities in Texas, as well as facilities outside of Texas. The UHCOP Rio Grande Valley PharmD Satellite Program has afforded students the opportunity to do their rotations in a setting with predominantly underserved and Hispanic patients. Through these sites, students gain direct patient care experience in a variety of healthcare settings, and serve diverse patient populations (pediatrics, adults, 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 healthcare 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 and Memorial Hermann Children's) and a world-class cancer treatment center at UT MD Anderson. The faculty have practice sites at the 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 services mainly underserved and Hispanic populations. Other faculty practice at Houston Methodist Hospital focus on geriatric care, while the infectious disease 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, medication- and disease-related problems.

Description of how the college or school provides students with elective advanced practice pharmacy experiences

The college also 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 one-on-one 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, and one can be patient-focused or non-patient-focused. Patient-focused electives include institutional electives such solid organ transplant, cardiology, critical care, oncology, pediatrics, and psychiatry. These electives take advantage of the progressive pharmacy practice at sites in the Texas Medical Center such as UT MD Anderson Cancer Center, Ben Taub Hospital, and Memorial Hermann Healthcare System. The UH College of Pharmacy's award-winning Infectious Disease faculty offer electives in antimicrobial stewardship, infectious disease, 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 healthcare such as medication safety, pharmacy informatics, clinical pharmaceutical research (infectious diseases, hematology/oncology, 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. Of note, alumni who have completed industry fellowships have offered to precept students on industry rotations. Legal and regulatory rotations are also popular with students who were able to compete for rotations at the Centers for Disease Control, 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, specifically during core rotations and patient-focused electives, students are assigned to sites where they are integrated into the healthcare team. They are expected to round with the healthcare team in institutional settings and develop patient care plans along with other healthcare providers. Students in ambulatory care clinic rotations work directly with the other healthcare members in interviewing patients, making recommendations, and counseling patients on their medications. Of note, there are now four nearby medical schools (Baylor College of Medicine, UT McGovern Medical School, UTMB Galveston, and University of Houston Fertitta College of Medicine), which allow our students to collaborate in an interprofessional setting within the affiliated healthcare sites.

Description of how the goals and outcomes for each pharmacy practice experience are mapped to the activities listed in Appendix 2 of Standards 2016; Describe how student performance is assessed and documented.

APPE outcomes are mapped to the college's outcomes (PPSLO), CAPE outcomes, PPCP, EPAs, and activities listed in Appendix 2 [Mapping with Appendix 2]. These outcomes are measured via preceptor evaluations of students and via students' rotation assignment assessments. The preceptor evaluations of students occur both at the midpoint and end of rotation. The preceptor midpoint evaluation of the student is formative to allow students to obtain constructive feedback so they can improve 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 student considers proficiencies in foundational knowledge, pharmacy management, pharmacy practice skills, communication, and professionalism. Low score alerts from preceptor mid-point evaluations in CORE ELMS as well as the APPE Week 2 check-in have been essential tools for the 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 mid-point 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 10 patient care interventions on CORE ELMS. The assessments for the case presentation and journal clubs were developed by TCEP in collaboration with other Texas Colleges of Pharmacy. For elective rotations, assignments are tailored to the type of elective, specifically whether it is 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 healthcare 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 (case presentation, journal club, 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.

Description of any other notable achievements, innovations or 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, TX 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 (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. The 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 the Rio Grande Valley PharmD Satellite Program. Humana has preferentially provided managed care rotations and has given us access to an ambulatory care site focused on geriatric care. The Rio Grande Valley collaboration has allowed students to be immersed in a 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 recently graduated students. 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 pandemic despite sites cancelling rotations due to numerous reasons. The team was able to support students' concerns regarding COVID 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.

Interpretation of the data from the applicable AACP standardized survey questions

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.

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

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

[CV- Asst Dean of Student and Professional Affairs]

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

[Student Services Organization Chart 6.2024 Updated]

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

[2023-2024 PharmD Student Handbook 8.24.2023 v2]

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

[Summer Financial Aid Pharm23.pdf]

[Student Health Insurance Policy 2022-23.pdf]

[PharmD-prerequisites-rev09-2022.pdf]

[ACPE Complaint Policy- In Student Handbook.pdf]

[PharmD Academic Standing Requirements for Progression.2016.pdf]

[PharmD ACPE Complaints policy.6.25.21.pdf]

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

[2023-2024 PharmD Student Handbook 8.24.2023 v2]

Data Views and Standardized Tables:

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

[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.

[Orientation Schedule 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
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.

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

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 the OSPA includes the Assistant Dean of 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, the 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 PharmD Admissions and Progression and PharmD Student Affairs Committees. In addition, the 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 the results of the LASSI and strategies to set them up for learning success. Incoming pharmacy students also attend a mandatory four-day orientation overseen by the 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 a 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 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 the OSPA is the increased career advising for all students, P1-P4. 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 the P3 year, the college offers a residency bootcamp longitudinal program, hosted and taught by local residents in the Texas Medical Center. The faculty and staff of the Office of Experiential Programs also provide career pathway and residency guidance routinely during the P3 and P4 years. The concerted efforts of the 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 (PharmD/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 the 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 the 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 colleges PharmD 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 financial need-based.

Healthcare Access
The University of Houston Student Health Center & Campus Pharmacy, both located in the Health 2 building, serves the medical needs of students, faculty, and staff, and 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 (counseling and psychological services center), Justin Dart, Jr. Student Accessibility Center, The 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 PharmD Student Handbook. The college tracks student immunizations using the electronic learning management system, 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 Office of Experiential Programs (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. Students are informed during the new student orientation, in the PharmD Student Handbook, on each standardized course syllabus used in the curriculum, and on the college website 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 of 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. PharmD 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%.

Comments on 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 5 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 Office of Experiential Programs 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; 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. 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

[Weblink to Program Information on College Website]

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

[PharmD-acpe-Student Complaints Policy-6-25-21.pdf]

☑ 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

[2022-2023 UHCOP STANDING COMMITTEE STUDENT ROSTER]

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

[UHCOP-Code-of-Ethical-and-Professional-Conduct]

☑ Policies related to academic integrity

[UHCOP-Code-of-Ethical-and-Professional-Conduct]

[PharmD Academic Grievance Policy.4.29.2016]

[2023-2024-pharmd-student-handbook]

☑ Recruitment brochures

[Weblink to Prospective Students Recruitment Brochure]

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).

[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

[PPSLO Assessment Plan AY 21-21-v.3-8-22]

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 2023-2024 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 PharmD 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 2023-2024 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 the college of pharmacy and main university websites (https://uh.edu/pharmacy/_documents/acpe/pharmd-acpe-complaints-policy-6-25-21.pdf). The UHCOP Grievance Policy and Procedure, outlining students' rights to due process and appeals, is available on our website (PharmD Academic Grievance Policy.4.29.2016.pdf). Grievance concerns go to the PharmD Student Affairs Committee for review. Students are informed about both policies during their new student orientation and are provided with copies in the UHCOP 2023-2024 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, lifelong 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 (DSAC, 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. The 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 of the College. 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 mentor to a class 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. Deans regularly visit 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, n): 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. The Pharmacy Council President 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. A great example of this was 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 (example - lab start times being adjusted from 8AM to 9AM and biochemistry course 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 (example - microwave room, third refrigerator, college hall monitors). Moreover, the College's 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.

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

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

  [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)

  [UH-STC student-Coop Memorandum of Agreement_2023-EXAMPLE.pdf]

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

  [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)

  [Enrollment Data Statistics]

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

  [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

  [2022-2023 UHCOP Committees Roster 2.7.2023.pdf]

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

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

  [PharmD Transfer of Professional College Credits.8.5.2016]

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

   [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

   [MMI Rubric assessor.pdf]

   [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

   [Applications Admissions Enrollments for Past 3 Years UHCOP]

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

   [UHCOP Enrollment Data by year and gender AAMS2024]

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

   [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)

   [UHCOP PCAT Scores for last 3 years AAMS2024]

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

   [UHCOP GPA for last 3 years AAMS2024]

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

   [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)

   [PCAT Comparison AAMS 2018 to 2023]

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

[Total GPA Comparison AAMS]

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

[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

[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.

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Description of how specific requirements of the standards and guidelines for admissions and enrollment are met, including those for early admission agreements or policies

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 PharmD 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 2023-24 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 programs ("Co-op") programs, with early acceptance through Lamar University, Stephen F. Austin State University, and South Texas College. 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 [https://uh.edu/pharmacy/prospective-students/pharmd/co-ops/lamar-cooperative/], 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 the 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 PharmD 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 PharmD 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 PharmD 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 PharmD Admissions and Progressions Committee.

Description of how admission evaluations of students are documented and how records are maintained

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 PharmD 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 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 2017-2018 cycle as one of the tools to assess PharmD 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 (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.

Description of the college or school's 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 the Rio Grande 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 Rio Grande Valley to practice pharmacy and improve the quality of healthcare in the region. The College uses a customer relationship management system called "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 team have increased in size to help with recruiting quality applicants. UHCOP has still managed to maintain an adequate class size despite the decrease in applications to PharmD programs across the nation due to a variety of factors, including robust recruitment efforts.

Description of the methods used to assess verbal and written communication skills of applicants to the program

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 PharmD 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 interviews scenarios, with each scenario evaluated by a different faculty member. Attributes such as conflict resolution, communication skills, empathy, responsibility, accountability, ethical & 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.

Description of how enrollment is managed in alignment with available physical, financial, staff, faculty, practice site, preceptor, and administrative 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, the H2 building hosts eight enclosed small-group study rooms, enclosed and open quiet study spaces with carrels, a student lounge, a break room, and an event catering kitchen. The available classrooms, student areas, and labs have adequate capacity to fit PharmD class sizes of 125 students/year, with flexibility available to increase class size if warranted. H2 also houses the College Dean's office and administrative suite, the Admissions and Student Services Suite, the information technology (IT) department, the Office of Experiential Programs, and the College 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 – this information is 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 PharmD 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 [https://uh.edu/pharmacy/prospective-students/pharmd/frequently-asked-questions/pharmd-transfers/index.php#Pharm%20D.%20Transfers].

Description of how curricular outcomes data are correlated and related to 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

> **[PharmD Academic Grievance Policy.4.29.2016]**

> **[Early Intervention and Student Success Program]**

> **[PharmD Academic Standing Requirements for Progression.2016]**

> **[PharmD Final Course Grade Appeal Policy and Procedure.9.20.2016]**

> **[PharmD Missed Coursework Policy.9.20.2016]**

> **[PharmD Probation and Suspension.1.31.2017]**

> **[PharmD Professional Pharmacy Conference Scholarship Policy final]**

> **[PharmD Remediation Process.1.31.2017]**

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

> **[17 - Student Handbook Related to Progression Standard]**

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

Data Views and Standardized Tables:

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

> **[acpe-program-disclosure-2023december.pdf]**

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

> **[Analysis of Student Academic Performance Throughout the Program AAMS2024]**

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

> **[On-time Graduation Rates AAMS2024]**

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

> **[Total Attrition Rate AAMS2024]**

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

> **[Academic Dismissals AAMS2024]**

☑ AACP Standardized Survey: Faculty – Question 40

[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 **[17 - Student Handbook Related to Progression Standard.pdf]**. The student handbook is reviewed annually by Assistant Dean of 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.

Description of how student matriculation, progression, and graduation rates relate to admission and transfer variables.

The college has excellent graduation rates and 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 (AY 2019-2021) was conducted to identify variables predictive of progression issues. The analysis identified four predictive variables, admissions holistic score (MMI), overall GPA, pre-requisite 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 admissions holistic score (MMI), Math and Science GPA, and PCAT scores. Age and BS 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 the P1 year with a focus on identifying individuals who were admitted with lower interview variables than their peers and ensuring that these students are appropriately resourced.

Description of 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

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 year starts. They then meet with their PharmD advisor before their first semester begins to review their scores and discuss strategies for academic success based on their individualized results, and available resources. Beginning in their first semester and throughout school, students must meet with their PharmD 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 (the Counseling and Psychological

Service) or to the student accessibility center for testing accommodations. This early intervention system is likely 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.

Remediation Policy

The college's remediation policy permits students to petition for remediation of a "D" grade within a single semester **[PharmD Remediation Process.1.31.2017].** 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 an initial "I" (incomplete) grade assigned, and the final grade determined upon successful remediation completion.

Description of how academic probation, leaves of absence, dismissal, readmission, due process, and appeals rates affect progression at your program

Grade Appeal

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 $\geq 15\%$ class absences, the ADSPA is informed, and students should meet with course coordinators for extenuating circumstances. In case 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 of the College. 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

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

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

   [ACPE FacultyResourceReport UHCOP]

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

   [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)

   [List of Adjunct Faculty, with Academic Title]

☑ An analysis of teaching load of faculty members, including commitments outside the professional degree program.

☑ Evidence of faculty and staff capacity planning and 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)

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

   [Standard 18 FSQ 25 and 30]

☑   Table: Allocation of Faculty Effort (total for all faculty with ≥ 0.5FTE) [see example table at http://www.acpe-accredit.org/pdf/Excel%20Documents/AllocationFacultyEffort.xls]

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

Optional Documentation and Data

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

   [UHCOP ALFP Faculty]

   [UHCOP Cougar Chairs Leadership Academy]

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	✔	○	U
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 rational 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.

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

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 37 faculty, PPS department has 35 faculty, and the PHOP department has 11 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. 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 as a mechanism to enhance the communication of faculty expectations and strengthen career development of college faculty. This plan facilitates the goal formation and approval process between the faculty members and department chairs, requiring documentation of such as well as mid-year and end of year discussions to facilitate goal achievement.

In addition to the professional pharmacy curriculum, faculty teach in the PhD 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 PharmD 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 a one-on-one discussion with faculty members, input from course coordinators, review of student evaluations, and discussion with practice site leaders (if applicable). The teaching load of the PharmD faculty is located in the **[10C UHCOP Curriculum by faculty and credentials]** Master Course Faculty Assignments Table.

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 class during the P3 year. The law course is coordinated by a full-time faculty member (Tolleson) with a paid adjunct faculty (Heidi Bragg) that 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 [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 [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 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 EDCBO 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 2 or sometimes 3 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
Sixteen new faculty members have been hired to the PPTR department, the clinical teaching department of our PharmD program. These faculty hires have helped the college open a satellite campus in the Rio Grande Valley (RGV), have strengthened our skills-lab faculty, 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 Doctors Hospital at Renaissance in Edinburg, the UHCOP Rio Grande Valley (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 (ILMs) - 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 the 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 Scholarship of Teaching and Learning (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 invited presentations, and funding competitiveness.

Assistant Dean of Assessment. 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 healthcare 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

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

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

   [UH Non Tenure-Track Policy]

   [UH Promotion and Tenure Guidelines]

   [UH Provost's Faculty Annual Performance Review Policy]

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

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

   [UH Faculty Handbook Current]

☑ CVs of faculty and staff

Data Views and Standardized Tables:

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

☑ AACP Standardized Survey: Faculty – Questions 7, 13-24

   [Standard 19 FSQ 7, 13-24]

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

☑ Table: Distribution of Full-Time Pharmacy Faculty by Rank and Highest Degree Earned

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

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

☑ Table: 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.

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.

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

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 faculty organizational chart in Standard 18. 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. 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 faculties 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, 7 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, tips for effectively navigating the university structure, and 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 135 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 **[UHCOP Faculty Performance Plan and Semi-Annual Annual Review 2.1.2022]**. 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 Rio Grande Valley, 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, the college curriculum committee is co-chaired with a pharmacists and non-pharmacist, oral examinations during the therapeutics class in the P3 year 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. 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 to re-iterating the formal feedback status at our annual performance partnership review meetings.

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 Sustained Contribution to the Literature Award (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: 2022-2023 Team Excellence Recognition Award.

UH Top Grant Funding. For the past several years, all three UHCOP departments have been in the top 5 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 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

> **[CV_OEP Combined]**

☑ List of active preceptors (student placements within the past 3 years) with credentials and practice site

> **[Preceptor List 2022-2024 Final]**

☑ Number and percentage of all APPE precepted by non-pharmacists categorized by type of experience.

> **[APPEs precepted by non pharmacists (zero)]**

☑ Preceptor recruitment and training manuals and/or programs

> **[Preceptor Orientation Presentation]**

> **[UHCOP combined APPE Start of Rotation Email_Redacted]**

> **[Preceptor Manual Final Version 2024]**

> **[Preceptor Application Information]**

☑ Policies and procedures related to preceptor recruitment, orientation, development, performance review, promotion, and retention

> **[UH College of Pharmacy Preceptor CE Combined Agendas]**

> **[University of Houston - College of Pharmacy - Evaluation of Preceptor]**

> **[Preceptor Manual Final Version 2024]**

> **[IPPE Week 1 Check-In]**

> **[APPE Week 2 Check-In]**

☑ Examples of quality improvements made to improve student learning outcomes as a result of preceptor and site/facility assessment

> **[Student and OEP Interventions Quality Improvement Student Learning Outcomes Examples]**

> **[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).

> **[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.

[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, Amb Care APPEs, Institutional APPEs), and a program manager **[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 the 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, the Texas Medical Center, 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 **[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 **[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 [**UHCOP combined APPE Start of Rotation Email_Redacted**].

Experiential directors review student check-ins (Week 1 IPPE/Week 2 APPE) 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 [**University of Houston – College of Pharmacy – Evaluation of Preceptor.pdf**]. 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 Prescription Drug Misuse Education and Research (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 [**UH College of Pharmacy Preceptor CE Combined Agendas.pdf**]. The preceptor conference is supported by the college and 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 in various committees at the college including the Dean's Advisory Council, Curriculum Committee, Student Affairs, and the PharmD Admissions and Progressions Committee. Specifically related to experiential education, multiple preceptors serve as members on the PharmD 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 Health Centers – 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 for UHCOP student application to internships during their P1-P3 year, 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 9 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 PharmD 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 compromise future compliance **/or** • Factors exist that compromise	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	• 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**

	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.	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. 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

[2023 Health 2 Building Floor Plans] **Need to add further descriptions of use of space to this document?**

☑ 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

[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)

[2017 Health 2 Building Architectural Drawings Levels 1 through 9]

[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).

[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.

[HelbingCVMay24]

[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, the Student Health Center, UH Family Medicine Clinic, and the Campus Pharmacy.

The third floor serves as the hub of UHCOP with the main entrance, the Dean's Office, Student Services, Experiential Education, College Business operations, IT suite, and a large open area multi-use space (5600 *sqft*) 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 3rd 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 8 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 3rd and 4th floors of H2. The third floor has two very large lecture halls (each 4200 sqft; capacity 187), two interactive classrooms (that can be joined to create one large active learning classroom (3468 sqft, capacity 130)), one medium lecture hall (1857 sqft, capacity 72), and three smaller sized classrooms. Educational spaces on the 4th floor include the OSCE suites, the PCCA Pharmacy Care Lab, and the Sterile Products Lab.

Faculty offices and research labs are housed on floors 4-7 and 9 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 4th floor. The H2 5th, 6th, and 7th floors are occupied by the Department of Pharmacological and Pharmaceutical Sciences (PPS), where faculty offices reside and there is more than 35,000 *sqft* of research space. The 6th floor houses the college's research administrators and is shared with UH Population Health. The college has 365 *sqft* in the Animal Care Operations (ACO) facility located on the H1 5th floor. The 9th floor houses the colleges Prescription Drug Misuse Education and Research (PREMIER) Center including 7 offices (853.74 *sqft*) and a shared conference room. The UHCOP Rio Grande Valley (RGV) Satellite Program in Edinburg, Texas has a classroom and extended office space at Doctor's Hospital Renaissance (DHR) Health. This provides nearly 800 *sqft* 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 (6121*sqft)* and has 160 seats, 3 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. 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. These rooms are used for skills lab activities, lecturing, written assessments, student organization meetings, seminars, faculty and staff meetings, and other events requiring a large seating capacity. 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 2022-2023 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 8 overhead cabinets, 3 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 10 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, 2 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 3 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 1 of H2 has shared bathrooms, a loading dock, and shares a waste staging area with the H1 building. Floors 1-2 of H2 have a coffee shop, Health Sciences Library, a dentist office, a pharmacy, and a 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 the Rio Grande Valley campus. Floors 5-7 have shared kitchenettes, bathrooms, and conference rooms. Floor 5 has 7044 *sqft* of open lab concept with shared equipment space. Floor 6 has a shared kitchenette, bathrooms, and conference room with the Department of Population Health. Biomedical engineering and Medicine also have offices in H2. Floor 7 has 1453 *sqft* 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 Tier 1 urban research university. The college's state of the art research facility encompasses major portions of H2 totaling 35,775 *sqft* of lab and lab support space and an additional 365 *sqft* in H1. Included in this is more than 5000 *sqft* of labs designed for tissue culture and infectious disease work. Graduate students and research staff have over 2700 *sqft* 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 5 of H2 is continuous with that of the Animal Care Operations (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. 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 indicate 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.

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)

> **[University of Houston College of Pharmacy affiliationagreement_ogc-s-1998-21_revised03.05.2018 TEMPLATE]**

> **[K-23-H0413-025 Fully Executed_Agreement Only_Redacted]**

> **[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.)

> **[Experiential Practice Sites 2022-2024 Master List Final]**

☑ ACPE IPPE Capacity Chart (Template available for download)

> **[IPPECapacityChart - IPPEs 2023-24]**

☑ ACPE APPE Capacity Chart (Template available for download)

> **[UH College of Pharmacy APPECapacityChart]**

Optional Documentation and Data:

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

> **[EXPERIENTIAL SITE EVALUATION FORM - 2019-2020 rev 6-25-2019]**

> **[University of Houston - College of Pharmacy - Evaluation of Site]**

> **[Student and OEP Interventions Quality Improvement Student Learning Outcomes Examples]**

> **[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 the P1 year. Institutional IPPE experiential learning requires 160 hours and is completed in the summer of the P2 year. 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 [**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 **[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% suplus 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 7 APPE rotations that students complete in their P4 year, 4 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 Health-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 COVID19 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 Rio Grande Valley UHCOP satellite campus have led to development of new sites with diverse rotation experiences and patient populations served. The partnership with the Rio Grande Valley 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 **[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 used for Practice Experiences

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 **[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 3-year basis for community pharmacy rotation sites and a 3-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 **[EXPERIENTIAL SITE EVALUATION FORM - 2019-2020 rev 6-25-2019]** 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 the Texas Medical Center 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, 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 the Rio Grande Valley 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 their P2 and P3 year 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 PharmD Experiential Advisory Committee has recently worked to update the site visit form to further enhance the colleges 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)

      [Detailed Budget Plan]

☑ In-state and out-of-state tuition compared to peer schools

      [In-state Tuition Compared to Peer Schools 2019-2023]

      [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.

      [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.

      [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).

      [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

      [In-State Tuition Comparison 2019-23 AAMS]

☑ Out-of-state tuition for past five years compared to national data

      [Out-of-State Tuition Comparison 2019-23 AAMS]

☑ Grant funding for past five years compared to national data

[Grant Funding Comparison 2018-22 AAMS]

Optional Documentation and Data:

☑ In-state tuition for past five years, with peer school comparisons –

[In-state Tuition Compared to Peer Schools 2019-2023]

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

[Out-State Tuition Compared to Peer Schools 2019-2023]

☑ Total grant funding for past five years, with peer school comparisons

[Total Grant Funding Compared to Peer Schools 2018-2022]

☑ NIH funding for past five years, with peer school comparisons

[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.

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 or school ensures that student enrollment is commensurate with resources. Enrollment is planned and managed in accordance with resource capabilities, including tuition and professional fees. Tuition and professional fees

have been returned to the College at the rate of 67% and 100%, respectively. 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 funding has remained steady in recent years. In FY 2017 – 2023 research grants and contracts 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.

Notable Achievements
A special line item from the State of Texas (Texas Higher Education Coordinating Board-THECB) had continued over FY 2017 - 2023, with the current amount of $4.5 million/year, for 2 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 II, 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, Qtrap 5500 and Qtrap 7500 LCMS systems, an IVIS CT system for 3D in vivo imaging, two ThermoFisher high resolution LCMS systems 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)

    [PPSLO 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)

☑ Examples of assessment and documentation of student performance and the attainment of desired core knowledge, skills and values

☑ 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)

    [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)

    [UHCOP MPJE 2021-2023]

☑ Outcome assessment data summarizing students' overall achievement of educational outcomes/professional competencies in the pre-APPE and APPE curriculum

    [PPSLO 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

☑ AACP Standardized Survey: Alumni – Questions 14-32

☑ 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

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.

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

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. **[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. **[PPSLO Assessment Plan] [PPSLO Mapping Document].**

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. **[PPSLO years 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. **[Course Inventory]** 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). [Post-course review from 10] Any changes to courses are formally submitted to the curriculum committee before the semester of delivery per the curriculum committee course change procedures. **[Protocol for changes from std10]**

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 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. **[PCOA data]**

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 (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. **[eportfolio process and P1-P3 uploads]**

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. [ePortfolio rubrics] 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 the Gastrointestinal and Endocrine Modules led to increase 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 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

	factors and will bring the program into full 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

☑ Examples of instruments used in assessment and evaluation (of structure and process)

> **[2020-2021 UHCOP Programmatic Assessment Plan]**
> **[2021-2022 UHCOP Programmatic Assessment Plan]**
> **[2022-2023 UHCOP Programmatic Assessment Plan]**

Complete Data Set from the AACP Standardized Surveys:

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

☑ Graduating Student Survey Summary Report (all questions)

☑ Faculty Survey Summary Report (all questions)

☑ Preceptor Survey Summary Report (all questions)

☑ Alumni Survey Summary Report (all questions)

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.

☑ 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

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. **[Programmatic Assessment Table]**

The Programmatic Assessment Plan is reviewed annually by the Assessment Committee based upon the yearly assessment cycle. **[Assessment Calendar]** 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. **[Admin Evaluation example]**

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. **[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 individualize annual goals. **[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. **[course/faculty evaluation document]**

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. **[Programmatic Plan 2022-2023]**

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. **[Programmatic Plan 2022 – 2023]** Parallel to the PAP, our overall curriculum undergoes continuous assessment through the Professional Program Student Learning Objective (PPSLO) Assessment Plan. **[Figure UHCOP Assessment Map]** 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). **[PPSLO Assessment Plan table]** 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. **[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 **[Relationship AACP Data to UHCOP Assessment Plans]**

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☑ **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]