Comments Received on the Draft Quality Criteria

Criterion 1		
Criterion	Comment	Response
1.2.1 Strategic Plan – The college implements a strategic plan to advance its mission and goals. The strategic plan addresses the program's goals and objectives, includes action steps, performance metrics, responsible persons, needed resources, and the timetable for achievement.	In KSA Universities, one strategic plan for University and each colleges should prepare an operational plan aligned with the university strategic plan. I suggested to change CRITERION 1.2. Strategic Planning to "Operational plan" *Comment*: The majority of programs in Saudi universities do not have a separate strategic plan. What is currently in place is a strategic plan for the university, and the programs develop an operational plan that aligns with the university's strategic plan. Therefore, we suggest replacing the term "strategic plan" with "operational plan."	ACPE notes that an operational plan aligned with the University's strategic plan would address the expectations of the Criterion. Programs should describe the use of the operational plan and the relationship to the University strategic plan in the submitted self-study.
1.3.3. Collaborative Relationships - To support and advance its mission, the college establishes, maintains, and evaluates, collaborative relationships with organizations and entities inside and outside the university (e.g. organizations that support the college's efforts related to education, research and other scholarly activity, industry, pharmacy practice, legislation, and community service).	The criterion in 1.3 discusses in detail the relationship of the college internally and externally. 1.3.3 overlaps with 1.5.3 1.5.3 Collaboration – The college develops and fosters a culture of collaboration within subunits of the college, as well as within and outside the university, to advance its vision, mission, and strategic plan, and to support the profession.	The Key Element on Collaboration (1.5.3) was deleted.

1.4.1. Qualified Leadership team – The college dean (chief academic officer) and other administrative leaders are adequately qualified to provide leadership in pharmacy professional education and practice, research and scholarship, and professional and community service. The administrative leadership team collectively demonstrates support for pharmacy education and the profession of pharmacy.	Criterion 1.4.1 appropriately emphasizes the qualifications and collective commitment of the college's leadership team, **it lacks clarity regarding the process by which these individuals are selected or appointed.** The criterion focuses on the outcome (i.e., having an adequately qualified team), but does not address how fairness, transparency, or consistency in the selection or appointment process is ensured.	Following discussion ACPE maintains the current language of the key element with the focus on the qualifications of the selected leaders allowing Colleges and Universities to utilize a selection process best suited to their organization. Institutions may use different processes to arrive at the same outcome.
1.4.2 Organizational Structure – The dean and other administrative leaders have defined lines of responsibility and authority and function in an organizational structure that ensures the optimal use and development of resources, including academic and non-academic staff resources, to support achievement of the mission	Should also observe Delegation of power as per the organizational structure and how it has been disseminated.	Following discussion ACPE maintains the current language of the key element and notes that the phrase "defined lines of responsibility and authority" implicitly includes the concept of "delegation of power".
Rubric	To enhance checklist usability, consider: • Breaking complex statements into measurable sub-items for easier evaluation • Including prompts to check for evidence of implementation (e.g., strategic plans, minutes, org charts, bylaws) • Adding review mechanisms to ensure autonomy, collaboration, and culture are regularly assessed	ACPE maintains the current rubric format and notes: Programs will need to break the statements down in their narratives. ACPE notes the value but also acknowledges that including all items in the rubric would further increase the length and complexity of the rubric.

Criterion 2		
Criterion	Comment	Response
The college, using competency-based program outcomes, imparts to the graduate the knowledge, skills, abilities, behaviors, and attitudes necessary for the contemporary practice of pharmacy. Competency-based program outcomes, taken collectively, provide the program's expectations for the knowledge, skills, behaviors, attitudes and values necessary for entry into practice that graduates will achieve through completion of the curriculum. The curriculum is designed, delivered and monitored by academic staff to ensure breadth and depth of knowledge and skills and the maturation of professional attitudes and behavior. The curriculum provides a foundation in the basic, biomedical, pharmaceutical, social/administrative/behavioral, and clinical sciences, while emphasizing active learning pedagogy, content integration, knowledge acquisition, the application of knowledge, and attitudinal, skill, and behavioral development. A baccalaureate curriculum usually requires a five academic year program of study or the equivalent. A doctor of pharmacy curriculum usually requires six academic years or the equivalent.	This criterion needs to focus on the establishment of a formal curriculum benchmarking framework, conducted at regular or specified intervals, to ensure alignment with current and anticipated practice trends at the national, regional and international levels.	The Criterion has been modified as noted below: The curriculum is designed, delivered and monitored by academic staff to ensure breadth and depth of knowledge and skills and the maturation of professional attitudes and behavior in alignment with current and anticipated practice trends at the national, regional and international levels.

2.1.1. Competency-based Program Outcomes – The college identifies and publishes competency-based program outcomes that graduates must achieve. The competency-based program outcomes: 1) ensure graduates are practice ready, 2) are appropriate for the degree awarded; and 3) are reflective of current and future national pharmacy practice and address medication and health-related needs and policies, including the pharmacists' role in patient-centered care.	We hope to add that the learning outcomes of the program should be aligned with the national learning outcomes (such as Jahezya Program at NCAAA).	Expectations that the program outcomes address national program learning outcomes have been added.
2.1.1 (see above)	Assessment plan and report for PLOs should be added as a criteria. Mapping of PLOs with national PLOs should be added.	Expectations for the assessment plan are provided in Criterion 7. See suggested revision above regarding national PLOs.
2.2.5. Teaching and Learning Methods – The curriculum encompasses didactic, simulation, and experiential components. Teaching and learning methods used to deliver the curriculum address the diverse learning needs of students and: (1) facilitate achievement of learning outcomes, (2) actively engage learners, (3) promote student responsibility for self-directed learning, (4) foster collaborative learning, (5) provide timely, formative performance feedback to students in both didactic and experiential education courses, and (6) are appropriate for the student population.	Include component of Problem based learning (PBL) and how learning address troubleshooting.	Following discussion ACPE maintains the current language of the Key Element noting that programs may opt to include components of problem-based learning as a means to address the expectations outlined.

2.2.6. Technology and Simulation Activities – The college incorporates educational technology and simulation activities, as available and appropriate, to enhance delivery of the curriculum (e.g., simulation activities and databases, electronic library databases, telehealth, artificial intelligence-generated assignments/activities, etc.). Simulation activities are used to supplement practice experiences.	While Criterion 2 shows the role of technology and simulation in the delivery of the pharmacy curriculum (2.2.6), it is recommended that greater emphasis be placed on emerging technologies and digital competencies as core curricular components rather than supplementary tools.	Technology is addressed in the Appendix.
2.2.6 (see above)	Technology criterion should be clarified and we need to bear in mind that not all colleges would have high technological resources available	Following discussion ACPE maintains the current language in the key element as it acknowledges that the college incorporates educational technology as available and appropriate.
Rubric	For checklist clarity, several items can be rephrased into measurable sub-items to facilitate systematic review and documentation. Including elements like curriculum mapping, assessment of teaching strategies, and regular review mechanisms would strengthen implementation and monitoring.	The suggested elements are incorporated Criterion 7.

Criterion 3		
Criterion	Comment	Response
3.1.1. Practice Experiences for Baccalaureate Degree Programs - The curriculum provides educational practice experiences in a **variety of actual healthcare settings** for students to develop and demonstrate achievement of the desired competency-based program outcomes, under academic staff and preceptor supervision and guidance. The practice experiences integrate, apply, reinforce, and advance the knowledge, skills, attitudes, and values developed throughout the didactic curriculum.	Bachelor of Science degree programs may be more drug product oriented. Experiential education activities would be more aligned with industry settings and not involve experiences "in a variety of actual healthcare settings". The phrase "actual healthcare settings" in the original criterion (3.1.1 and 3.1.2) could be considered too specific. While direct patient care in healthcare settings is crucial, pharmacists also contribute significantly in areas like: Regulatory affairs Pharmaceutical industry (research, development, manufacturing, quality control) Academia Public health Limiting the criterion to "healthcare settings" might restrict the types of practice experiences that programs can offer and validate.	After robust discussion, the International Commission recommended and the Board acted to maintain the original wording of the Criterion.
3.1.2 Doctor of Pharmacy and Master's of Pharmacy Degree Programs (see criterion text below)	In Master's of Pharmacy Degree Programs, we should also discuss about the case study and journal club.	While programs may include case studies and journal clubs in the curriculum as a means to provide educational experiences to support entry into practice, these activities will not be specifically addressed in the criteria.
3.1.2 – The curriculum provides educational practice experiences in a variety of actual healthcare settings for students to develop and demonstrate achievement of the desired competency-based program outcomes, under academic staff and preceptor supervision and guidance. The practice	The text mentions: "Doctor of Pharmacy programs and Master's of Pharmacy degree programs (Master of Clinical Pharmacy, etc.) include advanced pharmacy practice experiences with opportunities for direct patient care." Is Master's program governance going to be assessed as well? I	ACPE notes that Colleges seeking recognition of both a Master's and a Doctor of Pharmacy program would need to address both degree programs throughout the self-study. The evaluation process would apply all of the Criteria separately to each degree program. The purpose of this Key Element is to stipulate the

experiences integrate, apply, reinforce, and advance the knowledge, skills, attitudes, and values developed throughout the didactic curriculum. Doctor of Pharmacy programs and Master's of Pharmacy degree programs (Master of Clinical Pharmacy, etc.) include advanced pharmacy practice experiences with opportunities for direct patient care.	understand that both programs share the same resources in terms of sites and preceptors. However, the Master's program has its own governance, policies, and procedures under postgraduate studies, its own training coordinators, and its own experiential curriculum based on program requirements. The alignment between the 2 programs' experiential components can be challenging programs. How should the PharmD program coordinators overcome such a criterion without being confronted by a different authority of the Master's program? is this going to be optional? How much potential non-compliance or deficiency in one program will affect the compliance of the other?	specific practice experience expectations should a college offer a Master's and/or the PharmD program. This is primarily in comparison to the expectations for the Bachelor's degree program.
3.2.2. Quantity – The college has an adequate number, balance and mix of practice sites and preceptors in community, hospital, and other settings to support the curricular pharmacy practice experiences, taking into account any national regulations or expectations.	While this criterion appropriately emphasizes the quantity and variety of practice sites (3.2.2), there is a need to emphasize on ensuring consistent quality and equity in student experiences across all sites. Implementing a structured, periodic site review and benchmarking process would support ongoing quality assurance and promote uniform standards across diverse experiential settings.	These comments are addressed in Criterion 7. To further address the comment expectations that programs will conduct a periodic review of practice sites and preceptors has been added.

3.2.3. Communication – The college has an effective system for communicating with sites and preceptors, and evaluating the site, preceptor, and students' experiences and outcomes.	Communication and evaluation mechanisms between the college and practice sites are recognized as essential, though it would be beneficial to include more emphasis on feedback loops and continuous improvement systems.	The Criterion has been revised to provide the expectation of bidirectional communication.
3.2.4. Preceptor Development – Preceptors are oriented to the college's mission, the specific learning expectations for the experiences outlined in the syllabus, and effective performance evaluation techniques before accepting students. The college fosters the professional development of its preceptors through a variety of learning tools and programs commensurate with their educational responsibilities to the college.	Concerns that programs may not be able to achieve the expectations outlined in the Criteria.	Expectations regarding preceptor orientation and development have been clarified.
3.2.4 Rubric	The inclusion of preceptor orientation and development is commendable; however, the checklist could explicitly address the ongoing evaluation and re-certification of preceptors.	The ongoing evaluation of preceptors is addressed in Key Element 7.3.6 under assessment. To address the comment, Key Element 7.3.6. has been modified to include: The college develops and implements a quality assurance procedure for the pharmacy practice experiences that is established and implemented to periodically reevaluate preceptors and practices sites to . . . .

Criterion 4		
Criterion	Comment	Response
4.1.3. Academic Advising/Mentorship – Academic advising/mentoring opportunities are provided and used to support the academic and career development of students.	While discussion on mentoring and academic advising for the students, it should also include and talk about career goal sheet for each students while looking into career development of the students.	Following discussion ACPE maintains the current language of the Key Element. Programs may use a career goal sheet or other means to meet the expectations of the Key Element.
4.2.1 Program Information - The college produces a complete and accurate description of the academic requirements and policies, including admissions and transfers, progression, graduation, probation, remediation, missed course work or credit, dismissal, re-admission, and due process, and makes this information available to academic staff, students and prospective students.	There's a notable degree of redundancy between 4.2.1 and 4.4.1, since the college adheres to established University policies on admission, progression, appeals, dismissals, and readmission. 4.5.3. Student Complaints later on will elaborate more on handling students' appeals or specific administrative processes	Following discussion, the original wording of the Criterion was maintained.
4.5.1 Student Representation - The college has clearly defined structures and mechanisms, including membership on relevant college committees, that provide a forum for student dialogue, facilitate student representation and input to the administrative leaders of the college, and foster the development of student leadership and professionalism.	There is a degree of overlap with 4.5.2. Student Perspectives which states "The administrative leaders of the college consider student feedback and respond within an appropriate time to student requests, recommendations, problems and issues of concern" We hope that the detailed documents will make it clear about what evidence will support each criterion Maybe name 4.5.2 as Student Perspective and Feedback	Following discussion ACPE maintains the both Key Elements noting that one addresses student representation and the other addresses collecting and addressing student feedback.

4.5.3. Student Complaints – The college has a policy to be followed in the event of a formal student grievance related to the program or college.	It should be word structured policy and online mechanism for grievance addressal and mechanism to resolve.	The criterion has been updated to include a process for collecting complaints and a complaint policy.
Rubric	The criterion supports a student-centered learning environment; however, the checklist can be strengthened by including items related to: • Periodic review of student services based on student satisfaction data • Formal tracking of student grievances and resolutions • Assessment of the effectiveness of support programs and policies on student outcomes	These items are addressed under Criterion 7.

Criterion 5		
Criterion	Comment	Response
The college has a sufficient cohort of academic and nonacademic staff with the qualifications and experience needed to effectively deliver and evaluate the professional degree program.	It would be helpful to introduce a formal workload model that clearly outlines the balance between teaching, research, service, and administrative duties. Additionally, adopting benchmarks for staff-to-student ratios, in line with national and international standards, would provide valuable insights for making informed decisions and ensure there's sufficient support across all areas of the program.	ACPE agrees that a formal workload model and adopting benchmarks for staff-to-student ratios would be beneficial, however, given that the International-Accreditation Quality Criteria are developed for a wide variety of institutions in different countries incorporation of these items would be problematic as it may impose requirements that are in conflict of the requirements of the country in which the program is located.
5.3.1. Continuing Professional Development – The college promotes, facilitates and supports the training and ongoing professional development of its academic and other staff and preceptors, commensurate with their programmatic responsibilities. The college evaluates the training and professional development activities regularly and implements measures to enhance professional development as needed.	While the college recognizes the importance of professional development (5.3.1), the direct link between these activities and their impact on teaching quality, student outcomes, and research productivity hasn't been fully explored.	ACPE acknowledges the comment that a direct link between professional development activities and the impact on student outcomes and research productivity may not be fully explored. ACPE maintains that including expectations that academic staff engage in such activities is essential to support developing and maintaining professional competence.
Rubric	To strengthen the checklist, consider including items related to: o Faculty-to-student ratios and workload distribution o Tracking and documentation of faculty development activities o Periodic review of staff sufficiency and deployment in light of program expansion	Workload distribution is addressed under Criterion 7. The expectation that the College will periodically review whether the number of staff is sufficient is implied in the language of Criterion 5.

Criterion 6		
Criterion	Comment	Response
Rubric	For greater clarity in a checklist context, consider including: • Assessment mechanisms for facilities and resource adequacy (e.g., feedback from users, utilization audits) • Equity of access across campuses or modalities (on-site vs. online) • Evidence of financial planning aligned with enrollment trends and program expansion	These items are included under Criterion 7.

Criterion 7		
Criterion	Comment	Response
7 Assessment The college develops, resources, and implements a plan to assess achievement of its mission, strategic plan, and attainment of the competency-based program outcomes to ensure that graduates are prepared to enter practice. Assessment data should be used for continuous quality improvement of the pharmacy program.	This is more in depth than the prior set of the Criteria. It may not be feasible for programs to put these robust assessment measures in place (paraphrased).	ACPE acknowledges that the expectations for assessment are more in depth than the current quality criteria. ACPE maintains the expectations but encourages Colleges to contact ACPE for additional guidance and support to meet the expectations outlined.
7.1.1. Assessment Plan Expectations – The college develops and utilizes an assessment plan that assesses the key elements of Criterion 7. The college uses the analysis of process and outcome measures for continuous quality improvement of the pharmacy program.	Assessment plan and report for PLOs should be added as a criterion. Mapping of PLOs with national PLOs should be added. We recommend adding a plan and an annual report for measuring Program learning outcomes and graduate attributes.	Expectations for the assessment plan are included in the Key Element. Expectations that the PLOs will be aligned with the national PLOs has been added to Key Element 2.1.
7.4.3. Student Progression – The college regularly assesses student progression, including retention and attrition data, criteria, policies, and procedures to identify and analyze trends and to make programmatic adjustments to optimize student progression as needed.	Students progression to higher studies may be asked and any innovation by the student while progressing.	Colleges may include student progression to higher studies within their progression data.

Rubric	To strengthen checklist utility, consider: • Rewording some narrative items into measurable, verifiable checklist statements (e.g., "Is there documentation of periodic curriculum review?") • Adding focus on action plans developed from assessment findings (not just data collection) • Including a mechanism to monitor the effectiveness of CQI actions taken	These items are included under Key Element 7.5.1 and 7.5.2.

Appendix	
Comment	Response
Can you divide this as percentage.	Due to the variety of program types and countries, ACPE declines to divide the Appendix as a percentage. Each program must determine the curricular component that best meet the expectations required of their program learning outcomes.
Pharmaceutical Microbiology should be included in the Appendix	Following discussion this topic was not added to the Appendix
Curriculum Mapping Utility: We recommend that institutions map each course to Appendix 1 content areas to ensure complete coverage and outcome alignment.	A statement aligned with this suggestion has been added to the Appendix.
Assessability: Encourage programs to define measurable learning outcomes aligned with each broad content statement for better evaluation and accreditation readiness.	Following discussion this topic was not added to the Appendix
Integration Indicators: Programs may highlight how integrated delivery (across courses or disciplines) is achieved, especially for overlapping areas like pharmacokinetics, pharmacogenomics, and patient assessment.	ACPE concurs that programs can integrate delivery across courses and disciplines. A statement has been added to the appendix in this regard.

Regular Review: Suggest including a note that the content areas should be periodically reviewed and updated to reflect changes in practice standards, technology, and public health priorities.	A statement aligned with this suggestion has been added to the Appendix.
Student Competency Linkage: Reinforce the need to demonstrate that students learn this content and can apply it in simulations, practice settings, and assessments.	ACPE notes that Appendix 1 applies to curricular content topics/areas and not to the assessment of competency.
On page 29 Digital Health is mentioned under clinical sciences (page 11). However, an explanation is missing in the expanded clinical sciences section (page 29)	Digital Health has been added.
On Page 11 pharmacoeconomics was mentioned under Social/Behavioral/Administrative Sciences but there was no emphasis on its concepts and methods later in Page 21. it was mentioned as a title in page 30 under pharmacotherapy. that is not enough. I suggest adding a description under "Social/Behavioral/Administrative Sciences"	This has been added under Social/Behavioral/Administrative Sciences
On Page 24 Under clinical Sciences, pharmacognosy was mentioned: "Pharmacognosy and Alternative and Complementary Therapies - Evidence-based evaluation of the therapeutic value, safety, and regulation of pharmacologically active natural products and dietary supplements." however, under 2.2.2 Curricular content, pharmacognosy was mentioned under pharmaceutical sciences: "Pharmaceutical Sciences: clinical chemistry, extemporaneous compounding, medicinal chemistry, pharmacognosy,\ pharmaceutical calculations, pharmaceutics/biopharmaceutics, pharmacogenomics/genetics, pharmacokinetics, pharmacology, toxicology" I suggest reviewing this categorization. The American Society of Pharmacognosy refers to pharmacognosy as “the study of the physical, chemical, biochemical and biological properties of drugs, drug substances, or potential drugs or drug substances of natural origin as well as the search for new drugs from natural sources.” It involves the broad study of natural products from various sources	Pharmacognosy – is addressed under pharmaceutical sciences. "Natural products and dietary supplements" are addressed under self-care pharmacotherapy.

including plants, bacteria, fungi, and marine organisms. Pharmacognosy includes the study of botanical dietary supplements, including herbal remedies. This description doesn't align with the description given in bullet 5 in Clinical Sciences, which describes it as: "Pharmacognosy and Alternative and Complementary Therapies: Evidence-based evaluation of the therapeutic value, safety, and regulation of pharmacologically active natural products and dietary supplements." Although alternative and complementary therapies are a domain of health practice, they are not science per se, and except for herbal and supplement therapies, they are not pharmacy science. Evidence-based practice is definitely relevant to pharmacy practice and central to safe and effective medication use.. I suggest - add pharmacognosy under pharmaceutical sciences - add "natural products and dietary supplements" to self-care pharmacotherapy. - for the Evidence-based evaluation of the therapeutic value, safety, and regulation of pharmacologically active natural products and dietary supplements, the concept is already mentioned in "Health Information Retrieval and Evaluation" and it can encompass the description.	