



ACCREDITATION COUNCIL FOR PHARMACY EDUCATION

**POLICIES AND PROCEDURES FOR
ACPE ACCREDITATION OF PROFESSIONAL DEGREE PROGRAMS**

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Definitions

The definitions provided below define each term as it is used in the ACPE Policies and Procedures and as it applies to ACPE business.

Accredited: the accreditation status granted to a Doctor of Pharmacy program that has successfully achieved both preaccreditation statuses, produced at least one class of graduates, and that has demonstrated continued compliance with all accreditation standards.

Accredited with Probation: the accreditation status granted to a Doctor of Pharmacy program that has been identified by the Board as being partially or non-compliant with one or more accreditation standard and that has not made adequate progress towards bringing the standard(s) into compliance.

Accreditation: the status of public recognition that ACPE grants to a Doctor of Pharmacy program that meets ACPE's requirements for such recognition; includes Precandidate, Candidate, and Accredited, and Accredited with Probation.

ACPE: the acronym for the Accreditation Council for Pharmacy Education; refers to the organization as a whole.

Administrative warning: action taken for failure to meet administrative requirements set forth by ACPE (see paragraph 6.4).

Adverse accreditation action: accredited with probation status, or denial or withdrawal of a program's accreditation by ACPE.

A&R: Action and Recommendations; report sent to a college or school of pharmacy detailing the final accreditation actions taken by the ACPE Board of Directors.

Board: refers to the ACPE Board of Directors.

Candidate: the second of two preaccreditation statuses; granted by ACPE to a new Doctor of Pharmacy program previously awarded Precandidate status and that has students enrolled but that has not yet had a graduating class.

CHEA: the acronym for the Council for Higher Education Accreditation.

College or School: the academic unit housing the Doctor of Pharmacy program.

Compliance/Compliant: no factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.

Compliant with Monitoring: no factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance; OR factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance; the plan has been fully implemented; sufficient evidence already exists that the plan is addressing the factors and will bring the program into full compliance.

ETR: Evaluation Team Report; the written report generated by the on-site evaluation team that assesses compliance with each of the accreditation standards as observed during the on-site evaluation. The ETR does not represent a final accreditation action but rather is an evaluative step in the review process.

Guidelines: guidance accompanying each of the accreditation standards to illustrate ways and means of complying with the standard.

Institution: the regularly incorporated and legally empowered postsecondary educational institution within which a college or school of pharmacy operates.

Non-compliant/non-compliance: factors exist that compromise current compliance; and 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.

Partially compliant/partial 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.

Preaccreditation: the status of public recognition that ACPE grants to a new Doctor of Pharmacy program for a limited period of time that signifies that the program is progressing towards accreditation and is likely to attain accreditation before the expiration of that limited time period. The time period allowed preaccreditation (Precandidate and Candidate Status combined) by ACPE is five years.

Precandidate: the first of two preaccreditation Statuses; granted to a new Doctor of Pharmacy program that meets all eligibility criteria but that has no students enrolled.

Program: a postsecondary educational program offered by an institution of higher education that leads to the awarding of the Doctor of Pharmacy degree.

Secretary: refers to the Secretary of the United States Department of Education.

Staff: refers to the ACPE staff.

Standards: refers to the ACPE Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree.

Substantive Change: see paragraph 12

Teach-out plan: A written plan developed by a program to provide equitable treatment of all students if the program should cease to operate or the program's accreditation is withdrawn before all enrolled students have completed their course of study.

Teach-out agreement: a written agreement between colleges or schools of pharmacy that provides for the equitable treatment of students and a reasonable opportunity for students to complete the Doctor of Pharmacy program if an institution, a college or school of pharmacy, or a college or school location that provides one hundred percent of the Doctor of Pharmacy program ceases to operate before all students have completed the program.

USDE: the acronym for the United States Department of Education

1. Scope of Accreditation

The Accreditation Council for Pharmacy Education (ACPE) accredits the professional degree program leading to the Doctor of Pharmacy degree in the United States and in other countries. Evaluation and accreditation of the professional degree program (hereinafter “program(s)”) is in accord with Standards and Guidelines for the Professional Degree Program Leading to the Doctor of Pharmacy (PharmD) Degree (hereinafter “the Standards”). Information concerning specific programs may be obtained by corresponding directly with the programs listed in the ACPE Directory of Preaccredited and Accredited Professional Degree Programs of Colleges and Schools of Pharmacy, available at www.acpe-accredit.org.

2. External Recognition of ACPE

ACPE is recognized for the accreditation and preaccreditation of professional degree programs by the Secretary of Education, United States Department of Education (USDE). ACPE recognition by the USDE is based upon compliance with USDE criteria and is subject to periodic review for continued compliance. ACPE accreditation serves to establish eligibility for participation in a variety of federally funded programs, not including eligibility for Title IV Programs, Higher Education Act, 1965, as amended. ACPE is also recognized by the Council for Higher Education Accreditation (CHEA) for meeting its recognition criteria.

3. Accreditation Standards and Guidelines

ACPE accreditation standards reflect professional and educational qualities identified by ACPE through profession-wide dialogue and feedback as essential to the program leading to the Doctor of Pharmacy degree (PharmD). Based upon the several evaluative steps in the accreditation process, the ACPE Board of Directors (hereinafter “the Board”) determines compliance with the standards, likelihood of continued compliance with such standards, and the eligibility of the program to be accredited. Guidelines are a derivative of a particular standard and are provided for guidance and/or interpretation of the standard’s intent and purpose. Guidelines are also presented to illustrate ways and means of complying with the standards. Moreover, guidelines assist the program in demonstrating compliance with the standards and assist evaluation teams in the application of the standards to such programs. The guidelines also assist the Board in determining compliance with the standards (see “Addendum #1 Clarification of Current Standards”).

4. Review, Revision, and Establishment of Standards

The first ACPE accreditation standards were published in 1937 and have been revised periodically, approximately every six to eight years, in keeping with changes in pharmacy education and pharmacy practice.

ACPE maintains a systematic program of review that assures that its standards are appropriate to the educational preparedness of the students and graduates and are adequate to evaluate the quality of professional education provided by the program. The systematic program of review is comprehensive and involves the community of interest, allows for input by all relevant stakeholders, and includes examination of each standard and guideline, as well as the standards as a whole. The review and revision process for guidelines may be separate from that of the standards. The standards will likely be reviewed approximately every six to eight years, while the guidelines can be refined and improved as needed based on stakeholder feedback and experience. If at any point it is determined by ACPE that a change needs to be made to a standard(s) action for change is initiated within 12 months. Completion of the revision process, so initiated, will occur within a reasonable period of time and as soon as feasible, based upon the magnitude of the change necessitated.

Action for establishing or revising a standard(s) requires that advance public notice of the revisions proposed by ACPE be provided to all relevant stakeholders. A draft of the proposed revisions is posted on the ACPE web site (www.acpe-accredit.org) and is made available to the general public and to relevant stakeholders with an invitation to comment. Relevant stakeholders include: the deans, institutional administrative and executive officers, faculties, and students of the programs; state boards of pharmacy; educational and professional organizations and societies affected by the accreditation process in pharmacy; the leaders of national pharmacy student organizations; and the chief executive officers of institutional (regional) and other programmatic accrediting agencies. The proposed revisions are also provided to USDE. Each comment on the proposed revisions received within the published timeframe for the comment period is taken into account. Subsequently, revisions are finalized and adopted by the Board. The revised standards become effective on a date designated by ACPE based upon the magnitude of the change necessitated.

5. Eligibility for ACPE Preaccreditation and Accreditation

In order to be eligible for preaccreditation or accreditation, the Doctor of Pharmacy program must be part of an independent college or school of pharmacy or a college or school of pharmacy within a university that is regularly incorporated and is a legally empowered postsecondary educational institution. ACPE accreditation standards require

a college or school to be an autonomous organizational unit, and the administrative structure of the college or school must provide for a dean, who serves as the chief administrative and academic officer. Evaluation for purposes of initial or renewed preaccreditation or accreditation by ACPE requires an invitation by the chief executive officer or designate of the institution. ACPE is prohibited from granting initial or renewed preaccreditation or accreditation to any program offered by an institution subject to the following: (1) a pending or final action brought by a State agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the state; (2) a decision by a recognized regional or national accrediting agency to deny the institution accreditation or preaccreditation; (3) a pending or final action brought by a recognized regional or national accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or preaccreditation; or (4) probation or an equivalent status imposed by a recognized agency. The agency may grant accreditation or preaccreditation to an institution or program described in the paragraph above in this section only if it provides to the Secretary, within 30 days of its action, a thorough and reasonable explanation, consistent with its standards, why the action of the other body does not preclude the agency's grant of accreditation or preaccreditation.

6. Types of Accreditation Status and Notification of Accrediting Decisions

6.1 Preaccreditation: A newly instituted Doctor of Pharmacy program must be granted each of the two Preaccreditation statuses at the appropriate stage of its development. The standards are the same as those employed for accredited status; however, Preaccreditation involves planning in accord with the standards and provision of reasonable assurances for a quality outcome. A new program must achieve Precandidate Status prior to beginning instruction of students.

6.1.1 Precandidate: A newly instituted program that has no students enrolled but that meets the eligibility criteria (see "Eligibility for ACPE Accreditation or Preaccreditation") for accreditation may be granted Precandidate Status. The granting of Precandidate Status indicates that a program's planning for the Doctor of Pharmacy program has taken into account the standards and guidelines and suggests reasonable assurances of moving to the next step, that of Candidate Status. Granting of Precandidate Status brings no rights or privileges of Accredited Status. Public disclosure by the program of the terms and conditions of Precandidate status is required (see paragraph 7, "Reference to Accreditation").

6.1.2 Candidate: Once students have enrolled in a new program that is currently recognized by ACPE with Precandidate Status, such program may be

granted Candidate Status by ACPE. The granting of Candidate Status denotes a developmental program that is expected to mature in accordance with stated plans by the time the first class has graduated. Granting of Candidate Status brings rights and privileges of Accredited status. Public disclosure by the program of the terms and conditions of Candidate Status is required (see paragraph 7, "Reference to Accreditation").

6.2 Accredited: Initial or Continued: A program is granted initial or continued accreditation if it has been demonstrated to the satisfaction of Board that the program complies with the standards, and there is reasonable assurance of the continued compliance with standards. Accredited programs have the ongoing obligation to continually demonstrate compliance with the standards. Public disclosure by the program of accreditation is required (see "Reference to Accreditation").

6.3 Accredited with Probation: A program that has been determined by the Board to be partially or non-compliant with a standard or standards may be given the accreditation status of Accredited with Probation at any time during the period of a program's partial or non-compliance. Graduates of a program with a status of Accredited with Probation will be deemed to have graduated from an accredited program. Probation is an adverse accreditation action. Public disclosure by the program of Accredited with Probation, along with the standard or standards found to be partially or non-compliant, is required (see paragraph 7, "Reference to Accreditation").

6.4 Administrative Warning: Administrative Warning is an accreditation status assigned administratively when a program does not comply with administrative requirements for maintaining preaccreditation or accreditation. These requirements may include: (1) failure to pay ACPE any invoiced fees within the time limitation indicated on the invoice; (2) failure to submit interim reporting or annual monitoring requirements by the established deadline; (3) failure to submit the self-study no later than six weeks prior to a scheduled visit; (4) failure to schedule an on-site evaluation at or near the time established by ACPE; (5) failure to submit timely notification of a substantive change (see paragraph 12, "Substantive Change"); and (6) inappropriate use of the ACPE logo.

If staff determines that a program has failed to meet its administrative obligations as listed above, the program will be notified in writing of each delinquency and given ten (10) days to fulfill all outstanding requirements, after which continued failure to comply will result in the imposition of Administrative Warning. Administrative Warning will be removed once all administrative requirements have been met. Failure to cure any such delinquency within the designated time period will result in a review for Board action at the next regularly scheduled Board meeting and may result in the program being placed on probation (see paragraph 6.3, "Accredited: Probation") or subjected to an adverse action (see paragraph 13, "Adverse Accreditation Actions: Denial or Withdrawal of

Accreditation”).

Administrative Warning is an administrative classification and is not subject to reconsideration or appeal. During a period of Administrative Warning, a program continues to be recognized as being preaccredited or accredited according to the last status decision and is maintained in the Directory listing of preaccredited and accredited programs. In addition, the program will be listed as being on Administrative Warning in all published documents that specify accreditation status.

7. Reference to Accreditation

The preaccreditation or accreditation status of a program and other information as specified below must be prominently disclosed by the program in its promotional and descriptive materials, such as its web site, catalog, or bulletin. References must accurately reflect the designation indicated in the current Directory of Preaccredited and Accredited Doctor of Pharmacy Programs of Colleges and Schools of Pharmacy, specifically Precandidate, Candidate, or Accredited, as the case may be. References to preaccreditation and accreditation are regularly monitored by ACPE to ensure accuracy; any inaccurate or misleading statements concerning the preaccreditation or accreditation status of a program must be corrected immediately. Any time a program’s preaccreditation or accreditation status changes, written notification of such actions shall be made to the U.S. Secretary of Education, the appropriate state licensing or authorizing agency, the appropriate regional and/or other accrediting agencies, and the public within 30 days. Public notification includes presentation on the ACPE web site.

7.1 Application: References to the effect that a program has applied or is in the process of applying to ACPE for accreditation may only be made by the program once an application has been formally submitted, fees paid, and the receipt thereof has been acknowledged in writing by ACPE. Applicant programs must state only the following in reference to the program’s accreditation status: “Name of Institution’s Doctor of Pharmacy program has applied for accreditation status by the Accreditation Council for Pharmacy Education, 135 South LaSalle Street, Suite 4100, Chicago, IL 60603, 312/644-3575; FAX 312/664-4652, web site www.acpe-accredit.org. For an explanation of the ACPE accreditation process, consult the Office of the Dean or ACPE (www.acpe-accredit.org).”

7.2 Authorization of on-site evaluation for consideration of Precandidate Status: Authorization of an on-site evaluation for consideration of Precandidate Status does not carry with it nor imply an accreditation status. The on-site evaluation is authorized solely for purposes of gathering additional information to assist the Board in evaluating and assessing the applicant program’s compliance with the standards.

Once an on-site evaluation has been authorized by the Board, reference to that effect may be made by the program. Any such reference must state only the following: “Name of Institution’s Doctor of Pharmacy program has been authorized by the Board of Directors for an on-site evaluation to be scheduled during spring/fall YEAR for consideration of Precandidate Status. Authorization of an on-site evaluation for consideration of Precandidate Status does not carry with it nor imply an accreditation status. The on-site evaluation is authorized solely for purposes of gathering additional information in furtherance of an accreditation decision. The Board will consider Precandidate Status at the regularly scheduled meeting, which occur in January and June of each year, following the on-site evaluation. For an explanation of the ACPE accreditation process, consult the Office of the Dean or the Accreditation Council for Pharmacy Education, 135 South LaSalle Street, Suite 4100, Chicago, IL 60603, 312-644-3575; FAX 312-664-4652; web site www.acpe-accredit.org.”

7.3 Preaccreditation: References to a program that has been granted a preaccreditation status (Precandidate or Candidate) must state the only following in reference to the program’s accreditation status: “Name of Institution’s Doctor of Pharmacy program has been granted Precandidate/Candidate Status by the Accreditation Council for Pharmacy Education, 135 South LaSalle Street, Suite 4100, Chicago, IL 60603, 312/644-3575; FAX 312/664-4652, web site www.acpe-accredit.org.” An explanation of the respective preaccreditation status, which will be provided by ACPE, must also be provided

7.4 Accredited: References to a program that is accredited must state only the following: “Name of Institution’s Doctor of Pharmacy program is accredited by the Accreditation Council for Pharmacy Education, 135 South LaSalle Street, Suite 4100, Chicago, IL 60603, 312/664-3575; FAX 312/664-4652, web site www.acpe-accredit.org.”

7.5 Accredited with Probation: References to a program that has been the status of Accredited with Probation must state the following: “Name of Institution’s Doctor of Pharmacy program has given the status of Accredited with Probation by the Accreditation Council for Pharmacy Education, 135 South LaSalle Street, Suite 4100, Chicago, IL 60603, 312/664-3575; FAX, 312/664-4652, web site www.acpe-accredit.org, for partial or non-compliance with Standard(s): PROVIDE STANDARDS. For an explanation of the program’s Accredited with Probation status, consult the Office of the Dean or ACPE.”

7.6 Denial or Withdrawal of Accreditation: References to a program that has had its accreditation denied or withdrawn must state the following: “Name of Institution’s Doctor of Pharmacy program has been denied accreditation OR has had accreditation withdrawn by the Accreditation Council for Pharmacy Education, 135 South LaSalle Street, Suite 4100, Chicago, IL 60603, 312/664-3575; FAX 312/664-4652, web site

www.acpe-accredit.org, for partial or non-compliance with Standard(s): PROVIDE STANDARDS. For an explanation of the denial/withdrawal of the program's accreditation status, consult the Office of the Dean or ACPE.”

8. Disclosure of Program Information

8.1 Directory of Preaccredited and Accredited Professional Programs: ACPE publishes the Directory of Preaccredited and Accredited Doctor of Pharmacy Programs of Colleges and Schools of Pharmacy (“Directory”) on its web site. The current preaccreditation or accreditation status and accreditation history are indicated for each program. In addition, the standards found to be partially or non-compliant during the most recent programmatic review by the ACPE board is presented. The Directory presents the name, address (mail and web site), telephone, and fax numbers of the dean of the college or school offering the professional program.

8.2 Report of the Proceedings: Within thirty (30) days following each meeting of the Board, ACPE will publish on its web site (www.acpe-accredit.org) the Report of the Proceedings, which will provide information regarding actions taken by the Board as well as a list of programs with upcoming scheduled reviews. The report will state the accredited actions taken and the accreditation term awarded to each program considered at the meeting and any standard(s) found to be partially compliant or non-compliant. The Report will also be provided to the Secretary and to other relevant stakeholders.

8.3 Sharing of Information with Other Agencies: ACPE shares information through public documents, special notices, or upon request regarding the preaccreditation or accreditation status of the programs it accredits, including information regarding any adverse actions or the voluntary withdrawal of a program's preaccreditation or accreditation, with institutional and other appropriate recognized accrediting and state agencies in conformance with applicable laws and ACPE policies.

8.4 Policy on Program Disclosure of Specific Information: A program accredited by ACPE is required to post on its website the following information:

- The on-time graduation rate for the most recent graduating class in the single degree pathway, i.e., the percentage of a class cohort completing the curriculum in the specified timeframe (3 calendar or 4 academic years);
- The most recent year's NAPLEX® results for first-time takers as found on the NAPB Website; and
- A measure of student achievement for the most recent graduating class as determined by the institution or its pharmacy program. Examples include, but certainly are not limited to: the number of students in a class cohort passing a

required “end-of-didactic” high-stakes examination before advancing to the Advanced Pharmacy Practice Experiences if such is required by the program; the number of graduates in a class cohort entering residencies or graduate school; or the number of graduates in a class cohort employed in the profession of pharmacy within the state during the first year after graduation.

9. Procedures for Achievement and Maintenance of Accreditation

9.1 Preaccreditation:

A college or school seeking accreditation for a Doctor of Pharmacy program must submit a written application to ACPE. Written instructions regarding format, length, content, and timeline shall be made available by ACPE.

9.1.1 Precandidate: A college or school that satisfies eligibility requirements (see paragraph 5, “Eligibility for ACPE Accreditation or Preaccreditation”) may apply for Precandidate Status for the Doctor of Pharmacy program by submitting an application supplied by ACPE and a self-study of the proposed program. The application should be organized by standard and present plans by which compliance with the standards will be assured. An invitation to evaluate the program for purposes of granting Precandidate Status is required from the chief executive officer of the institution. Upon submission of the application/self-study, ACPE staff will provide an initial review for purposes of eligibility for accreditation and may provide comments for the consideration of the college or school. If the Board review of the applicant's application/self-study and other materials finds that they are incomplete or do not otherwise provide sufficient evidence that suggests that planning has taken into account standards and guidelines, the program will be advised to defer its application and to resubmit an appropriately revised application. If Board review of the application/self-study and other materials submitted suggests that planning has adequately taken the standards and guidelines into account, an on-site evaluation will be authorized and scheduled in accord with standard evaluation and operational procedures. The team report from the on-site evaluation, the original application and self-study, and any updated information provided by the program will be considered by the Board, and Precandidate Status will be granted or denied. New programs denied Precandidate Status will have one opportunity for reevaluation of the program's readiness for Precandidate Status within the next two consecutive Board meetings at which accreditation actions are taken (January and June meetings). Reevaluation shall include at a minimum an updated application, a comprehensive on-site evaluation, and the payment of all applicable fees. Failure to attain Precandidate Status within this period will require reapplication in

its entirety, including payment of all applicable fees.

9.1.2 Candidate: A program currently maintaining Precandidate Status and that has enrolled its first class may be considered for Candidate Status. An on-site evaluation will be authorized and scheduled in accord with ACPE standard evaluation and operational procedures. The program will be evaluated taking into account that portion of the program in operation, as well as plans for the remainder of the program. The Board may grant or deny Candidate Status based on the degree of the programs development towards compliance with the standards and guidelines. Initial Candidate Status may be awarded for up to a two-year term. However, the Board reserves the right to award Candidate Status on a term less than a two-year term.

9.1.3 Terms for Preaccreditation: Preaccreditation Status is awarded in accord with specified terms and conditions, involving monitoring provisions that include on-site evaluations. The Preaccreditation Status (the combination of Precandidate and Candidate Status) of a program shall be limited to an aggregate of no more than five years.

9.2 Initial and Continued Accreditation

9.2.1 Initial Accreditation: After graduation of its first class, a Doctor of Pharmacy program currently maintaining a Preaccreditation Status shall be considered for initial Accredited Status in accord with terms set forth in the documents detailing the Preaccreditation action taken by the Board.

9.2.2 Continued Accreditation: The procedures for evaluation for purposes of continuing Accredited Status are determined by the Board. ACPE will inform the chief executive officer of the institution and the dean of the program of the approach of a period during which re-evaluation would normally be conducted, as determined during the previous evaluation of the program, presented in the last Accreditation Action and Recommendation report, and published on the ACPE web site. The customary on-site review cycle is eight years. The exact dates of the on-site evaluation are established in consultation with the dean. Instructions concerning the details of the evaluation, the materials required (e.g., self-study), and the evaluative procedures employed will be made available by ACPE.

ACPE reserves the right to review programs for purposes of accreditation in a cycle of less than eight years. Shorter review cycles are designed to monitor progress on specified issues; however, the program retains Accredited Status. Such reviews may be based upon a written report of progress from the program,

an on-site evaluation, or other method of review as deemed appropriate. An on-site evaluation requires a self-study in accord with standard evaluation and operational procedures. Modifications to the review cycle may be made for ACPE administrative reasons, and ACPE will also consider requests from a program for an alteration in the review cycle; however, the review cycle will not extend beyond eight years without due cause.

Failure of a program to cooperate in any part of the accreditation review process after due notice of the scheduled review has been given may constitute grounds for an adverse accreditation action by the Board.

9.3 Accredited with Probation: In the event that the Board determines a program is in partial or non-compliance with a standard or standards, the program will be notified in writing of its partial or non-compliance and may be given the accreditation status of Accredited with Probation. Pursuant to USDE regulations with which ACPE must comply, a program in partial or non-compliance with any ACPE standard or standards is given a period not to exceed two (2) years to bring all standards into compliance.

In the event that a program is placed on probation, such probationary status and the accreditation standards found to be partially or non-compliant will be published in the Directory on the web site. Any response of the program to the accreditation action should be presented in advance of the next meeting at which the program is scheduled for consideration. The chief executive officer of the institution or a designate, and the dean of the program are invited to personally attend this subsequent Board meeting and present comments.

Written notification of probationary action shall be made to the Secretary, the appropriate state licensing or authorizing agency, appropriate regional and/or other accrediting agencies, and the public at the same time the program is notified of the probationary action, but no later than thirty (30) days after the decision is made. Public notification includes presentation on the ACPE web site.

Any program with the status of Accredited with Probation will, in addition to any other interim reports or on-site evaluations, be required to submit to ACPE a Teach-Out Plan that can be implemented in a subsequent withdrawal of accreditation. Such a plan must address the needs of the program's currently enrolled students through their graduation (see paragraph 16.1 Teach-Out Plans)

9.3.1 Notification of Probationary Status: Notification of a decision by the Board to place a program on probation shall be delivered electronically to the chief executive officer of the institution and to the dean of the program affected

with a request for written confirmation of receipt. Such notification shall provide a statement of the reasons for the decision and a request for the program to make comment on the probation that will be made available to USDE, the appropriate state licensing or authorizing agency, the appropriate regional and/or other accrediting agencies, and to the public within 60 days as detailed in the following paragraph of this section.

Within thirty (30) days of a decision to place a program on probation and at the same time the program is notified of the action, written notification shall be made to the institution, to the USDE, the appropriate state licensing or authorizing agency, the appropriate regional and/or other accrediting agencies, and to the public as required by USDE. Public notification includes presentation on the ACPE web site (<http://www.acpe-accredit.org/>) within 24 hours of its notice to the program. A brief statement summarizing the reasons for placing a program on probation, and any comments from the affected institution/program shall be made available to the USDE, the appropriate state licensing or authorizing agency, the appropriate regional and/or other accrediting agencies, and to the public via presentation on the ACPE web site (<http://www.acpe-accredit.org/>) not later than 60 days after such final action.

- 9.4 Alterations to the Established Accreditation Review Procedures:** Under circumstances as determined by ACPE that prohibit ACPE from conducting a scheduled on-site evaluation of a program for purposes of accreditation, ACPE, in cooperation with the program, shall identify and agree to an alternative venue or format for conducting the evaluation in a timely manner. Should the circumstances change after an alternative evaluation has occurred, ACPE will conduct a comprehensive on-site evaluation as soon as possible. A program for which ACPE has been prevented from conducting a comprehensive on-site evaluation within a sixteen-year period (i.e., that span of two customary eight-year accreditation cycles) will have its accreditation withdrawn, regardless of extenuating circumstances. Should accreditation be withdrawn as per the terms of this policy, ACPE and the program will work together to identify appropriate opportunities for enrolled students to complete their course of study and allows their graduation from an ACPE- accredited Doctor of Pharmacy program.

The chief executive officer of the institution may withdraw from preaccreditation or accreditation status at any time through the withdrawal procedures outlined in paragraph 13 of this manual.

10. Conflict of Interest Policy

Due to the sensitivity of its activities, ACPE employs a conflict of interest policy, applicable to ACPE Board members, evaluation team members, professional staff, consultants, and other representatives participating in or observing the program accreditation process. Conflict of Interest statements are signed yearly by Board members and staff, as well as prior to each visit or meeting by evaluation team members, consultants, and other representatives participating in or observing the program accreditation process. Copies of the signed conflict of interest statements are available on request. A copy of the conflict of interest template is found in Addendum 8: Conflict of Interest Template.

When Board members are making any presentation in their individual capacity on a subject directly or indirectly related to ACPE activities, the following statement should be incorporated into materials and oral comments:

Disclaimer:

This presentation represents my personal views and opinions with regard to the subject matter at hand. I am not making this presentation in my capacity as a member of the Board of Directors of the Accreditation Council for Pharmacy Education (ACPE). The information contained herein has not been reviewed by, nor is it endorsed by, ACPE.

For further information regarding ACPE, please refer to the web site located at www.acpe-accredit.org.

11. Evaluation and Operational Procedures

11.1 Self-Study: For purposes of accreditation, submission of a program self-study and completion of prescribed administrative summaries are required. The self-study process should be in-depth and broadly based, involving a representative portion of the program's administrative leaders, faculty, professional staff, students, alumni, practitioners, governing body, and other appropriate stakeholders. The self-study should include: (i) required documentation and data as specified by ACPE, (ii) a qualitative and quantitative assessment of the strengths and limitations of the program, (iii) qualitative and quantitative information on both faculty and student achievements, and (iv) provide evidence of outcomes that demonstrate the program's successes in attaining its mission and goals, including success in student learning. The self-study should (i) provide program description and analysis, (ii) present findings and conclusions, (iii) appraise strengths and weaknesses, and where deficiencies exist, (iv) outline

plans for improvement, with appropriate implementation strategies and timelines, and (v) provide the program's self-assessment of compliance with the standards. As an integral component of its accreditation review, ACPE conducts its own analyses and evaluations of the self-study and other documentation provided. The self-study should serve as a point of reference for the institution's future planning.

To ensure adequate evaluation of educational quality and to effectively present efforts to improve quality, ACPE requires programs to submit either a paper self-study directly to ACPE using the Self-Assessment Instrument for the Professional Degree Program of Colleges and Schools of Pharmacy (the "Rubric") as a guide or to submit an electronic self-study through the AACP Assessment and Accreditation Management System (AAMS). The Rubric is used by evaluation teams during on-site visits to determine the team's evaluation of the program's compliance with the standards. The final determination of a program's level of compliance with standards will be made by the Board.

All programs being evaluated by ACPE are required to submit data (raw data and the analysis thereof) within each section of their self-study reports obtained through the administration of the surveys developed by the American Association of College of Pharmacy (AACP) with the support of ACPE for students, faculty, preceptors, and alumni.

Members of the ACPE staff conduct workshops for representatives of those programs scheduled for an accreditation review. The purpose of the workshop is to orient and assist the programs in the process of the self-study, as well as to other aspects of the evaluation procedure, such as use of the Rubric as the basis for evaluation. Alternatively, a program may request assistance from the ACPE staff by scheduling a conference at the ACPE office (no fee), or ACPE staff may meet with the self-study committee at the college or school (with a consultative fee). The staff consultation provides opportunity to assist with the self-study organization and to offer clarifying and other information needed by the program.

11.2 Written Third Party Comments: Prior to the on-site evaluation, third parties will be provided with an opportunity to comment concerning qualifications for accreditation. Such notification of a comment period shall be posted on the ACPE web site, and it is incumbent on interested parties to monitor the web site in order to comply with the comment period.

11.3 On-Site Evaluation: Prior to the on-site evaluation, the self-study and other pertinent materials are distributed by ACPE staff to members of an ACPE evaluation team for their independent analysis. Evaluation teams include both

educators (one of whom is a dean of an ACPE-accredited program) and practitioners and may include a member of the Board, a member of the ACPE staff, and two or more other selected individuals, qualified by experience and training. Prior to their participation in an on-site evaluation, all evaluation team members, including Board and staff members, must complete training on the standards, policies and procedures, evaluation techniques, and their role in the on-site evaluation. This training will include the application of the Standards and Guidelines and Policies and Procedures in the assessment of distance education programs. In order to be trained as an evaluator, an individual must have held an academic appointment in a college or school of pharmacy or be employed as a pharmacy practitioner for a minimum of five years. Practitioners include individuals who are (1) employed as a practicing pharmacist with no part of their employment funded by a college or school of pharmacy; (2) serve as an experiential director at an accredited college or school of pharmacy; or (3) employed by a national or state pharmacy organization such as a State Board of Pharmacy. To remain eligible to serve as an evaluation team member, trained individuals must complete periodic web-based modules designed to provide training on any changes to the Standards and Guidelines, ACPE's Policies and Procedures, the evaluation process, or any other information relevant to ACPE's evaluation procedures. The dean of the program to be visited is given opportunity to review the proposed team for potential or real conflicts of interest. A member of the board of pharmacy of the state, district or territory, in which the program is located, is invited to accompany the evaluation team as an observer, thereby facilitating a better understanding of and engendering confidence in the accreditation process among licensing bodies. A member of the appropriate regional accrediting agency may be invited by the program to observe the work of the team. The size of the evaluation team, the specific dates of the on-site evaluation, and the number of days necessary for completion of the evaluation are established in consultation with the dean of the program (see "Addendum #4 ACPE Travel Guidelines").

Ordinarily, the on-site evaluation involves two to three days and includes interviews with the dean and other administrative leaders, faculty, students, alumni, preceptors, and university administrators. A survey is made of physical facilities, the library and educational resources. Team members will be provided a standard-by-standard evaluation form (Rubric) to aid in their review. At the conclusion of the on-site evaluation, the evaluation team presents findings orally to the dean of the college or school and to the chief executive officer of the institution, generally the president or a designate. These findings serve as the framework for the written Evaluation Team Report (ETR), which is furnished first to the evaluation team for review and comment, then to the dean for correction of

any factual errors, and subsequently officially to the institution and to the Board for action.

The program is expected to demonstrate that it systematically obtains outcome information, and that it applies this information to foster programmatic improvements and to enhance student learning and achievement of the required competencies. Other activities of the program may markedly influence the instruction given in professional programs. Accordingly, the evaluation for purposes of accreditation will include a review of other activities that may be sponsored by the college or school, such as non-practice undergraduate degree programs in pharmacy-related disciplines; graduate offerings including master and doctor of philosophy degree programs in pharmacy-related disciplines; continuing education activities; certificate or other non-degree programs; research and scholarly activities; and professional and public service programs.

ACPE may rely upon the assessments made by a regional accrediting agency concerning the basic science and general education components of the professional programs. Additionally, the evaluations of the regional accrediting agency concerning general institutional policies and central administrative support may be used in the evaluation/assessment process. However, ACPE is not obligated to consider the evaluations of any other agency.

- 11.4 Evaluation Team Report:** As a result of the on-site evaluation, a written evaluation team report (ETR) that assesses compliance with each of the standards and assesses performance with respect to student learning is furnished to the chief executive officer of the institution and the dean of the college or school at a reasonable time after the site team visit. The ETR also comments on the program's areas of strength and areas needing improvement; mentions specific areas, if any, where the program is partially or non-compliant with the standards; and may offer suggestions concerning means of improvement for the program to consider. The chief executive officer of the institution and the dean of the program are given opportunity to correct factual errors and to comment on the draft ETR prior to finalization and distribution of the ETR to the Board. The chief executive officer of the institution and the dean of the program may also provide supplemental materials related to the facts and conclusions presented in the ETR prior to the time the ETR is reviewed by the Board for action. Any such materials must be received by ACPE no later than twenty-one (21) days prior to the start of the Board meeting at which action on the ETR will be taken. The ETR is not an accreditation action but is an evaluative step in the accreditation process. The evaluation team validates the program's self-study, providing the perspective of an independent external peer review.

11.5 Accreditation Actions: Based upon the ETR, the self-study, communications received from the institution, and, upon invitation, a presentation by the chief executive officer of the institution or a designate and/or the dean of the college or school, the Board determines the program's compliance with the standards, takes an accreditation action (type of accreditation status and terms and conditions associated with the accreditation status), and presents comments and recommendations. A copy of the Accreditation Action and Recommendations ("A&R") indicating the accreditation status granted by the Board, along with stated terms and conditions, comments, and the timeframe within which ACPE will conduct its next on-site evaluation of the program is sent to the chief executive officer of the institution and the dean of the program. ACPE staff will schedule on-site evaluations within the designated timeframe as specified in the A&R. In the unlikely event that an on-site evaluation cannot be scheduled during the timeframe specified in an A&R, ACPE in conjunction with the accredited program shall determine when such an on-site evaluation can be scheduled for a date falling outside the timeframe specified in the A&R.

The ETR and the A&R are confidential documents and are considered to be the property of the institution. Except in the instance of exercise of the appeal procedure as provided in these Policies and Procedures, arbitration, litigation, or as otherwise indicated in this paragraph, these documents will not be released by ACPE to third parties without the authorization of the chief executive officer of the institution. Without such authorization, the sole information available to the public consists of that information contained in the Directory and in the Report of Proceedings from the meeting at which the accreditation action was taken. If the institution releases any portion of the ETR or the A&R, or releases any statement concerning such documents, that ACPE determines requires public clarification or presents a misleading impression, ACPE may publish an appropriate response or require the release of such documents in their entirety.

Except where circumstances require immediate action, accreditation actions shall be made by the Board only during a regularly scheduled meeting of the Board. Meetings of the Board are currently scheduled for January and June of each calendar year.

11.5.1 Findings of Partial or Non-Compliance: In the event that the Board determines a program is in partial or non-compliance with a standard or standards, the A&R will include notification of the finding of partial or non-compliance and outline the requirements for bringing the standard(s) into compliance. Pursuant to USDE regulations with which ACPE must comply, a program in partial or non-compliance with any ACPE standard or standards is given a period not to exceed two (2) years to bring all

standards into compliance. Failure to bring any standard found to be partially compliant or non-compliant into compliance in a timely manner will result in Probationary Status and may result in an adverse accreditation action.

The ACPE Board will consider granting an extension of a maximum of one year to this two-year timeframe if the College/School can demonstrate good cause as to why such an extension may be warranted. Examples of potential circumstances that may warrant an extension to the two-year timeframe include natural or man-made disasters, such as flood, hurricane, and war. Demonstration of good cause must include a detailed description of the College/School's plan to address the area(s) of partial and/or non-compliance, the provision of adequate support from the College/School and/or institution to ensure effective implementation of the plan, and evidence that the plan will be effectively implemented over the additional one-year period. Monitoring per the Board's direction will be conducted to ensure that the plan is being effectively implemented. Extensions of up to one year per this policy will be considered on a per standard basis, and are non-renewable.

11.6 Annual and Other Reporting during the Accreditation Term: Program monitoring between on-site evaluations is achieved by means of annual reviews, correspondence, written interim reports, and focused evaluation visits as may be requested by the Board. Programs are monitored annually through statistical analysis of program information (including enrollment trends) and review of graduates' performance on standardized licensure examinations. Wherever appropriate, the status that will require follow-up action by ACPE will be a value greater or less (as applicable) than two standard deviations beyond the national mean for the criterion in question; percentages used in 11.6.3. reflect historical values for this benchmark.

11.6.1 Changes and Trends in NAPLEX® Outcomes: At least once per year, the Board will review annualized data provided by the National Association of Boards of Pharmacy (NABP) for the performance of graduates of accredited programs on the North American Pharmacist Licensure Examination™ (NAPLEX®) for the purpose of identifying changes or trends in outcomes that reflect student learning and curricular effectiveness. For each graduating class, programs that have multiple branches, campuses, or pathways to degree completion are required to provide to NABP a list of student names and the respective branch, campus or pathway designation. As applicable, the data provided to ACPE by NABP will include an analysis of the performance of graduates segregated by campus, branch, or pathway to facilitate a comparison of the respective outcomes. As described below, ACPE will confer with

applicable programs via written correspondence requesting that they identify the cause of the change or trend and provide an action plan for correcting any negative changes or trends.

11.6.1.a A letter will be sent to a program whose graduates obtain a percentage pass rate on the NAPLEX® lower than that represented by at least two standard deviations below the average obtained by all candidates taking that examination. This shall apply only to first-time examination candidates from ACPE-accredited programs. Both calendar year and academic year data are used in this analysis.

11.6.1.b A letter will be sent to a program whose graduates obtain a Mean Scaled Score on the NAPLEX® lower than that represented by at least two standard deviations below the average obtained by all candidates taking that examination. This shall apply only to first-time examination candidates from ACPE-accredited programs. Both calendar year and academic year data are used in this analysis.

11.6.1.c A letter may be sent to a program based on any other analysis indicating a negative trend in NAPLEX® outcomes. (e.g., branch campus analysis)

11.6.2 Changes and Trends in Enrollment: At least once per year, the Board will review data provided by the American Association of Colleges of Pharmacy (AACCP) relating to enrollment of students in the program for the purpose of identifying changes and trends in enrollment that may impact the ability of a program to remain in compliance with the standards. Under conditions described below, ACPE will follow-up with applicable programs via written correspondence requesting that they identify the cause of the change or trend and provide an action plan for correcting any negative changes or trends.

11.6.2.a A letter will be sent to a program having a newly identified change in the first professional year enrollment larger than 20 percent over a five-year period or less. Situations in which a program is deemed to be in a period of transition between professional programs will be taken into account in a review of a program's ability to remain in compliance with the standards, particularly those addressing curricular effectiveness,

11.6.2.b A letter will be sent to a program based on any other analysis

indicating a substantial trend affecting a program's ability to remain in compliance with the standards, particularly those standards addressing curricular effectiveness.

11.6.2.c An increase in headcount enrollment of 50 percent or more within one institutional fiscal year will be reported to the Secretary within 30 days of ACPE's receipt of notification of such an increase, in accord with expectations established by the USDE.

11.6.3 On-Time Graduation Rate Monitoring: ACPE also requests annual reporting of the following information regarding the most recent graduating class from accredited programs and at least once per year, the Board will review the data provided by the American Association of Colleges of Pharmacy (AACP):

- Matriculating class size for the first professional year of graduating class (e.g., for 2009-2010 graduates, entry class size in 2006-2007 for an academic four-year curriculum)
- Number of graduates of the class completing the curriculum in the specified timeframe (i.e., 3 or 4 years).
- Number of academic dismissals
- Number of student withdrawals

A letter will be sent to a program requesting that they identify the cause of and provide an action plan for correcting any negative changes or trends if:

- a. The number of academic dismissals is greater than or equal to six percent of the matriculating class size
- b. The number of students withdrawing from the program is greater than or equal to six percent of the matriculating class size
- c. The number of students with a delayed graduation is greater than or equal to fifteen percent of the matriculating class size
- d. The total attrition related to on-time graduation is greater than or equal to twenty-four percent of the matriculating class size. For this purpose, attrition is the total number of students who did not graduate on time for any reason, including delayed graduation, academic dismissal, or withdrawal from the program.

Such a letter may not be required if the ACPE Board has received prior information provided by the program that adequately addresses the matter.

11.6.4 Financial Resources: At least once per year, the Board will review data provided

by the American Association of Colleges of Pharmacy (AACCP) relating to the financial resources available to the program for the purpose of identifying changes and trends in its fiscal viability that may impact the ability of a program to remain in compliance with the standards.

Under conditions described below, ACPE will follow-up with applicable programs via written correspondence requesting that they identify the cause of the change and provide an action plan for correcting any negative changes.

11.6.4.a A letter will be sent to a program having a 10% decrease in its annual budget.

11.6.4.b A letter will be sent to a program experiencing a net loss for two consecutive years.

11.6.5 Job Placement/Gainful Employment: In July of each year, ACPE will request from the college or school summary statistics of job placement/gainful employment for the cohort graduating the previous year. This summary shall be reported as percent of graduates whose primary pursuit is: 1) employment within the profession of pharmacy; 2) employment outside the profession of pharmacy; 3) post-graduate education or residency training; or 4) other/lost to follow-up. A full accounting across these four categories (i.e., 100%) of the graduating class is expected. How and when the data are captured to prepare this summary report is at the discretion of the college or school; a brief description of the methodology used to capture the data should be included with the report.

11.6.6 Other Monitoring: The Board may review data relating to other programmatic outcomes, such as, the performance of graduates on other standardized examinations including the Multistate Pharmacy Jurisprudence Examination® (MPJE®), to monitor changes and trends at colleges and schools. ACPE will follow-up with applicable programs via written correspondence requesting that they identify the cause of the change or trend and provide an action plan for correcting any negative changes or trends.

11.6.7 Non Compliance with Requirements for Annual Monitoring: ACPE reserves the right to reasonably request annual monitoring data and/or other relevant information that allows ACPE to evaluate ongoing compliance with the standards from any accredited program. Any program that does not provide data and/or information in accordance with the above policies and procedures and within the timelines specified in communications from ACPE will be deemed to be in non-compliance with the appropriate standard(s). Where circumstances dictate, accreditation action may be taken against such delinquency of a program other than at a regularly scheduled meeting of

the Board.

11.6.8 Repeated Annual Monitoring Concerns: Accredited programs that repeatedly raise the concerns of the Board in one or more of ACPE's annual monitoring areas will be subject to further action by the Board. If a program has met any of the criteria for annual monitoring follow up in three or more years within any five-year period, and has not previously appeared before the Board to discuss previous annual monitoring concerns, the Board may, at its discretion, invite representatives of the program to meet with the Board.

12. Substantive Change

ACPE is responsible for reviewing all substantive changes that occur between regularly scheduled comprehensive on-site evaluations to determine whether or not the change has affected the quality of the total program and to ensure the public that all aspects of the professional program in pharmacy continue to meet defined standards. While the decision to implement a substantive change is a programmatic prerogative and responsibility, ACPE is obligated to determine the effect of any substantive change on the program's ability to meet the accreditation standards.

It is the responsibility of the dean of an accredited program that is in operation and proposes to implement a substantive change to provide written notification of the proposed changes to ACPE in advance of the implementation of any changes. If a program is unclear as to whether a change is substantive in nature, the dean should contact ACPE staff for consultation.

ACPE's definition of substantive change includes, but is not limited to:

- Any change in the established mission or goals of the institution or college/school;
- Curricular change that represent a significant departure in either content or method of delivery, from those that were offered during the program's previous accreditation cycle including:
 - Development of a non-traditional doctor of pharmacy program
 - Development of a joint delivery of program agreement
 - Use of distance learning technologies or other unique methodologies to deliver a substantial portion of the curriculum (e.g., 25% or higher);
 - A substantial change in enrollment in the professional program (defined as 20% or more in one year or cumulatively over two consecutive years);
 - A substantial change in the number of clock or credit hours required for successful completion of the program;

- A significant change in the length of the program;
- The establishment of an additional geographic location at which substantial portions of the program are offered;
- A substantial change in faculty composition or size;
- Change in the legal status, governance, or ownership of the program;
- Changes in financial resources that could affect the quality of the program;
- Changes in leadership;
- Changes in organizational structure;
- Change in status with other accrediting agency; and
- Any other changes that the Dean feels require notification of ACPE

Documentation that the program will continue to comply with the standards must be provided. The notification must allow sufficient time for evaluation of continued compliance with the standards by ACPE. ACPE reserves the right to review and reconsider the terms of accreditation in accord with standard evaluation and operational procedures or appropriate monitoring, such as an on-site review (see Addendum #5 Guidelines to Substantive Change Policies and Procedures for additional information regarding substantive change reporting procedures).

If a program fails to follow this substantive change policy and its procedures, the accreditation of the program may be placed in jeopardy.

13. Adverse Accreditation Actions: Accredited with Probation, Denial of Accreditation, or Withdrawal of Accreditation

13.1 Accredited with Probation Status: Accredited with Probation status occurs when there is documented evidence that an accredited program exhibits deficiencies in achieving or maintaining compliance with a standard(s) and that the deficiencies are sufficiently serious to warrant probationary status. Accredited with Probation status is viewed as an adverse action, subject to the appeal and notification parameters described herein.

13.2 Denial of Accreditation: Denial of accreditation will occur when there is documented evidence that the plan for development is inadequate and exhibits substantial deficiencies that are expected to prevent compliance with the standards within the five-year developmental period mandated by the USDE.

13.3 Withdrawal of Accreditation: Withdrawal of accreditation will occur when there is documented evidence that a program with any preaccreditation or accreditation status (Precandidate, Candidate, Accredited, or Accredited with Probation) exhibits deficiencies in achieving or maintaining compliance with a standard(s) and that the deficiencies are

sufficiently serious to raise concern as to whether or not graduates of the program are competent to enter the next stage of their training.

13.3.1 Withdrawal of Preaccreditation Status: For a program with a preaccreditation status (i.e. Precandidate or Candidate status), withdrawal of preaccreditation will occur if the Board finds the program to be making inadequate progress in implementing its plan to achieve full compliance with one or more standards within the required five-year developmental time period allowed by the USDE and after written notification to the program of the specific issues of inadequate progress, the program fails to remedy all issues cited within the time frame indicated in the notification. The five-year developmental time period may be extended only for good cause as determined by the Board.

13.3.2 Withdrawal of Accredited Status: For a program with Accredited status, withdrawal of accreditation will ordinarily occur after the Board has found the program to be partially or non-compliant with one or more of the standards, has given the program written notification of the finding(s) of partial or non-compliance, and the program fails to achieve compliance with the cited standard(s) within a timeframe designated by the Board (not to exceed two years). The two- year maximum time period to remedy all issues of partial or non-compliance is required by USDE and may be extended only for good cause, as determined by the Board.

13.3.3 Consideration of Financial Information: Prior to a final adverse action based solely upon a failure to meet a standard or guideline pertaining to finances, a program may, on one occasion, seek review of significant financial information that was unavailable to the institution or program prior to the determination of the adverse action and that bears materially on the financial deficiencies identified by Board. Any action taken with respect to the new financial information shall not be separately appealable by the institution or program.

13.3.4 Immediate Withdrawal of Preaccreditation or Accreditation Status: Regardless of the accreditation status of a program, rapid and precipitous deterioration of the quality of the program may be sufficient grounds for the immediate withdrawal of preaccreditation or accreditation, whether or not a probationary period or other opportunity to remedy issues of partial or non-compliance with the standards has been provided.

13.3.5 Voluntary Withdrawal of Preaccreditation or Accreditation: The chief executive officer of the institution may withdraw from preaccreditation or accreditation status at any time. In the event of a voluntary withdrawal of a

program's preaccreditation or accreditation status, ACPE will send a letter to notify the Secretary, institutional and other appropriate recognized accrediting and state agencies, and the public within 30 days of receiving notification from the institution or program that it is voluntarily withdrawing from preaccreditation or accreditation. Additionally, should an institution or program let its accreditation or preaccreditation lapse, ACPE will notify the Secretary, institutional and other appropriate recognized accrediting and state agencies, and the public within 30 days of the date on which preaccreditation or accreditation lapses.

- 13.4 Notification of Adverse Action:** Notification of an adverse accreditation (accredited with probation, denial or withdrawal of preaccreditation or accreditation) action by the Board shall be delivered electronically to the chief executive officer of the institution and to the dean of the program affected with a request for written confirmation of receipt. Such notification shall provide a statement of the reasons for the adverse accreditation action, along with notice of the right to appeal and the time constraints for initiating such an appeal as detailed under Section 14 of these Policies and Procedures.

Within thirty (30) days of a final decision (after appeal or expiration of the opportunity to appeal) of an adverse accreditation action and at the same time the program is notified of the action, written notification shall be made to the institution, to the USDE, the appropriate state licensing or authorizing agency, the appropriate regional and/or other accrediting agencies, and to the public as required by USDE. Public notification includes presentation on the ACPE web site (<http://www.acpe-accredit.org/>) within 24 hours of its notice to the program. A brief statement summarizing the reasons for denying or withdrawing accreditation status, and any comments from the affected institution shall be made available to the USDE, the appropriate state licensing or authorizing agency, the appropriate regional and/or other accrediting agencies, and to the public via presentation on the ACPE web site (<http://www.acpe-accredit.org/>) not later than 60 days after such final action.

- 13.5 Reapplication for Accreditation Status:** Any time after the effective date of denial or withdrawal of accreditation, the chief executive officer of the institution may reapply for accreditation. The application shall follow the application procedure in its entirety as detailed under policy 9 of these Policies and Procedures.

14. Appeal Procedure for an Adverse Accreditation Action

14.1 Right to Appeal and Retention of Accreditation Status: After receipt of notice of an adverse accreditation action, the chief executive officer of the institution involved may appeal the decision of the Board to an Appellate Commission on the grounds that the decision of the Board was arbitrary, prejudiced, biased, capricious, or based upon incorrect facts or incorrect interpretation of facts. The accreditation status of the program existing prior to the entry of the adverse accreditation action shall continue, pending the disposition of the appeal, and such status shall continue to be reflected in the Directory until the appeal procedure is finalized. Notice of appeal by the institution shall be in writing and delivered personally; by certified mail, postage prepaid, with return receipt requested; by email; or by facsimile to the offices of ACPE within 30 days after receipt of notification of the adverse accreditation action of ACPE. The appealing institution shall affirm its responsibility to undertake the costs of the appeal and enclose a check for the amount equal to the current cost of a comprehensive on-site evaluation as a deposit to be applied against expenses, as set forth in paragraph 14.3.1. Such notice of appeal shall summarize the facts supporting the grounds on which the appeal is based. ACPE shall promptly notify the appealing institution of the date the notice of appeal was received.

**ANY NOTICE OF APPEAL NOT FILED WITHIN THE 30 DAY PERIOD
SHALL RESULT IN A DISMISSAL OF THE APPEAL.**

Both parties of the appeal have the right to representation by counsel throughout the appeals procedure.

14.2 Members of the Appellate Commission

14.2.1 The Appellate Commission shall consist of the current chief elected officer of the American Association of College of Pharmacy; the American Pharmacists Association; the National Association of Boards of Pharmacy; and two (2) members selected by ACPE from former members of the ACPE Board of Directors. The appeals panel must include an administrator (such as a dean of an ACPE accredited program), pharmacy educators, pharmacy practitioners, and a public member (such as a former member of the Public Interest Panel or a former ACE appointee to the ACPE Board), and additional members will be added to the panel if the individuals appointed to the panel under the guidelines outlined above do not provide such representation. Prior to sitting as a member of the Appellate Commission, each member shall have been trained on ACPE's policies and procedures, including those related to distance education, in accordance with the training provisions of Section 11, paragraph 11.3. In order to ensure currency, a special training session will be held for all Appellate Commission members prior to the convening of the Commission.

14.2.2 In the event that any chief elected officer shall be ineligible, refuse, or be unable to serve on the Commission for any reason at any time, the executive committee (or such other appropriate committee or board) of the organization he or she is representing shall designate an alternate member. Any chief elected officer or alternate member who shall be designated as a participant on the Commission shall remain a member of the Commission until the Commission is discharged, even if his or her successor in the elective office of the respective association is installed in the interim and even if such individual is no longer affiliated with the respective association.

14.2.3 No former ACPE Board of Directors member shall be appointed to the Appellate Commission by ACPE who participated in any manner while a Board member of ACPE with respect to the adverse action taken by the Board against the appealing party or who, under the policies of ACPE, has an apparent or real conflict of interest with the appealing party.

14.2.4 No member of the Appellate Commission shall be a member of the Board or Staff of the Accreditation Council for Pharmacy Education, nor shall any member have an affiliation with the institution involved that would create an apparent or real conflict of interest (e.g., alumnus, present or former faculty member).

14.2.5 Each Commission member will execute an agreement attesting to the fact that he or she has no conflict of interest with the appealing institution or the pharmacy program of that institution and agrees to hold confidential all matters pertaining to the appeal procedure, including but not limited to, all documents, all information and testimony received prior to and at the hearing, and the Commission's deliberations, unless a release of all or any part of such information is mutually agreed to by the parties.

14.3 Convening of the Appellate Commission

14.3.1 Promptly after receipt of the notice of appeal, ACPE shall appoint the two former Board members to the Appellate Commission, and, after consulting with officers of the associations set forth in Section 14.2, shall notify the additional three individuals of their appointment to the Appellate Commission. ACPE shall notify the institution that initiated the appeal that the Appellate Commission has been created and inform it of the names of the members of the Appellate Commission. The Appellate Commission can be convened only on notice of appeal as described above. All reasonable expenses incurred by the Appellate Commission, including, but not limited to, travel expenses (e.g., transportation, accommodations, and meals), shall be paid by the institution that initiated the

appeal. Notice of appeal shall be accompanied by a fee equal to the current cost of a comprehensive on-site evaluation to be used against expenses. Any necessary additional expenses shall be promptly paid by the institution that initiated the appeal, and any surplus of the deposit shall be promptly returned to the institution. The institution shall be provided with an itemized list of the expenses of the Appellate Commission.

14.3.2 ACPE shall advise the members of the Appellate Commission of their responsibilities promptly upon identification of the members. Once convened, the Commission shall designate a chairperson who shall conduct the meetings of the Commission and shall act as the presiding officer at any hearings.

14.4 Appeals Procedure: Within thirty days of the receipt by ACPE of the notice of the appeal, the institution and ACPE shall present written statements of their respective positions to the Commission. The parties will each advise the Commission of the witnesses it will call at the hearing and will also submit copies of the documents it intends to introduce into evidence. A hearing shall be held at a date mutually agreed upon by the parties and the Commission but not more than ninety (90) days after receipt of the notice of appeal by ACPE, at which time evidence may be presented first by the appealing institution, followed by ACPE. Evidence presented at the hearing shall be restricted to a review of documents and testimony relevant to the standard(s) on which the adverse accreditation action was based, or a review of the process and procedure used to arrive at an adverse action, as appropriate. Witness testimony shall be in person. No telephonic (or other electronic means of transmission) testimony shall be permitted. All documentation and testimony must be relevant to the conditions existing at the program during the dates on which the site visit was made and on which the adverse action was taken. Improvement in conditions and corrections of deficiencies made subsequent to the adverse action shall not be considered. The hearing shall be recorded. Either party may, at its expense, request such recording be transcribed.

14.4.1 The appealing institution shall have fifteen (15) days following the completion of the hearing to file a brief, and ACPE shall have 15 days thereafter to file a response brief, each supporting the arguments presented by the respective parties. Within an additional thirty days, the Commission shall render a decision. The Commission may (i) affirm, (ii) remand, (iii) amend, or (iv) reverse the adverse action taken by the Board. In a decision to remand the adverse action to the Board for further consideration, the Commission must identify specific issues that the Board must address. The Appellate Commission shall provide a written report of the Commission's findings, which shall be submitted to the Board, the Executive Director of ACPE, the chief executive officer of the

institution, and the Dean of the program concerned.

14.4.2 Where the adverse accreditation action being appealed is based upon financial deficiencies, under the standards, the program affected may submit to ACPE within ten (10) days from the date of receipt of the adverse action, any significant material financial information unavailable to the program at the time of its last report (oral or in writing) to ACPE and request review of the adverse action. The right to submit such additional financial information is limited to one time only. The ACPE Executive Committee will determine whether the new financial information warrants review of the adverse accreditation action by the Board and will notify the affected party in writing of its decision. If the Executive Committee determines the new financial information does not warrant reconsideration by the Board, the thirty (30) day appeal period set forth in this Section 14 for appealing adverse accreditation actions shall commence upon receipt of the rejection of the program's request for review.

14.5 Final Action by ACPE

14.5.1 The decision of the Appellate Commission shall be considered by the ACPE Board of Directors at its next special or regular meeting of the Board. The Board shall take final action consistent with the decision of the Appellate Commission. A report of the final decision shall be forwarded to the chief executive officer of the appealing institution, the Dean of the college or school of pharmacy, and members of the Appellate Commission.

14.5.2 The Appellate Commission shall be discharged by the Board at the adjournment of the regular or special Board meeting following the final action by the Board.

15. Forum for Litigation

15.1 Court: Any litigation instituted by (i) any school or college of pharmacy against ACPE concerning any action taken by ACPE involving the accreditation process or (ii) any litigation instituted by ACPE against any school or college involving the accreditation process shall be brought in Cook County, Illinois, in the Circuit Court of Cook County or in the Federal District Court for the Northern District of Illinois.

15.2 Personal Jurisdiction, Right of Removal, and Applicable Law: Each such school or college and ACPE consent to personal jurisdiction by these courts. Nothing herein shall restrict the right of a college or school of pharmacy or ACPE to remove such litigation from state court to federal court where permitted by law. Illinois law shall be applicable.

15.3 Prerequisite to Litigation: No litigation shall be instituted by a school or college of pharmacy involving an adverse action taken by ACPE until after the appeal procedure shall be instituted by such school or college and concluded in accordance with Section 14 of these Policies and Procedures.

16. Teach-out Plans and Teach-Out Agreements

16.1 Teach-Out Plans: In accordance with the Accreditation Council for Pharmacy Education (ACPE) Policy 16.1, ACPE requires submission and subsequent ACPE approval of the Programmatic Teach-Out Plan and required attachments from any program with a status of Accredited With Probation (as detailed in Section 6.3 of these Policies and Procedures) or when a program or its sponsoring institution voluntarily withdraws its accreditation. Such a plan must detail how the sponsor institution will ensure the fair and equitable treatment of the remaining enrolled students. Failure to submit a Teach-Out Plan form within 90 days of notice of the Accreditation With Probation Status will result in notification of the institutional administration and its accreditor of ACPE's intent to withdraw accreditation immediately.

ACPE requires a program to complete a Teach-Out Plan upon the occurrence of any of the following events:

- When a program or program option is placed on probation, requests inactive status, voluntarily or involuntarily withdraws;
- When the institution receives notice that its license or legal authorization to operate will be or has been revoked;
- When the institution receives notice from the institutional accreditor that an action has been initiated to suspend, revoke, or terminate an institution's accreditation status;
- When the institution receives notice from the U.S. Department of Education that an action has been initiated to limit, suspend, or terminate a sponsor institution's participation in any Title IV program under the Higher Education Act and that a Teach-Out Plan is required pursuant to federal regulations;
- When the institution receives notice from the U.S. Department of Education that an emergency action has been initiated; or
- When ACPE otherwise determines that the submission of a Teach-Out Plan is warranted.

Should the program's accreditation status be withdrawn, then the institution must execute its stated Teach-Out Plan into a Teach-Out Agreement (see policy 16.2) and provide ACPE a copy of the agreement. If the institution chooses not to execute its own Teach-Out Plan, it must enter into an agreement with an ACPE accredited program to permit students to complete their education (Teach-Out Agreement). The plan or the

agreement must give careful attention to fair and equitable treatment of students and provide notification of any additional charges the remaining students will incur. The program must provide a separate Teach-Out Agreement for each ACPE-accredited program that will participate in the relevant agreement. The Programmatic Teach-Out Plan form can be found in Addendum 7.

16.2 Teach-Out Agreements: In the event of withdrawal of accreditation, subsequent to a final decision (after appeal or expiration of the opportunity to appeal) of an adverse accreditation action, the institution must implement its Teach-out Plan and execute a Teach- Out Agreement as detailed in such plan within thirty (30) days. The institution entering into the Teach-Out Agreement as the teach-out institution: (i) must have the necessary experience, resources, and support services to provide the Doctor of Pharmacy program that is of acceptable quality and reasonably similar in content , structure, and scheduling to that provided by the institution that is no longer able to offer the Doctor of Pharmacy program; (ii) must remain stable, carry out its mission, and meet all obligation of its existing students; (iii) demonstrate that it can provide students access to the Doctor of Pharmacy program without requiring them to move or travel substantial distances; and (iv) provide students with information about additional charges that may be incurred. The program at the teach-out institution must be accredited by ACPE.

17. Record Keeping Procedure for Preaccredited and Accredited Degree Programs:

ACPE will maintain complete and accurate records for each program involved with ACPE in the preaccreditation or accreditation process. Complete records will include ETRs, reports of periodic or special reviews conducted during the accreditation period, all A&Rs (including all adverse actions, e.g., accredited with probation status, withdrawal or denial), a copy of the most recent application/self-study, and any and all correspondence regarding the ETR or ACPE decisions. Complete and accurate records will be maintained of all accreditation decisions made throughout a program's affiliation with ACPE regarding accreditation and any substantive changes, including all correspondence that is significantly related to those decisions.

18. Fees

Fees for evaluation by ACPE for purpose of accreditation are set at a level intended to assist in the support and continued improvement of accreditation services and to defray actual travel and other costs involved in the evaluation of professional programs. In addition, an annual sustaining fee is charged. ACPE reserves the right to adjust the fees and set effective dates for such adjustments at any regular or special meeting of the Board. Information regarding the current fee and assessment policy is available upon request and is published on the ACPE web site (www.acpe-accredit.org). Failure to pay fees in within the time limit indicated on the invoice may result in the assessment of late

fees.

19. Assistance in Accreditation Matters

ACPE staff provides guidance, upon request, on matters pertaining to pharmacy education, especially as related to the accreditation process. Staff guidance is available through various formats, including discussions at the ACPE office and at the site of the institution. The Board and staff also provide assistance in the advancement and improvement of pharmacy education through active cooperation with professional organizations and societies in support of sound educational policies and procedures. ACPE reserves the right to charge a fee and its reasonable expenses for services rendered under this paragraph.

20. Complaint Regarding a Preaccredited or Accredited Program

20.1 ACPE has an obligation to assure that any program that seeks or holds an accreditation status remains compliant with the standards and conducts its affairs with impartiality, non-discrimination, honesty, and frankness.

Any complaints from institutions, students, faculty, or the public against an accredited pharmacy program or institution housing an accredited pharmacy program must be based upon the fact that such program or institution is not in compliance with a standard or standards as established, from time to time, by ACPE.

20.2 Any complaint must be submitted to ACPE within one hundred and eighty (180) days from the date the complainant knew or should have known of the occurrence of facts on which the complaint arose. Any complaint not filed with ACPE within the time limitations set forth above shall not be considered by ACPE, except when: 1) the Executive Director determines the matter's seriousness warrants investigation to ensure continued compliance with one or more accreditation standards; or 2) any complaint held in abeyance by ACPE by reason of threatened or existing legal challenge before a court of law or governmental agency as provided in paragraph 20.8 may be reinstated by the complainant by written notice to ACPE within thirty (30) days after the latter of (a) a final judgment by the court of law or governmental agency or (b) finalization of any appeal of such judgment. The Executive Director may proceed with the investigation of the complaint held in abeyance without notice by the complainant if the Executive Director determines, in his or her discretion, that such is warranted due to the severity of the complaint and potential impact on the quality of the program and the effect on students.

20.3 ACPE will consider formal complaints about Doctor of Pharmacy programs (PharmD) that allege a program is either (a) not in compliance with one or more of

ACPE's Standards and Key Elements, or (b) has violated any of ACPE's expectations related to academic integrity. The complaint must specify which Standard(s) or Key Element(s) are implicated or how the program violated expectations of integrity.

Complaints fall into one of two categories: (1) those that involve situations subject to formal institution/program due process policies and procedures and (2) those that involve situations not subject to formal due process procedures:

- 1) If the complainant is involved with an institution/program grievance subject to formal due process and procedure, ACPE requires that the process be completed prior to initiating ACPE's formal complaint process, unless the complaint includes an allegation that the institution/program process has not been handled in a timely manner as defined in the institution/program policy. In such cases, ACPE will consider the complaint prior to completion of the grievance process. Evidence of completion of the institutional process or of the untimely handling of such must be included in the complaint materials.
- 2) If the complaint is related to situations that fall outside of formal due process policies and procedures, the complaint may be filed at any time.

ACPE does not:

- consider complaints that fall outside its jurisdiction/authority as expressed in the Standards and Key Elements and the academic integrity statements. When appropriate, complainants will be referred to other organizations to pursue their concern(s).
- intervene on behalf of individuals or act as a court of appeal for faculty members or students in matters of admission, retention, appointment, promotion, course grading, or dismissal unless such practices or conditions indicate that the program may not be in compliance with the Standards and Key Elements.
- promise that it will force programs into specific resolutions requested by the complainant, but may instead require the program to comply with Standards and Key Elements. Such is in the sole discretion of ACPE.

All complaints must be filled using the link found here: [ACPE Complaint Form](#)

20.4 Complaints that are submitted anonymously will not be considered by ACPE. Depending on the circumstances and severity of the complaint, it may or may not be forwarded to the program for information purposes only. The decision to forward a complaint is made by the ACPE Director of Program Accreditation or the ACPE Executive Director. During the eight-year cycle between each program's self-studies, a record of anonymous complaints received for the program will be maintained by ACPE.

20.5 ACPE will proceed expeditiously in the investigation and resolution of complaints in a manner that is fair and equitable to all parties. The ACPE Executive Director, or his/her designate, shall have the authority to: (i) review the complaint in order to determine relevance to the standards, policies, or procedures; (ii) dismiss a complaint if it is determined that such complaint has no merit or is outside the scope of ACPE accreditation activities; (iii) forward relevant complaints to the dean of the program for a response to ACPE; and (iv) conduct any further investigation deemed necessary to promptly determine the facts surrounding the issue and the validity of the complaint. ACPE shall diligently investigate and resolve complaints in a timely manner, taking into consideration all parties involved the severity and complexity of the allegations, and pursuant to any legal obligations.

20.6 If, on the basis of such investigation, after notice to the program and opportunity for response from the program, the Executive Director finds a complaint to be extremely serious in nature, charging egregious conduct that may warrant adverse action by ACPE, or involve an interpretation that the Executive Director believes should be made by the Board, the complaint will be submitted to the Board for consideration at the next regular meeting. Where the Board finds that a program has violated the standards, engaged in unethical conduct, or that its integrity has been seriously undermined, the Board will either:

- (A) request that the program show cause, within a stated time period, as to why adverse action should not be taken; or
- (B) in extreme cases, immediately discontinue its relationship with the program by denying or withdrawing the offending program's accreditation status.

20.7 A record of complaints regarding a specific college or school is maintained in perpetuity at the ACPE office for future consideration. The complaint file will be reviewed as a component of the on-site evaluation process. Site team leaders will review all complaints received against a program since the time of the program's last comprehensive on-site evaluation with all members of the team. Information provided to the evaluation team will include the following for any complaint: (1) the nature of each complaint; (2) the process used to review the complaint; and (3) the status of the complaint. The evaluation team's review of complaints will be documented in the Evaluation Team Report. Any complaints received since the prior on-site evaluation and the related investigative materials will be provided to the ACPE Board of Directors as a component of the review process. The Board will also conduct a general review of all open complaints at each meeting, including those against a program not being considered for initial or continued preaccreditation or accreditation at a given meeting.

20.8 Where a complainant has threatened or filed legal action in a court of law or

before a governmental agency against a program or institution housing said program, ACPE reserves the right to hold such complaint in abeyance until after a final judgment by a court of law or governmental agency or finalization of any appeal of such judgment.

21. Complaint Regarding ACPE

ACPE has an obligation to respond to any written complaints that may be lodged against ACPE by any party regarding the application of the standards, policies, and procedures where the complaining party is directly affected thereby. However, this complaint procedure shall not be available to any program concerning accreditation decisions entered in regard to such program. The ACPE Executive Director shall promptly determine the facts surrounding the issues and shall attempt to resolve the matter in consultation with the Public Interest Panel, established pursuant to Article V of the ACPE Bylaws. Complaints that cannot be resolved by the ACPE Executive Director shall be considered at the next meeting of the Board.

22. Decisions of Other Accrediting and State Agencies and Relationship to ACPE Accreditation

Prior to making a decision to grant initial or continued accreditation or preaccreditation to a Doctor of Pharmacy program, the Board will consider the accreditation status of sponsoring institutions, during a period in which the sponsoring institution is the subject of: (i) a pending or final action brought by a state agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the state; (ii) a pending or final decision by a recognized agency to deny accreditation or preaccreditation; (iii) a pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or preaccreditation; (iv) probation or an equivalent status imposed by a recognized agency; and (v) a pending or final decision to deny, suspend, revoke, or withdraw the accreditation or preaccreditation or placement on probation any individual program offered by an institution also offering an accredited Doctor of Pharmacy program. Upon discovery of any decision referenced above by another accrediting agency, ACPE will within 30 days, initiate a written request for information regarding the action of the other accrediting or state agency and the effect of the cited issues on the ability of the Doctor of Pharmacy program to maintain compliance with the standards. The program will be given thirty (30) days to respond to such a request. The program's response and all relevant information will be provided to the Board for review to determine whether the circumstances leading to the other agency's decision impact the Doctor of Pharmacy program's ability to maintain compliance with the accreditation standards and

consideration as to whether action, including a possible adverse action, related to ACPE preaccreditation or accreditation is warranted.

If upon review of the program, the Board grants or continues preaccreditation or accreditation notwithstanding the actions and context of the circumstances set forth above, a report shall be provided to the U.S. Secretary of Education within thirty days of the action, thoroughly explaining why the previous action by a recognized institutional accrediting agency or the State against the parent institution does not preclude the granting or continuation ACPE preaccreditation or accreditation for the Doctor of Pharmacy program.

23. Reporting to the U.S. Department of Education

In addition to information relating to accreditation actions, documents are routinely submitted to the USDE including, but not limited to: the ACPE Annual Report; the ACPE Directory of Preaccredited and Accredited Programs; a summary of accrediting activities during the previous year; and proposed changes in policies, procedures, and standards that may relate to scope of recognition or compliance with recognition requirements. Notification of the name of any program accredited by ACPE, or of its parent institution, will be provided to the USDE if there is reason to believe that the institution or program is failing to meet its Title IV, HEA program responsibilities or is engaged in fraud or abuse, along with the reason for the concern. Moreover, upon request of the USDE, information will be provided regarding an accredited or preaccredited institution's compliance with its Title IV, HEA program responsibilities, including its eligibility to participate in Title IV, HEA programs, for the purpose of assisting the USDE in resolving problems with the institution's or program's participation in these programs.



ACCREDITATION COUNCIL FOR PHARMACY EDUCATION

ADDENDUM #1

CLARIFICATION OF STANDARDS

- 1.1 Use of Non-Pharmacist Preceptors in Enhancement of Interprofessional Practice-Based Educational Experiences
- 1.2 Simulations for Introductory Pharmacy Practice Experiences
- 1.3 Enrollment in Non-Traditional (Post-Bac) Doctor of Pharmacy Programs

1.1 USE OF NON-PHARMACIST PRECEPTORS IN ENHANCEMENT OF INTERPROFESSIONAL PRACTICE-BASED EDUCATIONAL EXPERIENCES

In the spirit of fostering innovation and encouraging more interprofessional education that meets the ACPE standards and guidelines, the ACPE Board offers the following guidance:

- Ideally, interprofessional practice-based educational experiences for pharmacy students should occur with a pharmacist preceptor as a member of the team.
- On occasion, high-quality interprofessional practice-based educational experiences may be available to pharmacy students that would need to be precepted by a non-pharmacist member of the health care team. Examples include but are not limited to a volunteer, indigent care, inner-city clinic IPPE or an APPE at an Area Health Education Center in an underserved, rural setting where, in each case, students from a number of health professions are all precepted by a primary care physician or nurse practitioner. In such cases:
 - Pharmacy faculty must be involved in defining, evaluating, and monitoring the quality of the educational experiences for the pharmacy students;
 - The non-pharmacist preceptor(s) must receive proper orientation to the pharmacy curriculum and the competency and outcome expectations of students, especially those involving preparation to serve on an interprofessional team.
 - Non-pharmacist precepted interprofessional practice-based educational experiences should be offered only as a small percentage of IPPE elective time and for no more than one elective APPE rotation. That is, such rotations must not supplant the required community and hospital IPPE experiences or the four core APPE rotations (community, hospital, ambulatory care, and general medicine), which must be precepted by a qualified, licensed pharmacist.

1.2 SIMULATIONS FOR INTRODUCTORY PHARMACY PRACTICE EXPERIENCES

Simulation is defined as an activity or event replicating pharmacy practice. For the purpose of satisfying IPPE expectations, simulation includes multiple types of scenarios based on the utilization of high fidelity manikins, medium fidelity manikins, standardized patients, role playing, Objective Structured Clinical Evaluations (OSCE), and computer based simulations. Simulation as a component of IPPE should clearly connect the pharmacy activity or delivery of a medication to a patient (whether simulated patient, standardized patient, or virtual patient).

Colleges and schools may choose to include structured simulation as part of their overall IPPE experience to meet their IPPE program goals and objectives. Colleges and schools are not required to include simulation experiences if IPPE objectives are achieved by other experiences. In addition to utilizing simulation as a component of IPPE, colleges and schools may choose to include simulation experiences within the didactic curricula.

In the 2016 Standards and Guidance documents, simulation was specifically addressed.

- Key Element 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.
- Guidance for Interprofessional Education: Standard 11
11b. Interprofessional simulation experiences – Colleges and schools are encouraged to develop interprofessional simulations to ensure the expectations of Key Element 11.1 are met. In addition to face-to-face interprofessional interactions, simulations can include virtual interprofessional engagement. College/school and/or university financial and physical resources needed to support these interprofessional activities should be anticipated. (11.2)
- Guidance for the Pre-APPE Curriculum: Standard 12
12f. Simulation within IPPE – A college or school may choose to include structured simulation as part of the overall IPPE to meet program goals and objectives. A college or school is not required to include simulation experiences as a portion of IPPE. Simulation is defined as an activity or event replicating pharmacy practice. Simulation closely mimics an actual pharmacy activity or delivery of a medication to a patient (whether simulated patient, standardized patient, or virtual patient). Colleges and schools are encouraged to develop interprofessional simulations. They are also encouraged to seek guidance from ACPE, if needed, on appropriate simulation experiences to meet IPPE program goals and objectives. (12.7)

12g. Appropriate use of simulation – General pharmacy practice simulations provided early in the curriculum are often helpful for students who have had limited exposure to

pharmacy practice. Simulation experiences are deemed appropriate when they: (1) are structured around a set of specific learning objectives, (2) involve structured assessment activities to assure that students have met the stated learning objectives, (3) are supervised by pharmacy educators, practitioners, or other appropriately trained faculty/facilitators, and (4) involve learning experiences that are difficult to achieve in actual practice, such as:

- High-risk, low-occurrence medical situations (e.g., CPR, medical emergencies, medications errors)
- When a state's Pharmacy Practice Act limits certain patient-care activities (e.g., immunization training)
- Hands-on learning opportunities that enhance student learning experiences (e.g., ensuring student pharmacists are exposed to important disease states which they may or may not experience in real patient-care settings) (12.7)

12h. Types of simulation – Colleges and schools may consider the use of actors, virtual-reality software, artificial models/manikins, or artificial/virtual environments in the patient-care simulations within IPPE. (12.7)

The Board has determined the following activities are **not acceptable** simulation:

- Student has hands on experience with vial manipulation, reconstitution, documentation, full garbing;
- Student prepares extemporaneous dosage forms pursuant to prescription for a simulated patient;
- Student is trained in point-of-care-testing equipment (e.g., A1c, cholesterol, blood glucose);

and the following activities **are acceptable** simulation:

- Student counsels a standardized patient on appropriate contraceptive choice given the patient's condition and preference;
- Student interviews a simulated, standardized patient and is assessed for professionalism, communication, accuracy, and quality of information;
- Student verbally communicates a simulated, standardized patient's history, medication-related problems, recommendations, and a plan for follow-up succinctly and effectively to a simulated prescriber.

Looking carefully at the activities listed above, it is evident that activities involving a student, a pharmacist (instructor/preceptor), and another person (either a simulated patient or another member of the health care team) are activities the Board identifies as acceptable simulation as a component of a student's IPPE. The activities above that included only the student and a pharmacist (instructor/preceptor) were viewed as student laboratory experiences, rather than acceptable IPPE simulated experiences.

The amount of simulation within the overall IPPE experience will vary from program to program based on needs and expectations. Prior approval is not needed, and guidance should be provided by this policy statement. Colleges and schools must document, however, during typical ACPE monitoring and evaluation processes, that their simulation experiences meet stated criteria for appropriate simulation experiences.

The ratio of students to faculty/facilitators in simulation will likely vary from experience to experience based on the characteristics of the simulation experience, the need for student supervision/monitoring, and the ability to appropriately assess student achievement of stated learning objectives. The qualifications of faculty/facilitators will be assessed much in the same manner as other faculty members are evaluated under Standard 19.

1.3 ENROLLMENT IN NON-TRADITIONAL (POST-BAC) DOCTOR OF PHARMACY PROGRAMS (APPROVED JUNE 2014)

The Board approved the following clarification, effective immediately: New admissions to a non-traditional (Post-Baccalaureate) Doctor of Pharmacy program accredited by ACPE must be limited to either: 1) pharmacists awarded a Baccalaureate degree from a five-year pharmacy program accredited by ACPE or the Canadian Council for Accreditation of Pharmacy Programs (CCAPP) and holding a valid license to practice pharmacy in the United States or Canada; or 2) pharmacists awarded a pharmacy degree from a non-US or non-Canadian program and holding a valid license to practice pharmacy in a US jurisdiction.



ACCREDITATION COUNCIL FOR PHARMACY EDUCATION

ADDENDUM #2

**ADVERSE ACTION POLICIES AND PROCEDURES
SUMMARY OF KEY STEPS**

ADVERSE ACTION POLICIES AND PROCEDURES SUMMARY OF KEY STEPS

Any program for which ACPE has given accredited with probation status, or denied accreditation status, or for which ACPE has withdrawn accreditation status has the right to appeal the Board's decision (paragraph 14). Should the Board's decision be upheld by the appellate body, the program may submit an application to establish a new Doctor of Pharmacy program. The application must be accompanied by the standard application fee and all policy and procedures applicable to application for new programs apply. A summary of key steps relating to denial or withdrawal follows:

1. Accredited with Probation
 - a. Take accredited with probation action (cf. paragraph 13) – discuss/list reasons (standards and/or administrative).
 - b. Notification of accredited with probation action sent to program and, at the same time to the Secretary, appropriate State licensing agencies, and appropriate accrediting agencies; notification provided to public via ACPE website.
 - c. Appeal Procedure (cf. paragraph 14).
 - d. Notification of final decision sent to program, and at the same time, the Secretary, appropriate State licensing agencies, and appropriate accrediting agencies; notification provided to public via ACPE website.
 - e. Within 60 days of a final decision, a brief statement summarizing the reasons for the accreditation with probation status and any official comments received from the affected institution and/or program will be sent in writing to the Secretary, appropriate State licensing agencies, and appropriate accrediting agencies, as well as posted to ACPE's website.

2. Denial (pertains to initial accreditation for precandidate)
 - f. Take denial action (cf. paragraph 13) – discuss/list reasons (standards and/or administrative).
 - g. Notification of denial sent to program and, at the same time to the Secretary, appropriate State licensing agencies, and appropriate accrediting agencies; notification provided to public via ACPE website.
 - h. Appeal Procedure (cf. paragraph 14).
 - i. Notification of final decision sent to program, and at the same time, the Secretary, appropriate State licensing agencies, and appropriate accrediting agencies; notification provided to public via ACPE website.
 - j. Within 60 days of a final decision, a brief statement summarizing the reasons for the denial and any official comments received from the affected institution and/or program will be sent in writing to the Secretary, appropriate State licensing agencies, and appropriate accrediting agencies, as well as posted to ACPE's website.
 - k. Option to reapply as new college or school of pharmacy
 - a. Complete new submission, including new application fee.

3. Withdrawal (pertains to established accreditation for precandidate, candidate, and

- accredited status) of failure to advance from precandidate status in required timeframe
- a. Take withdrawal action (cf. paragraph 13) – discuss/list reasons (standards and/or administrative)
 - b. Notification of withdrawal sent to program and, at the same time to the Secretary, appropriate State licensing agencies, and appropriate accrediting agencies; notification provided to public via ACPE website.
 - c. Appeal procedure (cf. paragraph14)
 - d. Notification of final decision sent to program, and at the same time, the Secretary, appropriate State licensing agencies, and appropriate accrediting agencies; notification provided to public via ACPE website.
 - e. Within 60 days of a final decision, a brief statement summarizing the reasons for the withdrawal and any official comments received from the affected institution and/or program will be sent in writing to the Secretary, appropriate State licensing agencies, and appropriate accrediting agencies, as well as posted to ACPE's website.
 - f. Option to reapply
 - a. Submit application as new college/school of pharmacy, including fee.
 - g. Students
 - a. New students (no new enrollees under accreditation status)
 - b. Established students – see Teach Out Section of Policies and Procedures Manual.



ACCREDITATION COUNCIL FOR PHARMACY EDUCATION

ADDENDUM #3

PROCEDURE FOR APPLICATION FOR NEW DOCTOR OF PHARMACY PROGRAMS

ADDENDUM #3

PROCEDURE FOR APPLICATION FOR NEW DOCTOR OF PHARMACY PROGRAMS

(Approved by ACPE Board of Directors January 9-11, 2009)

1. New program **Draft Application** due January 15th.
The application must include a mapping of the proposed curriculum to faculty required to deliver that curriculum. The faculty required must then be mapped to a 5-year hiring plan and 5-year pro forma.

ACPE expects new program deans, to:
 - a. Have held a previous administrative position in academic pharmacy at the dean, associate dean, or assistant dean level or a comparable leadership position outside academia;
 - b. Attend the “New Deans School” offered by AACCP or a comparable training program if not previously served as dean of an ACPE-accredited program; and
 - c. Attend site visitor training or self-study workshop offered by ACPE.

2. ACPE **staff on-site consultation** with program in early spring.
Following the on-site consultation, the ACPE staff member is to provide brief written feedback to the college or school of pharmacy highlighting recommendations for the application. Staff disclaimer must be included in this feedback.

3. **Final Application** due April 1.

4. Final application reviewed by **Application Review Team**
Application Review Team will consist of experienced, trained evaluators and may include: an ACPE staff member; a former Board member; a dean and a faculty member representing different areas of expertise; and a practitioner.

The Application Review Team will conduct its review as follows:
 - a. Each member receives copy of final application;
 - b. Each member receives copy of Thresholds for Authorizing an On-site Evaluation document
 - c. Each member receives copy of the Standards;
 - d. Conference call three/four weeks later;
 - e. Draft report on application to be prepared by ACPE staff member and reviewed/endorsed by full team; and
 - f. Final Report of Application Review Team goes to Board, using primary and
 - g. secondary reviewer procedure as per ACPE custom.

5. June Board meeting
 - a. Review of program’s Final Application
 - b. Review Report of the Application Review Team
 - c. Personal appearance with program officials (maximum of three) to address Board

- questions
- d. Board makes Decision
 - i. Yes, to authorize Precandidate Evaluation Visit
 - ii. No, recommend resubmission within one academic year (repeat application could be received and reviewed at either next January or June meeting of the Board)
 - iii. No, request withdrawal of application
 - iv. Applicant requests withdrawal of application, can resubmit within one academic year.
6. Fall Precandidate Evaluation Visit (Comprehensive On-Site Evaluation)
- a. Evaluation Team made up of as many of the Application Review Team members as possible, fill in gaps with experienced site reviewers, current Board member need not be on visit
7. January Board meeting
- a. Review ETR from Precandidate Evaluation Visit
 - b. Teleconference with program Dean and his/her leadership team to address Board questions only
 - c. Board makes Decision:
 - i. Yes, grant Precandidate Status; status to be affirmed at next Board meeting based on report of continued progress
 - ii. No, denial of Precandidate Status; adverse action, subject to appeal. Program can request 2nd on-site evaluation to consider Precandidate status within the next two consecutive Board meetings at which accreditation actions are taken (fee applies; program can only make such a request one time before being required to restart application process).
 - iii. Program withdraws application prior to Board consideration; can request 2nd on-site evaluation to consider Precandidate status for following cycle (fee applies; program can only make such a request one time before being required to restart application process).
8. June Board meeting
- a. Review report and any additional requested information from program from the previous January Board meeting
 - b. Board makes Decision:
 - i. Yes, Precandidate Status affirmed & Board authorized spring comprehensive on-site evaluation for consideration of Candidate status);
OR
 - ii. No, Precandidate Status withdrawn (e.g., an adverse actions)
9. If Yes, Precandidate Status, students would be enrolled during fall term, Year 1 (Note: if

program matriculates students before receiving Precandidate Status, ACPE would not consider granting accreditation status until AFTER the program has produced graduates (who likely would NOT be eligible for state licensure—this per previous ACPE policy. See policy above on Preaccreditation)

10. Spring term of Year 1, Evaluation for Consideration of Candidate Status (Comprehensive On-Site Evaluation) Team composition:
 - a. Current Board member
 - b. ACPE staff member
 - c. One member from Application Review Team
 - d. Other trained experienced site team members

11. June Board meeting
ACPE Board reviews:
 - a. Evaluation Team Report;
 - b. Supplemental materials requested of the program; and
 - c. Teleconference with program officials to address Board questions, if needed.
Board Decision:
 - a. Yes, Candidate Status for 2-year term only
 - b. No, remain at Precandidate Status; action would include:
 - i. Areas for improvement; AND
 - ii. Establishment of next evaluation; OR
 - iii. Withdrawal of Accreditation Status (an adverse action)

12. Continuation of Candidate Status (2-year term only) (Focused on-site evaluation)
Team composition:
 - a. ACPE staff member
 - b. Current or former Board member
Board reviews:
 - i. Evaluation team report and any supplemental materials provided by the college or school;
 - ii. Recommendation from a Board member (primary reader) and ACPE Staff; and
 - iii. Teleconference with Program officials to address Board questions, if needed.
Board Decision:
 - a. Grant extension to Candidate Status (2 years maximum) and authorization of Accredited Status On-Site Evaluation Visit term prior to graduation of inaugural class;
OR
 - b. Withdrawal of Accreditation Status (adverse action).

13. Consideration of Accredited Status (Comprehensive On-site Evaluation)

Team composition:

- a. ACPE staff member
- b. 1 member from Application Review Team (if possible)
- c. Other trained, experienced site team members

14. June Board meeting

Board reviews:

- a. Evaluation Team Report;
- b. Supplemental materials requested of the program; and
- c. Teleconference with program officials to address Board questions, if needed

Board Decision:

- a. Yes, Accredited Status granted (2 years); schedule next on-site evaluation, a Continuation of Initial Accredited Status Evaluation Visit (to establish eight-year cycle between self-studies) and request updated report of notable changes in any or all standards, but not a self-study as before; and request any interim monitoring before the Continuation of Initial Accredited Status Evaluation Visit;
- b. No, hold in Candidate Status with reasons (i.e. noting unmet standards) and monitoring details (NOTE: a program can hold a developmental accreditation status (i.e. Precandidate and Candidate combined) for a maximum of five years; OR
- c. Withdrawal of Accreditation Status (adverse action)



ACCREDITATION COUNCIL FOR PHARMACY EDUCATION

ADDENDUM #4

ACPE TRAVEL GUIDELINES

TRAVEL GUIDELINES FOR ACPE Revised February 11, 2011

It is the policy of ACPE to reimburse for actual travel expense. Persons traveling on ACPE business are entitled to transportation, accommodations and service that meet reasonable and adequate standards for convenience, safety, and comfort. In applying this general policy, we require that those traveling for ACPE will use the same care when incurring expenses that they would use if the expenses were their personal responsibility. ACPE reserves the right to adjust reimbursement for extravagant or unreasonable expenses. Any concerns regarding travel or travel expenses should be directed to the Assistant Executive Director/Director, Operations and Human Resources.

Air Travel

- ACPE participates in the United Perks Plus program with United Airlines to obtain free airline tickets and upgrades, which ACPE uses for business travel, and the code number for United Perks Plus should be used when booking flights on United. While United is
- the preferred airline, the lowest fare should be obtained using the best routing for appropriate flights.
- ACPE does not reimburse first-class or business class air travel, unless unusual circumstances exist, i.e., same price as coach class, etc. The Executive Director must approve, in advance, all first class upgrade coupon purchase and usage.
- Flights should be booked with advance notice (when possible, greater than 21 days in advance) to take advantage of lower airfares and non-refundable tickets.
- Flight itineraries should be sent to the appropriate ACPE administrative staff to ensure coordination of the arrangements, to provide emergency service as needed, to monitor location of travelers for security purposes, and to manage the expenses. Best routings at the lowest fares, but also at reasonable travel times, should be booked (i.e., employees are not required to fly late night or red-eye flights). ACPE administrative staff is also available to assist with booking your flights if preferred by the traveler.
- If the traveler is booking travel in conjunction with another non-ACPE trip, the ACPE-reimbursable airfare must be obtained from the Assistant Executive Director/Director, Operations and Human Resources, prior to booking the combination ticket.
- ACPE maintains travel accident insurance for all staff and ACPE volunteers for travel worldwide. Additional insurance is also included when the airfare is charged to the ACPE credit card.

Global Travel Policy

The following policy of ACPE will be applicable to ACPE employees, members of the ACPE Board of Directors, site visit members, committee members, commission members, consultants

and all other persons traveling globally on behalf of ACPE. Such persons are referred to individually as a “Representative” and collectively as “Representatives.” For purposes of this policy, “global travel” shall include travel to any location in the world including locations within the United States, the Commonwealth of Puerto Rico and U.S. Territories.

ACPE continuously monitors travel warnings and travel advisories of the U.S. Department of State, U.S. Department of Health and Human Services, the U.S. Center for Disease Control and Prevention (CDC) and other appropriate agencies. When a U.S. agency issues a travel warning that recommends that Americans avoid traveling to a particular country or location, ACPE will not request travel, or sanction travel, to any such country or location by any Representative or Representatives. When any such agency issues a warning or advisory of lesser severity, the ACPE Executive Committee in consultation with the Executive Director will determine whether travel to the designated country or location will be sanctioned by ACPE.

Any Representative may elect to decline travel to any particular country or location by reason of concerns for his or her health, security, well-being or for any other reason. ACPE, in its sole discretion, may require any Representative traveling to a global location on behalf of ACPE to execute a written agreement to be prepared by ACPE concerning the terms and conditions in respect to such travel.

Lodging

- All ACPE travelers will be reimbursed for his or her own guest room. Hotel accommodations will be booked by ACPE administrative staff.
- Mileage Reimbursement, Tolls, Parking and Other Ground Transportation
- Travelers will be reimbursed for mileage and tolls incurred. Mileage will be reimbursed at a rate that corresponds to the IRS’s standard mileage allowance.
- When automobile transportation is used in place of air travel, mileage reimbursement is limited to comparable air travel expense (including the lowest available, reasonable airfare, and appropriate ground transportation), identified by the Assistant Executive Director/Director, Operations and Human Resources.
- Parking is a reimbursable expense. Self-parking is encouraged because valet parking is generally more costly. However, if safety appears to be in question, then valet parking should be used.
- Limos, taxis, airport shuttles are reimbursable expenses. Care should be taken to use a reasonable, cost-conscious means of ground transportation.
- Rental cars are not a reimbursable expense, unless prior approval has been received by the Assistant Executive Director/Director, Operations and Human Resources or the Executive Director.

Meals

Reasonable meal expenses are reimbursable when the traveler is on ACPE business. An itemized paid receipt is required.

Additional Reimbursable Expenses

- Reasonable and customary tips
- Room service for reimbursable meals
- Phone calls and faxes for ACPE business
- Express mail, air freight or other postage for ACPE business
- Exercise facility usage fees (not including spa charges)
- ACPE will reimburse an average of \$20.00 per day of travel in actual expenses for in-room movie charges, mini-bar charges, laundry and dry cleaning

Reimbursement

1. Travelers pay their expenses directly and submit an ACPE expense statement for reimbursement. The exceptions are: airfare – this may be charged to ACPE’s account when booked with ACPE staff; hotel – room and tax will be charged to an ACPE master account if the reservation is booked by rooming list, or if the reservation is booked by ACPE staff.

2. Original receipts should be submitted for all expenses. If on occasion a receipt is lost, this must be noted on the expense report.

- a. Airfare – passenger coupon (even if charged to ACPE)
- b. Hotel – original folio plus proof of payment (if room and tax charged to ACPE master account, receipt will be required for reimbursable incidental charges)
- d. Car – rental agreement plus proof of payment (only if rental has prior approval of the Director, Operations and Human Resources and/or the Executive Director)
- e. Meals - credit card copy plus itemized receipt or cash register itemized receipt, including the names of the people in attendance.
- f. Ground transportation – receipt from driver
- g. Other – credit card charge slip or itemized cash register receipt

ADDENDUM TO TRAVEL GUIDELINES FOR ACPE TRAVEL

Name of meeting or site visit:
Arrival time:
Departure time:
ACPE contact:

To qualify for reimbursement of travel expenses, please follow the items listed below if you prefer to book your own airline reservations. Also, attached are the ACPE Travel Guidelines for further details.

Flights

- The arrival and departure guidelines above must be followed. If problems are encountered, contact the ACPE contact person listed above or the Assistant Executive Director, Administrative Services (Cynthia Avery at cavery@acpe-accredit.org or 312-664-3575)
- Flight reservations should be booked 21 days in advance whenever possible, but never less than 7 days in advance to obtain your seat preference and the best possible airfare. Anything less than 7 days, must have approval of the ACPE Contact person listed above or the Administrative Manager, Operations (Cynthia Avery at cavery@acpe-accredit.org or 312-664-3575)
- Any airfare over \$700 (roundtrip) must have prior approval of Administrative Manager, Operations (Cynthia Avery at cavery@acpe-accredit.org or 312-664-3575)
- Flights must be booked in Coach Class; ACPE does not reimburse for first class or business class air travel fares.
- A flight itinerary must be sent to ACPE immediately upon booking the reservations. This is required to provide emergency service as needed, to monitor location of travelers for security purposes, and because for certain trips ACPE must be notify others of the traveler's arrival and departure times (i.e., site team visits for ground transportation arrangements, etc.). This itinerary will also be used as the basis for your hotel room reservations, which will be booked by ACPE staff.
- If you are including personal or other business travel with ACPE-paid travel, you must obtain the comparison airfare for the ACPE portion of your travel prior to your trip to confirm the amount that will be reimbursed by ACPE. This should be done by email or phone to your ACPE contact listed above.

Hotels and other travel needs

ACPE staff will book all hotel rooms for ACPE travel. Once you have your flights booked and staff receives your itinerary, a room will be booked and you will be notified by email to confirm. If required, ACPE staff will also book rental car reservations.



ACCREDITATION COUNCIL FOR PHARMACY EDUCATION

ADDENDUM #5

GUIDELINES FOR SUBSTANTIVE CHANGE POLICIES AND PROCEDURES

Procedures for Reporting Substantive Change

In general, a program considering or planning a substantive change should notify ACPE early in the institution's planning. Such notification will provide an opportunity for a program to seek consultation from ACPE's professional staff regarding the potential effect of the change on the accreditation status and the procedures to be followed. Notification of ACPE may require the submission of a comprehensive academic plan demonstrating the program's continued compliance with the standards.

The Comprehensive Academic Plan

The academic plan submitted to ACPE should include the following information regarding the substantive change, where applicable:

1. Abstract
 - Describe the proposed change.
 - Provide a timeline for implementation of the substantive change.
 - State the projected number of students affected by the change, if applicable.
 - Describe the instructional delivery methods that will be used to implement the change, if applicable.
2. Background Information
 - Provide a clear statement of the nature and purpose of the change in the context of the program's mission and goals.
 - Discuss the rationale for the change.
 - Provide evidence of inclusion of the change in the program's ongoing planning and evaluation processes.
 - Describe any changes to the College or School's organizational structure that will be implemented as a result of the substantive change.
 - Include documentation that faculty and other groups were involved in the review and approval of the change.
 - Describe an exit strategy for protecting students if the proposed initiative fails to be viable.
3. Curriculum
 - Describe any modifications to curriculum, including the teaching and learning processes used to deliver the curriculum, which will be implemented as a result of the initiative.
 - Describe the College or School's technology capacity to teaching and learning effectively.
 - Describe the plan for curricular assessment; including assessment of teaching strategies, indicators for student learning and the curriculum, related to the substantive change.

4. Students

- Describe any change in the program's policies and procedures for recruitment that will be implemented as a result of the substantive change.
- Describe modifications to the program's Student Affairs area which will be implemented as a result of the substantive change, if applicable.
- Describe the proposed methods the program will utilize to ensure adequate professionalization of students for substantive changes involving the establishment of campuses at separate geographic locations or involving distance learning techniques.

5. Students

- Provide a complete roster of faculty employed to teach in the program.
- Describe faculty and staff positions required to fully implement the substantive change.
- Include plans for recruiting faculty and staff.
- Describe the impact of the new initiative on faculty workload.
- Describe the actual and planned mechanisms for faculty development related to the substantive change.

6. Library and Learning Resources

- Describe the library and educational resources available to support the substantive change.

7. Physical Facilities

- Provide a description of physical facilities and equipment to support the initiative.
- Include a feasibility study of available practice sites, including:
 - A description of the number and types of sites, and the level of practice at the sites.
 - Assess the impact of the substantive change on the existing program.

8. Financial Resources

- Provide a business plan that fully describes the financial resources to support the change.
- Provide a cash flow analysis for the first year of implementation.
- Demonstrate with supporting documentation that adequate funds will be available for a minimum of 1 year for:
 - Operations
 - Construction/capital development (where appropriate)
- An unencumbered reserve fund to be used to implement the Exit Strategy

Institutional or Collegiate Reorganization

Those colleges and schools in operation, that have an ACPE-accredited program and propose to become affiliated with or become an integral part of another institution, or propose to implement substantive changes in their institutional or collegiate organization and administrative structure, should notify ACPE of such proposals. Should a change of ownership that results in a change of control be effected, an on-site review may be required and conducted as soon as practicable but no later than six months after the change of ownership.

Distance Campuses and Distance Education

ACPE defines a distance campus as a site other than the main (original) campus from which faculty deliver significant components of the Doctor of Pharmacy didactic curriculum either live and/or via distance education (defined below) or at which a group of students receive didactic instruction in any format during any of the early years of the Doctor of Pharmacy Program (i.e., P1-P3 years). Sites used by the college or school for the coordination of practice experiences are not classified by ACPE as a distance campus if didactic components of the Doctor of Pharmacy curriculum are not delivered to or from the site.

ACPE defines for its accreditation and monitoring purpose that the term distance campus is equivalent to terms such as satellite campus, branch campus, and other such labels.

ACPE has adopted the definition of distance education developed by the United States Department of Education to be the use of one of the technologies listed below to deliver a significant portion of the didactic component of the Doctor of Pharmacy curriculum to students who are geographically separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies used to support distance education may include:

- 1) The internet;
- 2) One-way and two two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
- 3) Audio conferencing; or
- 4) Video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed in (1) through (3) above.

ACPE requires one-year advance notice (minimum of 12 months before arrival of students) for the addition of a distance campus or the implementation of distance education for an existing college or school. This notification is required to allow ACPE sufficient time to conduct the monitoring to ensure readiness and continued compliance with the standards. Failure to comply with the one-year notice requirement constitutes grounds for review and potential action under Section 13 of this manual.

ACPE requires there to be a single dean with overall responsibility for the college or school and there to be one committee structure serving programmatic needs for all sites (i.e., one curriculum committee, one admissions committee, one grievance committee, etc.).

ACPE requires faculty, staff, and students at any distance campus to be integrated fully into the academic, professional, and social life of the college or school. Evidence of this integration includes distance campus faculty and students having committee assignments, distance campus students being engaged in professional organizations, distance campus faculty and staff having comparable research, scholarly activities, and faculty development opportunities.

ACPE requires all students, regardless of site, to have comparable access to faculty, advising, academic affairs, teaching and learning technology, student services, professional organizations, and library resources.

ACPE requires that all programs offering distance education have processes in place through which the program establishes that the student who registers in a distance education program is the same student who participates in and completes the course or program and receives the academic credit awarded.

The accreditation review process applies to the Doctor of Pharmacy program in its entirety. Non-compliance or partial compliance with the standards at one site (main campus or distance campus) will impact the accreditation status of the entire program.

When one or more groups of students receive didactic instruction at distance campuses as well as the main campus location, ACPE, as a component of its routine monitoring (e.g., NAPLEX examination scores), will compare outcomes from each distance campus with the outcomes from the main campus. Colleges and schools must provide explanations and address concerns of this nature and, if warranted, take corrective action.

Evaluation by ACPE

The Board will review the comprehensive academic plan to determine the need to further assess its impact on the total program's ability to meet the standards. The circumstances provided may present the need for additional review and reconsideration of accreditation in accord with standard evaluation and operational procedures or appropriate monitoring, such as a focused on-site evaluation by members of the Board, professional staff and additional team members as appropriate.

Non-Compliance with Substantive Change Reporting

If a program fails to follow this substantive change policy and its procedures, the accreditation of the program may be placed in jeopardy.



ACCREDITATION COUNCIL FOR PHARMACY EDUCATION

ADDENDUM #6

GUIDELINES FOR INTERIM REPORTS DURING THE ACCREDITATION TERM

Guidelines for Interim Reports during the Accreditation Term

Interim Reports During the Accreditation Term are an important mechanism by which ACPE monitors and evaluates a college or school's compliance with accreditation standards between on-site evaluation visits. Such written interim reports may be requested for a number of reasons, such as:

- to monitor progress of a program that is still in its development phase;
- to provide an update or additional details on issues or initiatives on which a college or school is working; or
- when a specific area of concern regarding a standard has been identified by the college or school (for example, in a self-study) or by ACPE.

The ACPE Board of Directors may request an interim report following a comprehensive on-site evaluation, a focused on-site evaluation, a substantive change, or a previous interim report. When a focused visit is scheduled, ACPE generally requests the college or school to submit an interim report four to six weeks ahead of the visit. Specific issues to be addressed in the interim report are itemized in an *Actions and Recommendations Letter* or an *Interim Action Letter* from ACPE. Generally, each issue will refer to a specific standard or combination of standards.

The purpose of this document is to improve the efficiency of the reporting, submission and evaluation processes, to minimize unnecessary work and effort by all parties, and to provide additional guidance to colleges and schools regarding reporting expectations. Terminology used in ACPE's Actions and Recommendations and Interim Action Letters (i.e., when an interim report is requested) is explained below so that the expectation, content, and level of detail required by ACPE are more clearly communicated and appropriately addressed by the college or school. ACPE urges colleges and schools to ensure that their reports:

- are concise and do not exceed the word limits detailed below;
- wherever possible, primarily focus on changes that have already been implemented and assess the impact of such changes on the program; and
- when appropriate, make judicious use of appendices to illustrate specific points in the main text

Content and Required Level of Detail

ACPE uses three standardized terms to indicate the **required level of detail** when an interim report is requested:

- **A copy of [document name]:** The college or school is required to submit the document or table (e.g., a strategic plan, an evaluation plan, faculty bylaws, faculty resource table). Generally, no additional explanation is required unless specifically requested. A short explanatory paragraph, however, should be provided if the document contains new information that may impact future compliance with standards, for example, an initiative or objective described in a strategic plan.
- **Brief description:** The college or school should provide ACPE with a brief description of progress or developments on the issue* in question since the last report or accreditation review. The text of the report (excluding any tables, charts, appendices, etc.) must **not exceed 400 words** (*approximately one page*) **per requested issue**.

- **Detailed description:** This should include a detailed description of progress and/or developments on the issue* since the last report or accreditation review and, where applicable, the college or school's evaluation of the impact and/or effectiveness of relevant strategies and initiatives. The text of the report (excluding any tables, etc.) must **not exceed 800 words** (*approximately two pages*) **per requested issue**.

* In Actions and Recommendations Letters and Interim Action Letters, an "issue" is generally indicated as a bulleted item under a specific Standard. For example, if a cited Standard had three main bullets associated with it, this would constitute three requested issues.

Colleges and schools that submit interim reports in which the above word limits have been exceeded may be requested to resubmit an amended report that complies with the specified word limits. The deadline for re-submission will be 10 business days from the original due date.

The specific wording of ACPE's request will clarify the required **scope and content** that needs to be addressed by the college or school. ACPE will endeavor to ensure that requests for information are clear so that the college or school's response can be appropriately focused. If the scope of a request is not clear, please communicate with ACPE staff. If applicable, requests for additional requirements (such as tables or charts) will be clearly stated in ACPE's letter.

Use of Appendices

As noted above, when colleges and schools are submitting appendices, such documents should be used judiciously, primarily to validate points made in the interim report. Unless specifically requested or necessary, documents do not need to be submitted in their entirety; in most cases, the applicable section(s) will suffice. If an appendix contains information critical for ACPE's evaluation of ongoing compliance with standards, such as details of a new initiative in a strategic plan, that information should be included in the text of the report. The text of the report itself should constitute the main component of the college or school's response and the primary basis for ACPE's analysis and evaluation. When reference is made to a specific aspect of an appendix, the location of the information (e.g., page number, table number) should be clearly stated.

Administrative Changes since Last On-Site Evaluation

In addition to the items specifically requested by ACPE, please **LIST** (include name, position, and effective date) any administrative changes that are relevant to the professional degree program that have been made at the college, school, or university since the last on-site evaluation or interim report. Commentary on these changes (e.g., the impact on the program and any action taken or proposed by the college or school) is not specifically required by ACPE at the time of the submission of the report, but may be subsequently requested if deemed necessary. If the college or school elects to provide a commentary on any change, details should be brief. Examples of administrative positions for which changes should be reported include:

- At the university level: president, chancellor, provost, or equivalent positions
- At the college or school level: deans, department chairs, divisional directors, experiential coordinator

Inclusion of Additional Information in the Interim Report

It is ACPE's expectation that the college or school will continue to address all the issues raised by the last on-site evaluation team and documented in the Evaluation Team Report, even if the college or school is not subsequently specifically requested to submit an interim report on the issue(s). When submitting an interim report, however, the college or school may elect to also provide an update on the issues not specifically requested in the Actions and Recommendations or Interim Action Letter. Such "voluntary" reporting should be a "brief description" as described above.

Furthermore, the college or school may wish to proactively report to ACPE notable new developments or enhancements at the college or school or in the program. Likewise, this "voluntary" reporting should be a "brief description." If a development constitutes a "substantive change" for the program (as defined in Section 17 of ACPE's Policies and Procedures) the college or school is requested to submit details via a separate written communication to ACPE.

Format of the Report

ACPE requires the Interim Report to be submitted electronically as a **single PDF**. Ideally, the electronic version should be submitted by email as an attachment(s).

Should you choose to submit a hard copy, ACPE requests that any printed copies be submitted in an **unbound format** - not spiral bound, not in a binder/file; binder clips are preferable. This request is intended to save the college or school the time and expense of specialized binding, and to facilitate the handling and distribution of reports by the ACPE staff.

Word limits for responses have been provided above. The respective word limits (400 and 800 per requested issue) provide an indication of the level of detail required by ACPE. For short reports (e.g., less than six pages), an index is not necessary. For longer reports and/or for those including several appendices, an index is requested.

Standardized Tables

To facilitate evaluation, ACPE may request that certain data be submitted in a standardized format using an ACPE-designed template. Examples are:

- Faculty Resource Report
- Faculty Addendum
- Pharmacy Practice Experience (APPE & IPPE) Capacity Charts

These forms may be requested by sending an email to csinfo@acpe-accredit.org.

Submission Deadline

This is the last date by which the report should be received at ACPE's office. As the members of the ACPE staff usually have to review a high number of interim reports per cycle, submission by the due date is essential; however, whenever possible early submission is most appreciated.

Some Frequently Asked Questions

- **Should we include information relevant to the issue even if it has been previously submitted to ACPE?**

There is no need to repeat information previously reported or submitted to ACPE; such information can, however, be referenced, either by directing ACPE to a previous report or to another section within the interim report itself. Interim reports should update previously submitted data and describe any new developments. ACPE staff review previous reports and documents when analyzing the interim reports, and relevant background information is summarized for the members of the Board to assist them in their deliberations and evaluation.

- **We are considering or planning “substantive change” at the college or school. Should we include it in our Interim Report and, if so, where?**

*If the college or school wishes to advise ACPE about new developments or initiatives affecting the program but unrelated to the issue(s) covered by the interim report, this should be the subject of a **separate written communication**, so that the issue can be appropriately addressed in accordance with ACPE’s policies and procedures. Furthermore, “Substantive Changes” is a separate item on the agenda of board meetings, so separate documentation is appreciated. Developments defined by ACPE as “substantive change” must be reported in accordance with ACPE’s Substantive Change Policy.*

- **If we have a question regarding our Interim Report, to whom should it be addressed at ACPE?**

Questions relating to your Interim Report can be emailed to csinfo@acpe-accredit.org. Your question will then be referred to the appropriate member of the ACPE staff. You can also call the ACPE office at (312) 664-3575



ACCREDITATION COUNCIL FOR PHARMACY EDUCATION

ADDENDUM #7

PROGRAMMATIC TEACH-OUT PLAN FORM

Programmatic Teach-Out Plan Form

Please submit a complete copy of the proposed Teach-Out Plan(s) cross-referenced to the following checklist:

Item #	Criteria	Teach-Out Plan Page #
	The Teach-Out Plan provides:	Page #
1.	That the teach-out program ^a will deliver equitable treatment of students (i.e., existing and teach-out students) and has the necessary experience, fiscal, academic, clinical, and physical resources, as well as support services to accommodate all students.	
2.	That the teach-out program will deliver an educational program that is reasonably similar in content, structure, and scheduling to what was provided by the program that is ceasing operations.	
3.	That the teach-out program has the capacity to provide all students with all instruction and services which the students originally contracted and paid but did not receive due to the closure of the program.	
4.	That the teach-out program will provide students with information and sufficient advance notification about additional charges, if any.	
5.	That the closing program ^b will provide a list of student names enrolled with address, phone number, and the estimated graduation date for each student to the teach-out program.	
6.	A description of where the teach-out will occur: the closing program, the teach-out program, or a combination. This description should include likely programs for a Memorandum of Understanding (MOU).	
7.	Whether the teach-out program intends to retain any faculty from the closing program or add additional faculty for the purposes of the teach-out. A list of faculty responsible for the teach-out program along with their qualifications must be included.	
8.	That the teach-out program will, upon a set schedule, offer each student enrolled at the closing program a reasonable opportunity to promptly resume and complete the course of study.	
9.	That the closing program will provide notice in a timely manner to each student of the availability of the teach-out and the teach-out program will provide information to students enrolled at the closing program pertinent information regarding the teach-out program.	
10.	A clear description of the financial responsibilities of all parties.	
11.	Which institution will award the degree.	
12.	Whether students would be entitled to begin training or re-enroll at the teach-out program if the students had enrolled but not yet started their course of study at the closing program or students who are on leave of absence from the closing program.	
13.	That the closing program will provide the teach-out program copies of academic and financial aid records for the students being taught-out and the teach-out program will maintain separate records and document performance for the students being taught-out.	
14.	Appropriate notification to ACPE and compliance with applicable federal and state law.	

^aTeach-out program: Program providing instruction and support for students

^bClosing program: Program in jeopardy of losing accreditation or is no longer accredited by ACPE



ACCREDITATION COUNCIL FOR PHARMACY EDUCATION

ADDENDUM #8

CONFLICT OF INTEREST TEMPLATE

CONFLICT OF INTEREST – CONSULTANTS, COMMISSION MEMBERS, TASK FORCE MEMBERS AND OTHER PERSONS AFFILIATED WITH ACPE

The Accreditation Council for Pharmacy Education (ACPE) is an independent, autonomous agency charged by its Articles of Incorporation, By-Laws, *Policies and Procedures* and policies established by the ACPE Board of Directors with the important responsibility of (i) the evaluation and accreditation of the educational programs of colleges and schools of pharmacy, (ii) the evaluation and accreditation of the providers of continuing pharmacy education, (iii) the evaluation of international programs, and (iv) the administration of other related ACPE activities (collectively, the “Professional Program” or the “Professional Program of ACPE”).

Due to the sensitivity of ACPE’s activities administering the Professional Program of ACPE, strict policies are maintained regarding conflict of interest or the appearance thereof, by ACPE Board members, evaluation team members, professional staff, consultants, commission members, task force members and other representatives (collectively “ACPE Affiliates”) participating in the Professional Program. To avoid actual or perceived conflicts of interest, ACPE Affiliates must agree in writing to abide by the following policies:

A. On-Site Evaluations and Accreditation Decisions

No ACPE Affiliate will participate in a site visit, or in discussions or voting at ACPE board meetings, if the program being visited or discussed is:

1. One in which the ACPE Affiliate or an immediate family member (defined as a spouse, life partner, child, parent, or sibling) has been connected as a student, graduate, faculty member, administrative officer, staff member, employee, or contracted agent within the past five years.
2. One in which the ACPE Affiliate or an immediate family member has interviewed for employment within the past two years.
3. Located in such close geographic proximity to another program or institution with which the ACPE Affiliate has some affiliation or relationship such as those outlined herein, that the programs or institutions involved can be reasonably considered as competing with each other for financial or other advantages.
4. Part of a university system where the ACPE Affiliate is employed.
5. Engaged in substantial cooperative or contractual arrangements with the program or institution of the ACPE Affiliate or an immediate family member.
6. One which has engaged the ACPE Affiliate or an immediate family member as a paid consultant within the past five years on matters such as program development or evaluation, organizational structure or design, and institutional management of finances.
7. One in which the ACPE Affiliate or an immediate family member has any financial, political, professional, or other interest that may conflict with the interests of ACPE.
8. One in which the ACPE Affiliate believes that there may be a conflict due to other circumstances, such as participation in accreditation or review of the program for other agencies, close personal relationships with individuals at the program, etc.

9. One in which the program has reason to believe, and can document to the satisfaction of ACPE that the participation of the representative could be unfairly prejudicial.

B. Conflict Determinations

ACPE Affiliates must be aware of conflicts of interest or the appearance of conflicts of interest in all functions of ACPE. The determination of the existence of a disqualifying conflict of interest or appearance thereof is, many times, subjective in nature. While the above guidelines may be helpful in respect to site visits and other business activities of ACPE, they do not and are not meant to be all inclusive. It is incumbent upon the person involved to advise ACPE, even in the most remote circumstances, of any facts that could lead to potential conflict problems in order to permit the appropriate decision to be made with regard to possible disqualification. In accordance with the long standing policies of ACPE, where it is determined that a conflict or appearance of conflict requires disqualification, the person involved will be excluded from any accreditation activities that maybe affected by the conflict. The strength of ACPE as an accreditation agency has been and continues to be its ability to administer the accreditation process in a fair and unbiased manner.

C. Confidentiality

All information related to the accreditation of colleges and schools of pharmacy and providers of continuing pharmacy education, the evaluation of international programs and any and all other ACPE activities shall be held in complete confidence and no such information shall be revealed to any third party unless authorized by ACPE or required under court order.

The purpose of the above is to guide you in your service to ACPE and to protect the integrity of the Board. Your relationship as an ACPE Affiliate is contingent upon your signing the statement below acknowledging your understanding of your commitment and your agreement to abide by the above terms and conditions.

Sincerely,

Accreditation Council for
Pharmacy Education (ACPE)

Statement of Commitment

I have read and understand the above undertakings and agree to conduct myself in accordance with the above terms and conditions during my tenure as an ACPE Affiliate (Effective January 1, 20XX – December 31, 20XX)

Dated this _____ day of _____, 20____.

Name: _____

Signature: _____