



**Accreditation Council for Pharmacy  
Education**

**Self-Assessment Instrument for the  
Professional Degree Program of Colleges  
and Schools of Pharmacy**

**Version 1.0  
Standards 2025**

**Effective July 1, 2025**

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# Accreditation Council for Pharmacy Education Self-Assessment Instrument for the Professional Degree Program of Colleges and Schools of Pharmacy

## Version 1.0 Standards 2025

**Effective July 1, 2025**

**Introduction:** The *Accreditation Council for Pharmacy Education (ACPE) Self-Assessment Instrument for the Professional Degree Program of Colleges and Schools of Pharmacy* is designed to assist a college or school of pharmacy prepare its self-study report and document how its pharmacy degree program is addressing ACPE's Standards. The instrument identifies the documents, data and descriptive text that will need to be provided by the college or school for evaluation during the on-site visit in order to determine how the program is addressing each of the Standards. Additional guidance related to the self-study process and report is provided on the ACPE website [www.acpe-accredit.org](http://www.acpe-accredit.org).

An equivalent evaluation instrument (commonly referred to as the "Rubric") is used by members of the on-site evaluation team to validate (or contradict) the college or school's Self-Study Report and as the basis for the *Evaluation Team Report (ETR)* sent to the college or school and the ACPE Board of Directors. The findings of the evaluation team are used to advise the ACPE Board of Directors. The ACPE Board of Directors will consider the *ETR* along with other supplementary written or verbal information in order to determine the pharmacy degree program's overall compliance with ACPE Standards and to prepare the ACPE *Action and Recommendations (A&R)* document, which is the official accreditation action.

## Directions for Completing the Self-Assessment Instrument

For each standard, the college or school should do the following:

- 1) **Documentation and Data:** Lists documents and data that have been submitted in advance or made available on site.

For each standard, the following documentation and data sections can include:

- Required Documentation and Data
- Data Views and Standardized Tables
- Optional Documentation and Data

**Please Note:** Self-study reports should be submitted electronically to ACPE using the **Self-Study Reporting System**.

For each data view and standardized table, it is optional for the college or school to provide brief comments about the chart or table. Comments should be provided below the chart or table and should be limited to, for example, explanations of missing data or apparent anomalies. The comments should not exceed 1,000 characters (approximately 170 words) per chart/table; this text is not included in the overall 150 page limit for the self-study report. The college or school's interpretation of the data, especially any notable differences from national or peer group norms, should be provided in the descriptive text under Section 3 (College or School's Comments on the Standard) of the applicable standards, not in the brief optional comments under a data view or table.

- 2) **College or School's Self-Assessment:** Self-assess the program on aspects of the standard using the following scale:

- **S:** The program's compliance with this element of the standard is **satisfactory**
- **N.I.:** The program **needs improvement** with this element of the standard to be fully compliant
- **U:** The program's compliance with this element of the standard is **unsatisfactory**

- 3) **College or School's Comments on the Standard:** The college or school's text should describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should provide evidence that the plan is working. Specific areas that should be addressed by the college or school are noted for each standard. Wherever possible and applicable, survey data should be broken down by demographic and/or branch/campus/pathway groupings, and comments provided on any notable findings.

Page and character limits have been provided for each standard with ACPE's overall limit of 150 pages for all 7 standards for the descriptive text used to address this element (Section 3) of the self-study report. All standards have been assigned a 20-page limit.

- 4) **College or School's Final Self-Evaluation:** Self-assess compliance of the program on the standard using the following classifications:

**Compliant:**<sup>1</sup>

No factors exist that compromise current compliance; no factors<sup>2</sup> exist that, if not addressed, may compromise future compliance.

**Compliant with Monitoring:**

- The program is in a period of transition regarding a key element or elements, the nature of which warrants further observation to evaluate the impact on future compliance with the expectations outlined in the Standard **OR**
- No factors exist that compromise current compliance; factors<sup>2</sup> exist that, if not addressed, may compromise future compliance **OR**
- Factors exist that compromise current compliance; an appropriate plan<sup>3</sup> exists to address the factors that compromise compliance; the plan has been fully implemented;<sup>4</sup> sufficient evidence already exists that the plan is addressing the factors and will bring the program into full compliance.

**Partially Compliant:**

Factors exist that compromise current compliance; an appropriate plan exists to address the factors that compromise compliance and it has been initiated;<sup>5</sup> the plan has not been fully implemented<sup>4</sup> and/or there is not yet sufficient evidence that the plan is addressing the factors and will bring the program into compliance.

**Non-Compliant:**

- Factors exist that compromise current compliance; an appropriate plan<sup>3</sup> 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<sup>6</sup>

**Notes:**

1. Compliant means *meets, substantially meets, or exceeds* the requirements and expectations of the standard. A program may have elements of a Standard that are assessed as needing improvement, but overall the Standard may be rated as Compliant.
2. Factors could include innovations and planned or unplanned substantive changes to the program.
3. A plan is appropriate (acceptable to ACPE) if it meets the following criteria: is likely to succeed, is feasible, has been approved by the university or applicable authority (if necessary), has an acceptable timeline, and is adequately resourced.
4. Fully implemented means that all components of the plan have been implemented and are proceeding to completion; no additional steps need to be taken; all that is required is continued monitoring and collection of assessment data to provide further evidence that the plan is succeeding as intended.
5. Initiated means that some of the first steps of the plan have been started.
6. Other than for the first bullet point under Non-Compliant, the above classifications assume that the information provided was adequate to assess compliance. Information to assess compliance may come from a self-study report, an on-site evaluation, a post-visit supplementary report, or an interim report.

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

## ACPE Annual Monitoring Policies

ACPE's Annual Monitoring Policies can be found in the ACPE Policies and Procedures Manual on the ACPE website (see Section 11.6). The criteria specified in the policies, such as, passing rate of graduates on the North American Pharmacist Licensure Examination (NAPLEX®) are not directly incorporated in ACPE Standards. The criteria are used as the basis for ongoing monitoring of programs and, when applicable, requests for additional information from a college or school of pharmacy. The policies provide an indication of what data would trigger additional monitoring by ACPE in accordance with the policy. Programmatic data that fall outside of the monitoring parameters may be indicative of underlying issues that could impact compliance with accreditation standards.

The Annual Monitoring Policies are most relevant to:

- Standard No. 2: Curriculum (changes and trends in NAPLEX outcomes)
- Standard No. 2: Curriculum (Progression - attrition)
- Standard No. 4: Students/Student Services (Admissions - changes and trends in enrollment)
- Standard No. 4: Students/Student Services (Progression - attrition)
- Standard No. 5: Faculty and Staff (Quantitative Factors - changes and trends in enrollment)
- Standard No. 6: Resources (Physical Facilities - changes and trends in enrollment)
- Standard No. 6: Resources (Financial Resources - changes and trends in enrollment)
- Standard No. 7: Assessment (changes and trends in NAPLEX outcomes)

## College or School's Overview

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

**[TEXT BOX] [Maximum 7,500 characters including spaces] (Approximately three pages)**

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

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

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

### Documentation

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

	Commendable	Meets Expectations	Needs Improvement
<b>Participation in the Self-Study Process</b>	The self-study report was written and reviewed with broad-based input from students, faculty, preceptors, staff, administrators and a range of other stakeholders, such as, patients, practitioners, and employers. <input type="checkbox"/>	The self-study report was written and reviewed with broad-based input from students, faculty, preceptors, staff and administrators. <input type="checkbox"/>	The self-study report was written by a small number who did not seek broad input from students, faculty, preceptors, staff, and administrators. <input type="checkbox"/>
<b>Knowledge of the Self-Study Report</b>	Students, faculty, preceptors, and staff are conversant in the major themes of the report and how the program intends to address any deficiencies. <input type="checkbox"/>	Students, faculty, preceptors, and staff are aware of the report and its contents. <input type="checkbox"/>	Students, faculty, preceptors, and staff have little or no knowledge of the content of the self-study report or its impact on the program. <input type="checkbox"/>
<b>Completeness and Transparency of the Self-Study Report</b>	All narratives and supporting documentation are thorough, clear and concise. The content appears thoughtful and honest. Interviews match the self-study findings. <input type="checkbox"/>	All narratives and supporting documentation are present. The content is organized and logical. <input type="checkbox"/>	Information is missing or written in a dismissive, uninformative or disorganized manner. Portions of the content appear biased or deceptive. <input type="checkbox"/>
<b>Relevance of Supporting Documentation</b>	Supporting documentation of activities is informative and used judiciously. <input type="checkbox"/>	Supporting documentation is present when needed. <input type="checkbox"/>	Additional documentation is missing, irrelevant, redundant, or uninformative. <input type="checkbox"/>
<b>Evidence of Continuous-Quality Improvement</b>	The program presents thoughtful, viable plans to not only address areas of deficiency, but also to <b>further advance the quality of the program</b> beyond the requirements of the Standards. <input type="checkbox"/>	The program proactively presents plans to address areas where the program is in need of improvement. <input type="checkbox"/>	No plans are presented or plans do not appear adequate or viable given the issues and the context of the program. <input type="checkbox"/>
<b>Organization of the Self-Study Report</b>	All sections of the report are complete and organized or hyper-linked to facilitate finding information, e.g., pages are numbered and sections have labeled or tabbed dividers. <input type="checkbox"/>	The reviewer is able to locate a response for each standard and the supporting documentation with minimal difficulty. <input type="checkbox"/>	Information appears to be missing or is difficult to find. Sections are not well labeled. <input type="checkbox"/>

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

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

Standards	Compliant	Compliant with Monitoring	Partially Compliant	Non-Compliant
1. Organization and Governance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Experiential Learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Students/Student Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Faculty/Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**Standard No. 1: Organization and Governance:** The college or school is organized and staffed to advance its vision, mission, and strategic plan; meet all stated degree-granting eligibility and reporting requirements; and provide an environment and culture that promotes self-directed lifelong learning, professional behavior, and collaboration.

1) **Documentation and Data:**

**Required Documentation and Data:**

**Uploads:**

- University organizational chart depicting the reporting relationship(s) for the Dean of the college or school
- College or school organizational chart including department/division, experiential, student affairs/services
- Documents verifying legal authority to offer/award the Doctor of Pharmacy degree
- Document(s) verifying institutional accreditation with relevant extract(s) from the accreditation report that identifies any deficiencies from institutional accreditation that impacts or potentially impacts the college, school, or program
- Vision and mission statements for the college/school and parent institution
- College or school's strategic planning documents
- Curriculum Vitae of Dean and administrators
- Job descriptions and responsibilities for college or school Dean and other administrative leadership team members
- Faculty Handbook and/or written bylaws and policies and procedures of college or school
- College, school, or university policies and procedures that addresses contingency planning
- College, school, or university policies describing expectations of faculty, administrators, students and staff behaviors and conduct
- List of all committees with their members and designated charges, including student committee members with professional year

**Optional Documentation and Data:**

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

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

	S	N.I.	U
<b>1.1 Eligibility and Reporting Requirements</b>			
<b>1.1.a. Autonomy</b> – The academic unit offering the Doctor of Pharmacy program is an autonomous unit organized as a college or school of pharmacy (within a university or as an independent entity). This includes autonomy to manage the program within stated policies and procedures, as well as applicable state and federal regulations.	○	○	○
<b>1.1.b. Legal empowerment</b> – The college or school is legally empowered to offer and award the Doctor of Pharmacy degree.	○	○	○

<b>1.1.c. Administrative oversight</b> – The college or school is led by a dean, who serves as the chief administrative and academic officer of the college or school and is responsible for ensuring that all ACPE accreditation requirements are met.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.1.d. Institutional accreditation</b> – The institution housing the college or school, or the independent college or school, has (or, in the case of new programs, is seeking and in good standing) full accreditation by an institutional accreditation agency recognized by the U.S. Department of Education.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.1.e. Institutional accreditation actions</b> – The college or school reports to ACPE within 30 days any issue identified in institutional accreditation actions that may have a negative impact on the quality of the professional degree program and compliance with ACPE standards.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.1.f. Substantive change</b> – The dean ensures prompt reporting of substantive changes as defined in the policies and procedures to ACPE for the purpose of evaluation of their impact on program quality.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.2 College or School Vision, Mission, and Goals</b>			
<b>1.2.a. College or school vision and mission</b> – These statements are compatible with the vision and mission of the university in which the college or school operates.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.2.b. Education, research and scholarship, service, and practice</b> – The statements address the college's or school's commitment to professional education, research and scholarship, professional and community service, pharmacy practice, and continuing professional development.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.3 Strategic Plan</b>			
<b>1.3.a. Inclusive process</b> – The strategic plan is developed through an inclusive process, including faculty, staff, students, preceptors, practitioners, and other relevant constituents, and is disseminated in summary form to key stakeholders.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.3.b. Appropriate resources</b> – Elements within the strategic plan are appropriately resourced for implementation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.3.c. Substantive change planning</b> – Substantive programmatic changes contemplated by the college or school are linked to its ongoing strategic planning process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.4 Organization and Governance</b>			
<b>1.4.a. Qualified dean</b> – The dean is qualified to provide leadership in pharmacy professional education and practice, research and scholarship, and professional and community service with adequate autonomy to lead the program. The dean demonstrates support for pharmacy education and the profession of pharmacy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.4.b. Dean's other substantial administrative responsibilities</b> – If the dean is assigned other substantial administrative responsibilities, the university ensures adequate resources to support the effective administration of the affairs of the college or school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.4.c. Qualified administrative team</b> – The dean and other college or school administrative leaders have credentials and experience that have prepared them for their respective roles and collectively have the needed backgrounds to effectively manage the professional program. The college or school has a process to solicit feedback on the performance and effectiveness of the dean and other administrative leaders from other administrators, faculty, and staff.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.4.d. Authority, collegiality, and resources</b> – The college or school administration has defined lines of authority and responsibility, fosters organizational unit collegiality and effectiveness, and allocates resources appropriately.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.4.e. Leadership collaboration</b> – University leadership and the college or school dean collaborate to advance the program's vision and mission and to meet ACPE accreditation standards. The dean directly reports to the university administrator(s) charged with oversight of the Doctor of Pharmacy program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.4.f. College or school participation in university governance</b> – College or school administrators and faculty are effectively represented in the governance of the university, in accordance with its policies and procedures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.4.g. Faculty participation in college or school governance</b> – The college or school uses updated, published documents, such as bylaws, policies, and procedures, to ensure broad faculty participation in the governance of the college or school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.4.h. Contingency planning</b> – Comprehensive policies and procedures are in place to ensure the continued delivery of the PharmD program in response to significant disruption.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>1.4.i. Alternate pathway equitability</b> – The college or school ensures that any alternative pathways to the Doctor of Pharmacy degree are equitably resourced and integrated into the college's or school's regular administrative structures, policies, and procedures, including planning, oversight, and evaluation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1.5 Organizational Culture			
<b>1.5.a. Leadership and professionalism</b> – The college or school demonstrates a commitment to developing professionalism and to fostering leadership in administrators, faculty, preceptors, staff, and students. Faculty and preceptors serve as mentors and positive role models for students. Faculty and administrators model professionalism through active and visible participation in professional organizations, meetings, and events.	○	○	○
<b>1.5.b. Behaviors</b> – The college or school has policies that define expected behaviors for administrators, faculty, preceptors, staff, and students, along with consequences for deviation from those behaviors.	○	○	○
<b>1.5.c. Culture of collaboration</b> – The college or school develops and fosters a culture of collaboration within subunits of the college or school, as well as within and outside the university, to advance its vision, mission, and strategic plan, and to support the profession.	○	○	○
<b>1.5.d. Culture of Diversity, Equity, Inclusion, and Belonging</b> – The college or school promotes the inclusion of diverse perspectives, lived experiences, backgrounds, to create environments that support and enhance learning, teaching, research and the delivery of patient care.	○	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should address the statements below. If issues are identified, the college or school should provide its plans for addressing them, with relevant timelines. For plans that have already been initiated to address an issue, the college or school should provide evidence that the plan is working.

- Describe how the autonomy of the program is assured and maintained.
- Describe how the program collaborates with university officials to secure adequate resources to effectively deliver the program and comply with all accreditation standards.
- Describe how the program's mission is aligned with the mission of the institution.
- Describe how the mission addresses education, research/scholarship, service, and practice and provides the basis for strategic planning.
- Describe how various stakeholders, such as faculty, staff, students, preceptors, alumni, etc. are involved in development, review and approval of the mission.
- Describe how the program promotes initiatives that advance its stated mission.
- Describe how the strategic plan was developed, including evidence of the involvement of various stakeholder groups, such as, faculty, staff, students, preceptors, alumni, etc.
- Describe how the strategic plan aligns with the University or institutional strategic plan.
- Describe how the program monitors, evaluates, and documents progress in achieving the goals of the strategic plan.
- Describe how the support and cooperation of University administration for the college or school plan was sought and achieved, including evidence of support for resourcing the strategic plan.
- Describe how the strategic plan is driving decision making in the program, including substantive changes to the program.
- Describe the effectiveness of the organizational structure and the systems of communication and collaboration that support the program's achievement of its mission.
- Describe how bylaws, policies and procedures are developed and modified.
- Describe how the credentials and experience of college or school administrative leaders working with the dean have prepared them for their respective roles.
- Describe how the dean provides leadership for the program and how the qualifications and characteristics of the dean support the achievement of the mission and goals.
- Describe how the dean ensures all expectations of the standards and key elements are achieved.
- Describe how the dean interacts with and is supported by the other administrative leaders in the college or school.
- Describe how the college or school participates in the governance of the university/institution.
- Describe strategies used to promote professional behavior and outcomes.
- Describe strategies used to promote harmonious relationships among students, faculty, administrators, preceptors, and staff; and the outcomes.

- Describe examples of how the college or school promotes a culture of collaboration.
- Describe examples of how the college or school promotes the inclusion of diverse perspectives, lived experiences, and backgrounds, to create environments that support and enhance learning, teaching, research, and the delivery of patient care.
- Describe how the college or school ensures that any alternative pathway is equitably resourced and integrated into the college or school's regular administrative structures, policies, and procedures.
- Describe the affiliations external to the college or school that advance the mission and vision.
- Describe any other notable achievements, innovations or quality improvements (if applicable).
- Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [52,500 character limit, including spaces] (Approximately 20 pages)

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

Compliant	Compliant with Monitoring	Partially Compliant	Non-Compliant
No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.	<ul style="list-style-type: none"> <li>• No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance <b>/or</b></li> <li>• 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.</li> </ul>	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.	<ul style="list-style-type: none"> <li>• Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated <b>/or</b></li> <li>• Adequate information was not provided to assess compliance.</li> </ul>
<input type="checkbox"/> <b>Compliant</b>	<input type="checkbox"/> <b>Compliant with Monitoring</b>	<input type="checkbox"/> <b>Partially Compliant</b>	<input type="checkbox"/> <b>Non-Compliant</b>

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

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

**Standard No. 2: Curriculum:** The program, using the educational outcomes, imparts to the graduate the knowledge, skills, abilities, behaviors, and attitudes necessary for the contemporary practice of pharmacy in a healthcare environment that demands interprofessional collaboration and professional accountability for holistic patient well-being.

The curriculum is designed, delivered, and monitored by faculty to ensure breadth and depth of knowledge and skills, the maturation of professional attitudes and behaviors, and the opportunity to explore professional areas of interest. The curriculum provides a rigorous foundation in the biomedical, pharmaceutical, social/administrative/behavioral, and clinical sciences, while emphasizing active learning pedagogy, content integration, knowledge acquisition, skill development, and the application of knowledge and skills to therapeutic decision-making.

1) **Documentation and Data:**

**Required Documentation and Data:**

**Uploads:**

- A copy of the professional PharmD curriculum.
- A copy of the Entrustable Professional Activities utilized at the college/school.
- A copy of the curriculum maps documenting breadth and depth of coverage of Appendix 1 content and learning expectations in the professional (and, if appropriate, preprofessional) curriculum.
- A copy of the mapping of the educational outcomes (key elements 2.1.a. – 2.1.n.). This should include APPEs.
- A copy of the plan for Student Achievement of the Educational Outcomes Key Elements of Standard 2 by campus, branch, and pathway (branch and pathway requirements for applicable programs). The plan should include a timeline, activities, outcomes, and assessment tools. Examples (2-3 for each standard) of curricular and co-curricular experiences available to students to document developing competence in affective domain-related expectations.
- A copy of the Interprofessional Education Plan that documents the student involvement, other health profession involvement, a timeline, activities, outcomes, assessment, resources, and tools utilized.

**Optional Documentation and Data:**

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

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

	S	N.I.	U
<b>2.1. Educational Outcomes</b>			
<b>2.1.a. Scientific Thinking (Learner)</b> – The graduate is able to seek, analyze, integrate, and apply foundational knowledge of medications and pharmacy practice (biomedical; pharmaceutical; social, behavioral, administrative; and clinical sciences; drug classes; and digital health).	○	○	○
<b>2.1.b. Problem Solving Process (Problem-Solver)</b> – The graduate is able to use problem solving and critical thinking skills, along with an innovative mindset, to address challenges and to promote positive change.	○	○	○
<b>2.1.c. Communication (Communicator)</b> – The graduate is able to actively engage, listen, and communicate verbally, nonverbally, and in writing, when interacting or educating with an individual, group, or organization.	○	○	○
<b>2.1.d. Cultural and Structural Humility (Ally)</b> – The graduate is able to mitigate health disparities by considering, recognizing, and navigating cultural and structural factors (e.g., social determinants of health, diversity, equity, inclusion, and accessibility) to improve access and health outcomes.	○	○	○
<b>2.1.e. Person-Centered Care (Provider)</b> – The graduate is able to provide whole person care to individuals as the medication specialist using the Pharmacist's Patient Care Process.	○	○	○
<b>2.1.f. Advocacy (Advocate)</b> – The graduate is able to promote the best interests of patients and/or the pharmacy profession within healthcare settings and at the community, state, or national level.	○	○	○
<b>2.1.g. Medication-use Process Stewardship (Steward)</b> – The graduate is able to optimize patient healthcare outcomes using human, financial, technological, and physical resources to improve the safety, efficacy, and environmental impact of medication use systems.	○	○	○

<b>2.1.h. Interprofessional Collaboration (Collaborator)</b> – The graduate is able to actively engage and contribute as a healthcare team member by demonstrating core interprofessional competencies.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.1.i. Population Health and Wellness (Promoter)</b> – The graduate is able to assess factors that influence the health and wellness of a population and develop strategies to address those factors.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.1.j. Leadership (Leader)</b> – The graduate is able to demonstrate the ability to influence and support the achievement of shared goals, regardless of one’s role.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.1.k. Self-awareness (Self-aware)</b> – The graduate is able to examine, reflect on, and address personal and professional attributes (e.g., knowledge, metacognition, skills, abilities, beliefs, biases, motivation, help-seeking strategies, and emotional intelligence) that could enhance or limit growth, development, and professional identity formation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.1.l. Professionalism (Professional)</b> – The graduate is able to exhibit attitudes and behaviors that embody a commitment to building and maintaining trust with patients, other health care providers, and society.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.1.m. Professional Skills and Attitudes</b> – Activities and experiences, intended to advance professional, personal, and career development, are purposely designed and implemented to ensure an array of opportunities for students to document competency of advocacy, self-awareness, leadership, and professionalism. These activities complement and advance the learning that occurs within the formal curriculum and can occur, outside, alongside, and/or within the curriculum.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.1.n. Entrustable Professional Activities</b> – The program develops and assesses the achievement of professional activities a graduate can perform routinely designed to gain the trust of the healthcare team and the public.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.2. Curriculum Design, Delivery, and Oversight</b>			
<b>Curriculum Design</b>			
<b>2.2.a. Program duration</b> – The professional curriculum is a minimum of four academic years of full-time study or the equivalent.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.2.b. Care across the lifespan</b> – The Pre-APPE curriculum provides foundational knowledge and skills that allow for care across the patient's lifespan.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.2.c. Curricular expectations</b> – The professional curriculum is organized to allow for the logical building of a sound scientific and clinical knowledge base, sequenced to promote integration and reinforcement of content and the demonstration of competency in skills required to achieve the Educational Outcomes, and inculcates professional attitudes and behaviors leading to personal and professional maturity consistent with the Oath of a Pharmacist.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.2.d. Content breadth and depth</b> – A program documents, through mapping or other comparable methods, the breadth and depth of exposure to didactic curricular content areas deemed essential to pharmacy education at the doctoral level (see Appendix 1). Learning outcomes for each APPE experience are mapped to the key elements 2.1.a-n, as well as to any additional competencies developed by the school or college.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.2.e. Electives</b> – Time is reserved within the required curriculum for elective courses in both the didactic and APPE curriculums that permit exploration of and/or advanced study in areas of professional interest. Each student must complete both didactic and APPE electives.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.2.f. Course syllabi</b> – Syllabi for didactic and experiential education courses, developed and updated through a faculty-approved process, contain information that supports curricular quality assurance assessment. Course syllabi minimum requirements include: (1) expected learning outcomes, (2) the methods by which achievement of those outcomes will be assessed, and (3) aspects of direct patient care (for clinical practice courses).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Curriculum Delivery</b>			
<b>2.2.g. Teaching and learning methods</b> – The didactic curriculum is delivered via teaching/learning methods that address the diverse learning needs of students that: (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 (i.e., campus-based vs. distance-based).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.2.h. Academic integrity</b> – To ensure the credibility of the degree awarded, the validity of individual student assessments, and the integrity of student work, the college or school ensures that assignments and examinations take place under circumstances that minimize opportunities for academic misconduct. The college or school ensures the correct identity of all students (including distance students) completing proctored assessments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Curriculum Oversight</b>			

<b>2.2.i. Committee Structure</b> – Curricular oversight involves collaboration between faculty and administration. The body/bodies charged with curricular oversight: (1) are representative of the faculty at large, (2) include student representation, and (3) are adequately resourced to ensure and continually advance curricular quality.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.2.j. Committee Functions</b> – The curriculum committee should meet regularly and effectively communicate, coordinate, and document efforts with body/bodies responsible for curricular assessment in a systematic, ongoing process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.2.k. Student Feedback</b> – Students are provided the opportunity to give formative and/or summative feedback to faculty, including preceptors, on their perceptions of teaching/learning effectiveness.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.3 Interprofessional Education (IPE)</b>			
<b>2.3.a. Interprofessional team education</b> – To advance collaboration and quality of patient care, the didactic and experiential curricula include opportunities for students to learn about, from, and with other members of the interprofessional healthcare team. Through interprofessional education activities, students gain an understanding of the abilities, competencies, and scope of practice of team members. Some, but not all, of these educational activities may be simulations or simulated experiences. IPE activities should be guided by the IPEC competencies.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.3.b. Interprofessional team practice</b> – All students participate as a healthcare team member in providing direct patient care and contributing to therapeutic decision-making. Students participate in both didactic and experiential educational activities with a variety of prescribers and student prescribers as well as other student/professional healthcare team members.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should address the statements below. If issues are identified, the college or school should provide its plans for addressing them, with relevant timelines. For plans that have already been initiated to address an issue, the college or school should provide evidence that the plan is working.

Educational Outcomes/Content:

- Describe the breadth and depth of the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences components of the didactic curriculum and strategies utilized to integrate the sciences into the curriculum.
- Describe how the college or school supports the development of pharmacy graduates who are able to:
  - seek, analyze, integrate, and apply foundational knowledge of medications and pharmacy practice;
  - use problem solving and critical thinking skills;
  - mitigate health disparities by considering, recognizing, and navigating cultural and structural factors;
  - provide whole person care to individuals as the medication specialist using the Pharmacist's Patient Care Process;
  - effectively communicate verbally and nonverbally;
  - promote the best interests of patients and/or the pharmacy profession;
  - optimize patient healthcare outcomes using human, financial, technological, and physical resources;
  - engage and contribute as a healthcare team member; and,
  - assess factors that influence the health and wellness of a population and develop strategies to address those factors.
- Describe how the college or school supports the development of pharmacy graduates who are able to:
  - demonstrate the ability to influence and support the achievement of goals;
  - address personal and professional attributes that could enhance or limit growth, development, and professional identity formation; and,
  - exhibit attitudes and behaviors that build trust with others.
- Describe how the college or school supports the development of pharmacy graduates who are able to demonstrate the knowledge, skills, and attitudes outlined in key element 2.1.
- Describe the college or school's plan for student achievement of the knowledge, skills, and attitudes outlined in key element 2.1.

Design:

- Describe the professional competencies/educational outcomes and EPAs of the curriculum.

- Describe the curricular structure and content of all curricular pathways including the elective requirements and courses and experiences available to students.
- Describe how the curriculum design enables students to integrate, achieve, and apply competency areas needed for the delivery of holistic patient care.

Delivery:

- Describe the efforts of the college or school to address the diverse learning needs of students.
- Describe each pathway(s) leading to the Doctor of Pharmacy degree.
- Describe how teaching/learning methods are used to: facilitate achievement of learning outcomes, actively engage learners, promote student responsibility for self-directed learning, foster collaborative learning, and are appropriate for the student population (i.e., campus-based vs. distance-based) with examples provided.
- Describe how academic integrity is ensured.

Oversight:

- Describe the composition and functions of the committee charged with oversight of the curriculum.
- Describe how the college or school engages in the curricular review process.
- Based on mapping, describe how gaps in curricular content or redundancies are identified and inform curricular revision using examples (if applicable).

Interprofessional Education:

- Describe how the curriculum prepares graduates to work as members of an interprofessional team, including a description of the course(s) that focus specifically on interprofessional education.
- Describe how the college or school incorporates interprofessional education activities into the curriculum.
- Describe any other notable achievements, innovations or quality improvements (if applicable).
- Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [52,500 character limit, including spaces] (Approximately 20 pages)

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

Compliant	Compliant with Monitoring	Partially Compliant	Non-Compliant
No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.	<ul style="list-style-type: none"> <li>• No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance <b>/or</b></li> <li>• 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.</li> </ul>	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.	<ul style="list-style-type: none"> <li>• Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated <b>/or</b></li> <li>• Adequate information was not provided to assess compliance</li> </ul>
<input type="checkbox"/> <b>Compliant</b>	<input type="checkbox"/> <b>Compliant with Monitoring</b>	<input type="checkbox"/> <b>Partially Compliant</b>	<input type="checkbox"/> <b>Non-Compliant</b>



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

**Standard No. 3: Experiential Learning:** The curriculum incorporates Introductory Pharmacy Practice Experience (IPPE) and inculcates habits of self-directed lifelong learning to prepare students for Advanced Pharmacy Practice Experience (APPE). APPEs integrate, apply, reinforce, and advance the knowledge, skills, attitudes, abilities, and behaviors developed in the Pre-APPE curriculum and in extracurricular activities.

The college or school has a sufficient number of preceptors, who have professional credentials and expertise commensurate with their responsibilities to the professional program, to effectively deliver and evaluate students in the experiential component of the curriculum. The college or school has the appropriate number and mix of facilities in which IPPEs and APPEs are conducted to accommodate all students.

The college has adequate resources to assist sites in creating learning environments that are inclusive, welcoming, and support student learning and diverse student needs.

### 1) Documentation and Data:

#### Required Documentation and Data:

##### Uploads:

- Overview of IPPE and APPE curriculum (duration, types of required and elective rotations, etc.)
- Student manual for IPPE/APPEs
- Preceptor manual for IPPE/APPEs
- Student and preceptor evaluation tools for IPPE/APPE
- Preceptor recruitment and training manuals and/or programs
- Student APPE evaluation data documenting exposure to diverse patient populations and interprofessional, team-based patient care
- Policies and procedures related to preceptor recruitment, orientation, development, performance review, promotion, and retention
- A list of active preceptors and practices sites (classified by type of practices), specifying IPPE and/or APPE, with number of students served, interaction with other health professional students and practitioners, the number of pharmacy or other preceptors serving the facility, and their licensure status. (Sites with student placements in the past 3 years should be identified.)
- ACPE IPPE Capacity Chart (Template available for download)
- ACPE APPE Capacity Chart (Template available for download)

#### Optional Documentation and Data:

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

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

	S	N.I.	U
<b>3.1. Introductory Pharmacy Practice Experience (IPPE) Curriculum</b>			
<b>3.1.a. IPPE expectations</b> – IPPEs involve students in common contemporary U.S. practice models, including interprofessional practice involving shared patient care decision-making, professional ethics and expected behaviors, and direct patient care activities. IPPEs are structured and sequenced to intentionally develop in students a clear understanding of what constitutes exemplary pharmacy practice in the U.S. prior to beginning APPE.  IPPE exemptions – Using established criteria that encompass the depth and breadth of the practice, a college or school may exempt applicable students from the requirements of certain IPPE types provided that the college or school has documented that the student has achieved the desired outcomes of that experience through previous experience. Replacement IPPEs will then be used to advance students' understanding of practice and their preparation for success in APPE.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.1.b . IPPE duration</b> – IPPE totals no less than 300 clock hours of experience and is purposely integrated into the didactic curriculum. A minimum of 75 IPPE hours of patient care must be completed in each community and institutional health-system settings. The remaining 150 hours may be in a variety of pharmacy practice settings that expose students to patient care. Although simulation can provide an excellent learning modality in didactic education, simulated practice experiences cannot be counted toward the 300 IPPE hours.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.2. Advanced Pharmacy Practice Experience (APPE) Curriculum</b>			
<b>3.2.a. APPE expectations</b> – Collectively, APPEs emphasize continuity of care and incorporate acute, chronic, and wellness-promoting patient-care services in outpatient (community/ambulatory care) and inpatient (hospital/health system) settings. In the aggregate, APPEs expose students to diverse patient populations as related to age, gender, race/ethnicity, socioeconomic factors (e.g., rural/urban, poverty/affluence), and disease states. APPEs follow IPPEs, which are designed to progressively develop the professional insights and skills necessary to advance into responsibilities in APPEs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.2.b. APPE duration</b> – The curriculum includes no less than 36 weeks (1440 hours) of APPEs, and each APPE is at minimum 160 hours. The majority of the APPE curriculum is focused on direct patient care. No more than 480 hours of the 1440 APPE hours can occur outside the United States or its territories or possessions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.2.c. Timing</b> – APPEs follow successful completion of all IPPE and required didactic curricular content. Required capstone courses or activities that provide opportunity for additional professional growth and insight are allowed during or after completion of APPEs. These activities do not compromise the quality of or decrease the time spent on the APPEs, nor count toward the required 1440 APPE hours.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.2.d. Required APPE</b> – Required APPEs are completed in the United States or its territories or possessions and occur in four practice settings: (1) community pharmacy; (2) ambulatory care (must involve interprofessional communication and collaboration); (3) hospital/health system pharmacy; and (4) inpatient adult patient care. Nontraditional PharmD (NTPD) programs need to demonstrate that all students have completed or met the 4 required APPEs using a formalized faculty assessment that documents achievement of the outcomes of the 4 required APPEs. All aspects of any program offering an NTPD pathway will be assessed in the self-study process and reviewed by onsite evaluation team members during the program's comprehensive evaluation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.2.e. Elective APPE</b> – Elective APPEs are structured to give students the opportunity to: (1) mature professionally, (2) secure the breadth and depth of experiences needed to achieve the educational outcomes articulated in Standards 2.1.a-n, and (3) explore various sectors of practice. A maximum of 320 hours of non-direct patient care APPEs are allowed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.3. Preceptors</b>			
<b>3.3.a. Preceptor criteria</b> – The college or school makes available and applies quality criteria for preceptor recruitment, orientation, performance, and evaluation. The majority of preceptors for any given student are U.S. licensed pharmacists.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.3.b. Preceptor credentials/expertise</b> – All experiential courses in the curriculum are taught by individuals with academic credentials and expertise that are explicitly linked to their precepting responsibilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.3.c. Preceptor education and development</b> – Preceptors are oriented to the program's mission, the specific learning expectations for the experience outlined in the syllabus, and effective performance evaluation techniques before accepting students. The college or school fosters the professional development of its preceptors through a variety of learning tools and programs commensurate with their educational responsibilities to the program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

<b>3.3.d. Preceptor engagement</b> – The college or school solicits the active involvement of preceptors in the continuous quality improvement of the educational program, especially the experiential component.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.3.e. Student-to-preceptor ratio</b> – Student to precepting pharmacist ratios allow for the individualized mentoring and targeted professional development of learners. In most situations, student:preceptor ratios for IPPE and APPE do not exceed 2:1.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.4. Practice Facilities</b>			
<b>3.4.a. Quality criteria</b> – The college or school employs quality criteria for practice facility recruitment and selection that are appropriately licensed, as well as setting forth expectations and evaluation based on student opportunity to achieve the required Educational Outcomes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.5. Experiential Management</b>			
<b>3.5.a. Experiential education personnel</b> – The experiential education component of the curriculum is led by a professional with knowledge and experience in pharmacy experiential learning. The experiential education program is supported by an appropriate number of qualified faculty and staff.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.5.b. Affiliation agreements</b> – The college or school secures and maintains signed affiliation agreements with the practice facilities it utilizes for the experiential component of the curriculum. At a minimum, each affiliation agreement ensures that all experiences are conducted in accordance with state and federal laws.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.5.c. Student remuneration/employment</b> – Students do not receive payment for participating in curricular pharmacy practice experiences, nor are they placed in the specific practice area within a pharmacy practice site where they are currently employed. (A professional degree program in an institution that meets the definition of and has an institution-wide commitment to “cooperative education” (Cooperative Education and Internship Association; <a href="http://www.ceiainc.org">http://www.ceiainc.org</a> ) may apply to ACPE for a waiver of this requirement.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 3) **College or School’s Comments on the Standard:** The college or school’s descriptive text and supporting evidence should address the statements below. If issues are identified, the college or school should provide its plans for addressing them, with relevant timelines. For plans that have already been initiated to address an issue, the college or school should provide evidence that the plan is working.
- Describe how student performance is assessed and documented, including the nature and extent of patient and health care professional interactions, and the attainment of desired outcomes.
  - Describe how the college or school ensures that the majority of students’ IPPE hours are provided in and balanced between community pharmacy and institutional health system settings.
  - Describe, in aggregate, how the practice experiences assure that students have direct interactions with diverse patient populations in a variety of health care settings.
  - Describe how the college or school ensures that students’ advanced pharmacy practice experience hours fulfill the required four practice settings.
  - Describe how the college or school provides students with in-depth experience in delivering direct patient care as part of an interprofessional team.
  - Describe how the college or school provides students with elective APPEs including opportunities that involve direct patient care that allow students the opportunity to explore a variety of practice sectors.
  - Describe how the college or school distinguishes between introductory and advanced practice experiences.
  - Describe the experiential education office including faculty/staff and a workload analysis.
  - Describe how the college or school applies the policies and procedures for preceptor recruitment, orientation, performance review, and evaluation.
  - Describe the number and percentage of all IPPEs and APPEs precepted by non-pharmacists categorized by type of experience.
  - Discuss the college or school’s student-to-preceptor ratio and how the ratio allows for individualized mentoring and targeted professional development of learners.
  - Describe how the college or school fosters the professional development of its preceptors commensurate with their educational responsibilities to the program.
  - Describe the process for soliciting active involvement of preceptors including those practicing at a distance in the continuous quality improvement of the education program, especially the experiential component.

- Describe the strategies used for the ongoing quantitative and qualitative development of sites and preceptors and formalization of affiliation agreements.
- Describe how the college or school assures, measures, and maintains the quality of sites and preceptors used for practice experiences.
- Describe how the college or school determines the need to discontinue a relationship that does not meet preset quality criteria.
- Describe any other notable achievements, innovations or quality improvements (if applicable).
- Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [52,500 character limit, including spaces] (Approximately 20 pages)

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

Compliant	Compliant with Monitoring	Partially Compliant	Non-Compliant
No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.	<ul style="list-style-type: none"> <li>• No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance <b>/or</b></li> <li>• 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.</li> </ul>	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.	<ul style="list-style-type: none"> <li>• Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated <b>/or</b></li> <li>• Adequate information was not provided to assess compliance</li> </ul>
<input type="checkbox"/> <b>Compliant</b>	<input type="checkbox"/> <b>Compliant with Monitoring</b>	<input type="checkbox"/> <b>Partially Compliant</b>	<input type="checkbox"/> <b>Non-Compliant</b>

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

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**Standard No. 4: Students/Student Services:** The college or school has an appropriately staffed and resourced organizational element dedicated to providing a comprehensive range of services that promote student success and well-being.

The college or school develops, implements, and assesses its policies and procedures to promote student success, resilience, and well-being; ensures the selection of a qualified and diverse student body into the professional degree program; and supports student progression through the PharmD program.

## 1) Documentation and Data:

### Required Documentation and Data:

#### Uploads:

- URL, link or copy of:
  - the Student Handbook and/or Catalog Handbook (college, school or university)
  - information distributed to students regarding student service elements (financial aid, health insurance, etc.)
  - policies that ensure nondiscrimination and access to allowed disability accommodations
  - program information on the college or school's website
  - admissions policies and procedures
  - student complaint policy related to college or school adherence to ACPE standards
  - policies related to academic integrity
  - policies and procedures regarding student progression, early intervention, probation, remediation, missed course work, leave of absence, withdrawal, dismissal, readmission, due process, and appeals
  - college or school's code of conduct (or equivalent) addressing professional behavior
  - recruitment materials
- List of preprofessional requirements for admission into the professional degree program
- Policies and procedures regarding the admissions process including selection of admitted students, transfer of credit, and course waiver policies
- Professional and technical standards for school, college, and/or university
- Copies of instruments used during the admissions process including interview evaluation forms and assessment of written and oral communication
- Link to website (or documentation of other mechanisms) that provide to the public information on required indicators of quality

#### Standardized Tables:

- Application and admissions/enrollments data for the past three years by year and enrollment projections for the next year (if applicable, broken down by branch/campus, pathway, gender, and race/ethnicity). (Template available for download)
- GPA scores (**mean, maximum, and minimum**) for preprofessional coursework for the past three admitted classes (Template available for download)
- GPA scores (**mean, maximum, and minimum**) for preprofessional science courses for the past three admitted classes
- Analysis of student academic performance throughout the program (e.g., progression, probation, attrition rates)
- On-time graduation rates for the last three admitted classes (compared to national rate)
- Percentage total attrition rate for the last three admitted classes (compared to national rate)

**Required Documentation for On-Site Review:**

- The Student Complaints File

**Optional Documentation and Data:**

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

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

	S	N.I.	U
<b>4.1. Student Services</b>			
<b>4.1.a. Student record management</b> – The college or school has an ordered, accurate, and secure system of student records in compliance with the Family Educational Rights and Privacy Act (FERPA). Student services personnel and faculty are knowledgeable regarding FERPA law and its practices.	○	○	○
<b>4.1.b. Financial aid</b> – The college or school provides students with financial aid information and guidance by appropriately trained personnel.	○	○	○
<b>4.1.c. Nondiscrimination</b> – The college or school establishes and implements policies that ensure nondiscrimination as defined by state and federal laws and regulations.	○	○	○
<b>4.1.d. Disability accommodation</b> – The college or school provides accommodations to students with documented disabilities that are determined by the university Disability Office (or equivalent) to be reasonable and do not violate the professional and technical standards or prevent students from meeting the educational outcomes of the program and provides support to faculty in accommodating students with documented disabilities.	○	○	○
<b>4.1.e. Healthcare</b> – The college or school offers students access to adequate and readily accessible physical health and mental health services. Appropriate immunization standards are established, along with the means to ensure that such standards are satisfied.	○	○	○
<b>4.1.f. Wellness and well-being</b> – The college or school offers students access to wellness and resilience programs/services.	○	○	○
<b>4.1.g. Advising and Mentorship</b> – The college or school provides academic advising, mentorship, curricular and career-pathway counseling, and information on post-graduate education and training opportunities adequate to meet the needs of its students.	○	○	○
<b>4.1.h. Student services access</b> – The college or school ensures that all students have equitable access to a comparable system of individualized student services (e.g., tutorial support, counseling, etc.) for all programs (e.g., PharmD/MPH) or pathways (campus, distance, and hybrid/online pathways).	○	○	○
<b>4.2. Academic Environment</b>			
<b>4.2.a. Student information</b> – The college or school produces and makes available to enrolled and prospective students updated information of importance, such as governance documents, policies and procedures, professional and technical standards, academic calendars, handbooks, catalogs, curricular and pathway information, and other resources appropriate to the student experience.	○	○	○
<b>4.2.b. Complaints policy</b> – The college or school develops, implements, and makes available to students a complaints policy that includes procedures for how students may file complaints within the college or school and also directly to ACPE regarding their college's or school's adherence to ACPE standards. The college or school maintains a chronological record of such student complaints, including how each complaint was resolved.	○	○	○
<b>4.2.c. Student misconduct</b> – The college or school develops and implements policies regarding academic and non-academic misconduct of students that clearly outline the rights and responsibilities of, and ensures due process for, all parties involved.	○	○	○
<b>4.2.d. Student representation</b> – The college or school considers student perspectives and includes student representation, where appropriate, on committees, in policy-development bodies, and in assessment and evaluation activities.	○	○	○

<b>4.2.e. Distance learning policies</b> – For colleges and schools offering distance learning opportunities, admissions information clearly explains the conditions and requirements related to distance learning, including an estimated cost of attendance and full disclosure of any requirements that cannot be completed at a distance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.3. Admissions</b>			
<b>4.3.a. Enrollment management</b> – Student enrollment is managed by college or school administration. Enrollments are in alignment with available physical, educational, financial, faculty, staff, practice site, preceptor, and administrative resources.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.3.b. Admission procedures</b> – A duly constituted committee of the college or school has the responsibility and authority for the selection of students to be offered admission. Admission criteria, policies, and procedures are not compromised regardless of the size or quality of the applicant pool. All admission policies including early assurance and transfer should be detailed and readily available.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.3.c. Program description and quality indicators</b> – The college or school produces and makes available to the public, including prospective students: (1) a complete and accurate description of the preprofessional and professional degree program requirements; (2) the program’s current accreditation status; and (3) ACPE-required program performance information as defined in the ACPE Policies and Procedures manual.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.3.d. Admission criteria</b> – The college or school sets performance expectations for criteria (such as admission tests, grade point averages, evaluations, and interviews) used in selecting students who have the potential for success in the professional degree program and the profession. Applicant performance on admission criteria is documented; and the related records are maintained by the college or school as per program/university requirements.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.3.e. Non-Traditional (Post-Baccalaureate) Doctor of Pharmacy Programs</b> – Admissions to a nontraditional (Post-Baccalaureate) Doctor of Pharmacy program must be limited to either: 1) pharmacists awarded a Baccalaureate degree from a 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-United States or non-Canadian program and holding a valid license to practice pharmacy in a United States jurisdiction. Advanced standing does not negate the requirements of pharmacy practice experiences.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.3.f. Admission materials</b> – The college or school produces and makes available to prospective students the criteria, policies, and procedures for admission to the professional degree program. Admission materials, both printed and digital, clearly state academic expectations, required communication skills, types of personal history disclosures that may be required, and professional and technical standards for graduation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.3.g. Written and oral communication assessment</b> – Written and oral communication skills are assessed in a standardized manner as part of the admission process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.3.h. Candidate interviews</b> – Standardized interviews (in-person, telephonic, and/or computer-facilitated) of applicants are conducted as a part of the admission process to assess affective domain characteristics. The interview process must allow for each individual candidate to be interviewed separately from other applicants. Interviewers receive training in the method that the college or school has chosen for standardization of the interview process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.3.i. Transfer and waiver policies</b> – A college or school offering multiple professional degree programs, or accepting transfer students from other schools or colleges of pharmacy, establishes and implements policies and procedures for students who request to transfer credits between programs. Such policies and procedures are based on defensible and documented assessments of course equivalency. A college or school offering multiple pathways to a Doctor of Pharmacy degree has policies and procedures for students who wish to change from one pathway to another.  No more than the equivalent of one year of credit shall be given to any student applying for advanced standing from any institution other than an ACPE accredited college/school of pharmacy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.4. Progression</b>			
<b>4.4.a. Progression policies</b> – The college or school creates, makes available to students and prospective students, and abides by criteria, policies, and procedures related to:			
• Academic progression including probation and remediation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Appeal mechanisms (including grade appeals)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Dismissals for academic and non-academic reasons	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Leaves of absence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



• Missed course work or credit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Readmission	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Rights to due process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Suspension	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Withdrawals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>4.4.b. Early intervention</b> – The college or school’s system of monitoring student performance provides for early detection of academic and behavioral issues. The college or school develops and implements appropriate interventions that have the potential for successful resolution of the identified issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3) **College or School’s Comments on the Standard:** The college or school’s descriptive text and supporting evidence should address the statements below. If issues are identified, the college or school should provide its plans for addressing them, with relevant timelines. For plans that have already been initiated to address an issue, the college or school should provide evidence that the plan is working.

- Describe the student services offered and, if applicable, how the college or school ensures that students in all degree program pathways and geographic locations have equal access to and a comparable system of individualized student services (e.g., tutorial support, faculty advising, healthcare, wellness and counseling).
- Describe how the college or school provides students with financial aid information and guidance, academic advising, career-pathway and other personal counseling, and information about post-graduate education and training opportunities.
- Describe the participation and contribution of students on college or school committees.
- Describe the organization, empowerment, and implementation of a student government association or council.
- Describe other methods (e.g., focus groups, meetings with the Dean or other administrators, involvement in self-study activities, review of student complaints) used to gather student perspectives.
- Describe how the complaint policy is communicated to students. Provide the number of complaints since the last accreditation visit and the nature of their resolution.
- Describe how the college or school handles student misconduct.
- Describe how the college or school provides information regarding distance education opportunities including cost of attendance (if applicable).
- Describe how specific requirements of the standards and guidelines for admissions and enrollment are met, including those for early admission agreements or policies, if applicable.
- Describe how admission evaluations of students are documented and how records are maintained.
- Describe the college or school’s recruitment methods.
- Describe the methods used to assess verbal and written communication skills of applicants to the program.
- Describe the college or school’s interview process.
- Describe the process used for recruitment and admission to the Non-Traditional Doctor of Pharmacy Program (if applicable).
- Describe how enrollment is managed in alignment with available physical, financial, staff, faculty, practice site, preceptor and administrative resources.
- Describe the number of transfer students, including (if applicable) international students or graduates of other professional degree programs admitted with advanced standing, and an assessment of the correlation between the criteria in the transfer policy and success in the program. If applicable, comparative performance data should be provided.
- Describe how student matriculation, progression, and graduation rates relate to admission and transfer variables.

- Describe how academic counseling and/or student support staff work with students seeking to retain or regain good academic standing, and how extensively they are utilized.
- Describe the early intervention and remediation policies and the effect on progression.
- Describe how academic probation, leaves of absence, dismissal, readmission, due process, and appeals affect student progression.
- Describe how the college or school adheres to the annual monitoring policies and make programmatic adjustments to optimize student progression.
- Describe any other notable achievements, innovations or quality improvements (if applicable).
- Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [52,500 character limit, including spaces] (Approximately 20 pages)

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

Compliant	Compliant with Monitoring	Partially Compliant	Non-Compliant
No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.	<ul style="list-style-type: none"> <li>• No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance <b>/or</b></li> <li>• 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.</li> </ul>	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.	<ul style="list-style-type: none"> <li>• Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated <b>/or</b></li> <li>• Adequate information was not provided to assess compliance</li> </ul>
<input type="checkbox"/> <b>Compliant</b>	<input type="checkbox"/> <b>Compliant with Monitoring</b>	<input type="checkbox"/> <b>Partially Compliant</b>	<input type="checkbox"/> <b>Non-Compliant</b>

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

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

**Standard No. 5: Faculty/Staff:** The college or school has a cohort of faculty and staff with the qualifications and experience needed to effectively deliver and evaluate the professional degree program.

1) **Documentation and Data:**

**Required Documentation and Data:**

**Uploads:**

- ACPE Faculty Resource Report related to number of full-time and part-time faculty. (Template available for download).
- List of faculty turnover for the last 5 years, by department/division, with reasons for departure
- List of voluntary or adjunct faculty (not including preceptors)
- An analysis of teaching load of faculty members, including commitments outside the professional degree program
- Evidence of faculty and staff capacity planning and succession planning
- List of active research areas of faculty and an aggregate summary of faculty publications/presentations over the past three years
- Policies and procedures related to faculty recruitment, performance review, promotion, tenure (if applicable), and retention
- CVs of faculty and staff
- Faculty addendum that includes a list of key university and college or school administrators, and full-time and part-time ( $\geq 0.5$ FTE) faculty, including a summary of their current academic rank, primary discipline, title/position, credentials, post-graduate training, and licensure (if applicable) (Template available)

**Standardized Tables:**

- Table: Allocation of Faculty Effort (total for all faculty with  $\geq 0.5$ FTE) [see example table at <http://www.acpe-accredit.org/pdf/Excel%20Documents/AllocationFacultyEffort.xls>]
- Table: Distribution of Full-Time Pharmacy Faculty by Rank and Years in Rank
- Table: Distribution of Full-Time Pharmacy Faculty by Rank, Gender and Race/Ethnicity
- Table: Distribution of Full-Time Pharmacy Faculty by Rank and Highest Degree Earned

**Optional Documentation and Data:**

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

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

	S	N.I.	U
<b>5.1. Faculty and Staff—Quantitative Factors</b>			
<b>5.1.a. Sufficient faculty</b> – The college or school has a sufficient number of core faculty members to effectively address the following programmatic needs that include:			
• Teaching (didactic and experiential)	○	○	○
• Professional development	○	○	○
• Research and other scholarly activities	○	○	○
• Assessment activities	○	○	○
• Service - College/school, institutional, professional, and community	○	○	○

• Interprofessional collaboration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Student advising and career counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Faculty mentoring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Pharmacy practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Responsibilities in other academic programs (if applicable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Support of distance students and campus(es) (if applicable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Student-to-faculty (FTEs) ratios should be no greater than 10:1 to provide students with the individualized attention needed to advance deep learning and foster professional development. The student-to-faculty ratio must be sufficient to allow faculty to effectively deliver the curriculum with required expertise to address curricular content, and fulfill service and scholarship duties required of faculty.			
Newly hired faculty members should have adequate time to onboard to full faculty duties.			
<b>5.1.b. Sufficient staff</b> – The college or school has a sufficient number of staff to effectively address the following programmatic needs that include:			
• Student and academic affairs-related services, including recruitment and admission	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Experiential education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Assessment activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Research administration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Laboratory maintenance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Information technology infrastructure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Pedagogical and educational technology support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Teaching assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• General faculty and administration clerical support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Support of distance students and campus(es) (if applicable)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>5.2. Faculty and Staff—Qualitative Factors</b>			
<b>5.2.a. Academic credentials</b> – Faculty members, including adjunct and volunteer faculty members, have academic and professional credentials and expertise commensurate with their responsibilities to the professional program. Faculty members typically hold earned doctoral degrees.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>5.2.b. Professional credentials</b> – Staff members have professional credentials and expertise commensurate with their roles and responsibilities to the professional program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>5.2.c. Educational effectiveness</b> – Faculty members have the capability and demonstrate a continuous commitment to be effective educators and are able to effectively use contemporary educational techniques to promote student learning in all offered pathways.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>5.2.d. Scholarly engagement</b> – The college or school creates an environment that both requires and promotes research and scholarship, collaboration, and develops mechanisms to assess both the quantity and quality of faculty scholarly activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>5.2.e. Service commitment</b> – In the aggregate, faculty and staff engage in college/school, institutional, professional, and community service that advances the program and the profession of pharmacy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>5.2.f. Practice understanding</b> – Faculty members, regardless of their discipline, have a conceptual understanding of and commitment to advancing current and proposed future pharmacy practice.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>5.2.g. Faculty/staff development</b> – The college or school provides opportunities for career and professional development of its faculty and staff, individually and collectively, to enhance their role-related skills, scholarly productivity, and leadership. Faculty members, instructors, and teaching assistants involved in online and/or	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

distance education have been provided training and skill development to manage, mentor, teach, engage, and evaluate students enrolled in online/distance learning courses or activities.			
<b>5.2.h. Faculty/staff wellness and well-being</b> – Faculty and staff have access to wellness and resilience programs, including resources, peer support, and training to improve their ability to successfully manage and balance work related challenges as well as creating a sense of belonging.	○	○	○
<b>5.2.i. Policy application</b> – The college or school ensures that policies and procedures for faculty and staff recruitment, performance review, promotion, tenure (if applicable), and retention are in place and applied in a consistent manner.	○	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should address the statements below. If issues are identified, the college or school should provide its plans for addressing them, with relevant timelines. For plans that have already been initiated to address an issue, the college or school should provide evidence that the plan is working.

- Provide the college or school's student-to-faculty ratio and describe how the ratio aligns with the college or school's mission and goals for the program.
- Describe the process used to assess and confirm the credentials of faculty and staff, and to assure that faculty credentials are appropriate for their assigned teaching responsibilities.
- Describe the process and interval for conducting faculty workload and needs assessments.
- Describe the process and interval for conducting staff workload and needs assessments.
- Describe the rationale for hiring any part-time faculty.
- Describe how the college or school is planning for faculty and staff capacity and succession planning.
- Describe how the college or school ensures that the faculty composition, including any contributions from internal and external relationships, encompasses the relevant disciplines within the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences to meet the education and research needs as defined by the mission statement.
- Describe how the college or school ensures that faculty members, regardless of their discipline, have a conceptual understanding of current and future trends in the scientific basis of the biomedical, pharmaceutical social/administrative and clinical sciences.
- Describe how the college or school ensures that faculty members, regardless of their discipline, have a conceptual understanding of contemporary pharmacy practice and future trends in a variety of settings.
- Describe the college or school's policy or expectations regarding research productivity for faculty, including timeline for new faculty.
- Describe how faculty, instructors, and teaching assistants involved in distance education are qualified through training or experience to manage, teach, evaluate, and grade students engaged in distance learning (if applicable).
- Describe the performance review process for full-time, part-time and voluntary/adjunct faculty and staff.
- Describe the faculty and staff development programs and opportunities offered or supported by the college or school.
- Describe the wellness and resilience initiatives or programs offered and how these improve work-life balance.
- Describe any other notable achievements, innovations or quality improvements (if applicable).
- Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [52,500 character limit, including spaces] (Approximately 20 pages)

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

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<input type="checkbox"/> <b>Compliant</b>	<input type="checkbox"/> <b>Compliant with Monitoring</b>	<input type="checkbox"/> <b>Partially Compliant</b>	<input type="checkbox"/> <b>Non-Compliant</b>

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

**Standard No. 6: Resources:** The college or school has adequate and appropriately equipped physical and educational facilities to achieve its mission and goals.

The college or school has current and anticipated financial resources to deliver the educational program and accomplish its mission and strategic plan.

1) **Documentation and Data:**

**Required Documentation and Data:**

**Uploads:**

- Floor plans for college or school's facilities and descriptions of the use(s) of available space
- Analysis of the quantity and quality of space available to the program and plans to address identified inadequacies
- Documentation of Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC) or other nationally recognized accreditation of animal care facilities, if applicable
- Detailed budget plan or proforma (previous, current, and subsequent years (3 years total))
- An assessment of faculty generated external funding support in terms of its contribution to total program revenue

**Required Documentation for On-Site Review:**

- Plans/architectural drawings of the physical facilities (if not feasible to provide as part of Self-Study Report)

**Optional Documentation and Data:**

- Total grant funding for past five years, with peer school and national comparisons
- NIH funding for past five years, with peer school comparisons
- Other documentation or data that provides supporting evidence of compliance with the standard

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

	S	N.I.	U
<b>6.1. Physical Facilities and Educational Resources</b>			
<b>6.1.a. Physical facilities</b> – The college or school's physical facilities (or the access to other facilities) meet legal and safety standards, utilize current educational technology, and are clean and well maintained.  Colleges and schools provide students, faculty members, preceptors, instructors, and teaching assistants access to appropriate resources to support their contribution to the college's or school's mission. They also provide organized programs to instruct these individuals in the effective and efficient use of the library and educational resources.	○	○	○
<b>6.1.b. Physical facilities' attributes</b> – The college or school has access to physical facilities that provide adequate:			
• Classrooms that comfortably accommodate the student body and that are equipped with technological capabilities needed to effectively deliver the curriculum	○	○	○
• Laboratories suitable for skills practice, demonstration, and competency evaluation	○	○	○
• Faculty office space with sufficient privacy to permit accomplishment of responsibilities	○	○	○
• Space that facilitates interaction of administrators, faculty, students, and interprofessional collaborators	○	○	○
• Access to educational simulation capabilities	○	○	○
• Faculty research laboratories with well-maintained equipment	○	○	○
• Animal facilities that meet care regulations (if applicable)	○	○	○
• Individual and group student study space and student meeting facilities	○	○	○
Branch or distance campuses have access to physical facilities of comparable quality and functionality as those found on the main campus.			
<b>6.1.c. Educational resource access</b> – The college or school makes available technological and librarian access, current scientific and medical literature, and other academic and educational resources, to students in all pathways, faculty, staff, and preceptors (as needed). For online course delivery, the college or school has sufficient resources to effectively support teaching and learning including appropriate laboratory space, for online students.	○	○	○
<b>6.2. Financial Resources</b>			
<b>6.2.a. Budgetary input</b> – The college or school provides input into the development and operation of a budget that is planned, executed, and managed in accordance with sound and accepted business practices.	○	○	○
<b>6.2.b. Revenue allocation</b> – Sufficient funds are allocated to adequately deliver the professional program.	○	○	○
<b>6.2.c. Equitable allocation</b> – The college or school ensures that funds are sufficient to maintain equitable facilities (commensurate with services and activities) across all program pathways.	○	○	○
<b>6.2.a. Budgetary adequacy</b> – The college or school ensures that sufficient resources are matched to student enrollment and allocated for overall program needs.	○	○	○

3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should address the following. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should provide evidence that the plan is working.

- Describe the physical facilities, including available square footage for all areas outlined by research facilities, lecture halls, faculty offices, laboratories, etc.
- Describe how the college or school's physical facilities (or access to other facilities) utilize current educational technology.
- Describe the educational resources available to faculty, preceptors, and students (library, internet access, etc.).
- Describe how the college or school makes available technological access to current scientific literature and other academic and educational resources to students, faculty, and preceptors.
- Describe the equipment for educational activities, including classroom and simulation areas.
- Describe the equipment for the facilities for research activities.
- Describe the facility resources available for student organizations.
- Describe the facilities available for individual or group student studying and meetings.
- Describe any shared space and how the facilities encourage and support interprofessional interactions.
- Describe how the college or school and university develop annual budgets (including how the college or school has input into the process) and an assessment of the adequacy of financial resources to efficiently and effectively deliver the program and support all aspects of the mission.
- Describe how enrollment is planned and managed in line with resource capabilities.
- Describe how the resource requirements of the college or school's strategic plan have been or will be addressed in current and future budgets.
- Describe how business plans were developed to provide for substantive changes in the scope of the program or student numbers, if applicable.
- Describe any other notable achievements, innovations or quality improvements (if applicable).
- Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [52,500 character limit, including spaces] (Approximately 20 pages)

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

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<input type="checkbox"/> <b>Compliant</b>	<input type="checkbox"/> <b>Compliant with Monitoring</b>	<input type="checkbox"/> <b>Partially Compliant</b>	<input type="checkbox"/> <b>Non-Compliant</b>



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

**Standard No. 7: Assessment:** The college or school develops, resources, and implements a plan to assess achievement of its mission, strategic plan, and attainment of educational outcomes to ensure that graduates are prepared to enter practice. Assessment data should be used for continuous quality improvement of the Doctor of Pharmacy program.

1) **Documentation and Data:**

**Required Documentation and Data:**

**Uploads:**

- College or school's assessment plan (or equivalent) (plan should cover curriculum, structure, and process)
- Description of formative, summative, standardized and comparative assessments of student learning and professional development used by college or school (Template available for download)
- Examples of assessment and documentation of student performance and the attainment of educational outcomes and EPAs
- Performance of graduates (passing rates of **first-time candidates** on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 3 years (only NABP provided documents required for upload)
- Performance of graduates (passing rates of **first-time candidates** on North American Pharmacist Licensure Examination™ (NAPLEX®) for the last 3 years **broken down by campus/branch/pathway** (only required for multi-campus and/or multi-pathway programs) (Template available for download)
- Performance of graduates (passing rate of **first-time candidates**) on Multistate Pharmacy Jurisprudence Examination® (MPJE®) for the last 3 years (only NABP provided documents required for upload)
- Evidence showing that graduates are APPE-ready, Practice-ready, Team-ready (including interprofessional preparedness), and Career-ready
- Analysis of faculty productivity in scholarship, teaching, and service
- Examples of instruments used in assessment and evaluation (of structure and process)
- Relationship analysis of student variables, admission variables, and academic performance

**Complete Data Set from the AACP Standardized Surveys:**

- Graduating Student Survey Summary Report (all questions)
- Faculty Survey Summary Report (all questions)
- Preceptor Survey Summary Report (all questions)
- Alumni Survey Summary Report (all questions)

**Responses to Open-Ended Questions on AACP Standardized Surveys:**

Note: These data will have restricted access. For the open-ended questions, ACPE provides the opportunity for programs to redact (not remove) offensive text, names, and identifying characteristics. In the EXCEL document downloaded from the AACP Survey System with the results from each survey, redaction can be achieved through highlighting in black the specific items listed previously. The document can then be saved as a PDF and emailed directly to ACPE. No comments should be completely removed.

- Graduating Student Survey: Responses to Open-Ended Questions
- Faculty Survey: Responses to Open-Ended Questions
- Preceptor Survey: Responses to Open-Ended Questions
- Alumni Survey: Responses to Open-Ended Questions

**Optional Documentation and Data:**

- Other documentation or data that provides supporting evidence of compliance with the standard Examples of assessment and documentation of student performance, nature and extent of patient and health care professional interactions, and the attainment of desired outcomes; examples of how assessment data has been used to improve student learning and curricular effectiveness
- 2) **College or School's Self-Assessment:** Use the checklist below to self-assess the program's compliance with the requirements of the standard and accompanying guidelines:

	S	N.I.	U
<b>7.1. Assessment Plan</b>			
<b>7.1.a. Assessment plan expectations</b> – The college or school must develop and implement a written assessment plan that assesses the key elements of Standard 7. The college or school must use the analysis of process and outcome measures for continuous development and improvement of the Doctor of Pharmacy program.	○	○	○
<b>7.2. Assessment Elements for Organization and Governance</b>			
<b>7.2.a. Organizational effectiveness</b> – The college or school's assessment plan is designed to provide insight into the effectiveness of the organizational structure in engaging and uniting constituents and positioning the college or school for success through purposeful planning.	○	○	○
<b>7.2.b. Strategic plan</b> – The college or school's assessment plan is designed to monitor and assess the effectiveness of the strategic plan.	○	○	○
<b>7.2.c. Organizational culture</b> – The college or school assesses the culture of the program. Contributing factors such as collaboration, diversity, equity, inclusion, belonging, leadership, and professionalism, should be considered.	○	○	○
<b>7.2.d. Program evaluation by stakeholders</b> – The assessment plan includes the use of data from AACP standardized surveys of graduating students, faculty, preceptors, and alumni.	○	○	○
<b>7.3. Assessment Elements for Educational Outcomes, Curriculum, and Experiential Learning</b>			
<b>7.3.a. Variety of assessment approaches</b> – The assessment plan incorporates 1) systematic, valid, and reliable knowledge-based and performance-based formative and summative assessments and 2) standardized assessments that allow for national comparisons and college- or school-determined peer comparisons.	○	○	○
<b>7.3.b. Curriculum assessment and continuous improvement</b> – The college or school systematically assesses its curricular structure, content, organization, and outcomes to ensure optimal achievement of educational outcomes with reasonable student workload expectations. The college or school documents the use of assessment data for continuous improvement of the curriculum and its delivery.	○	○	○
<b>7.3.c. Experiential quality assurance</b> – The college or school develops and implements a quality assurance procedure for all pharmacy practice experiences that is established and implemented to: (1) facilitate achievement of stated course expectations, (2) standardize key components of experiences across all sites offering the same experiential course, and (3) promote consistent assessment of student performance.	○	○	○

<b>7.3.d. Student achievement and readiness</b> – The assessment plan measures student achievement at defined levels of the professional competencies that support attainment of 2.1a-n, in aggregate and at the individual student level. Evidence should be provided to show that graduates are APPE-ready, Practice-ready, and Team-ready. Data are used to improve student achievement.	○	○	○
<b>7.3.e. Pathway comparability</b> – The assessment plan includes a variety of assessments that will allow comparison and establishment of educational parity of all alternative program pathways to degree completion, including geographically dispersed campuses and online or distance learning-based programs.	○	○	○
<b>7.4. Assessment Elements for Student Services, Faculty and Staff, and Resources</b>			
<b>7.4.a. Student services assessment</b> – The college or school assesses the quality and quantity of student services to address the programmatic needs for healthcare, wellness, advising, and academic support in line with key elements 4.1e. to 4.1.h.	○	○	○
<b>7.4.b. Admission criteria</b> – The college or school regularly assesses the criteria, policies, and procedures to ensure the selection of a qualified and diverse student body, members of which have the potential for academic success and the ability to practice in team-centered and culturally diverse environments.	○	○	○
<b>7.4.c. Student progression</b> – The college or school regularly assesses student retention and attrition data, criteria, policies, and procedures to identify and analyze trends and to make programmatic adjustments to optimize student progression as established in the annual monitoring policies documented in the ACPE Policies and Procedures manual.	○	○	○
<b>7.4.d. Faculty and staff workload</b> – The college or school regularly assesses faculty and staff workload to effectively address the programmatic needs of key elements 5.1 and 5.2.	○	○	○
<b>7.4.e. Faculty productivity</b> – The college or school systematically assesses the productivity of its faculty in scholarship, teaching, and service.	○	○	○
<b>7.4.f. Preceptor capacity</b> – The college or school systematically assesses the preceptor quantity and quality needs based on enrollment.			
<b>7.4.g. Physical and financial resources</b> – The college or school evaluates the physical facilities and financial resources based on programmatic needs.	○	○	○
<b>7.5. Continuous quality improvement</b>			
<b>7.5.a. Quality improvements</b> – The college or school utilizes stakeholder feedback and assessment data to make changes to the program and improve the educational outcomes and programmatic processes.  Colleges and schools should make available to key stakeholders, at least annually, the major findings and actions resulting from its assessment plan.	○	○	○
<b>7.5.b. Continuous compliance with the accreditation standards</b> – The college or school has in place processes and procedures for reviewing and ensuring its Doctor of Pharmacy program meets all accreditation standards and if applicable, all requested monitoring, during the awarded accreditation term.	○	○	○

- 3) **College or School's Comments on the Standard:** The college or school's descriptive text and supporting evidence should address the following. Use the text box provided to describe: areas of the program that are noteworthy, innovative, or exceed the expectation of the standard; the college or school's self-assessment of its issues and its plans for addressing them, with relevant timelines; findings that highlight areas of concern along with actions or recommendations to address them; and additional actions or strategies to further advance the quality of the program. For plans that have already been initiated to address an issue, the college or school should provide evidence that the plan is working.
- Describe how the college or school developed and implemented an assessment plan that assesses the key elements of Standard 7.
  - Describe how the college or school uses the analysis of process and outcome measures for continuous development and improvement of the Doctor of Pharmacy program.
  - Describe how the college or school's assessment plan provides insight into the effectiveness of the organizational structure in engaging and uniting constituents and positioning the college or school for success through purposeful planning.
  - Describe how the college or school's assessment plan provides insight into the effectiveness of the strategic plan in meeting the mission of the program.

- Describe how the college or school assesses the program's culture to advance the mission and goals of the program. The description should include collaboration, diversity, equity, inclusion, leadership, and professionalism factors.
- Describe how the college or school uses data from AACP standardized surveys of graduating students, faculty, preceptors, and alumni and how the results inform decision making, quality assurance, and quality improvement.
- Describe how the college or school systematically assesses its curricular structure, content, organization, and outcomes to ensure optimal achievement of educational outcomes with reasonable student workload expectations.
- Describe how the college or school documents the use of assessment data for continuous improvement of the curriculum and its delivery.
- Describe how the college or school implements a procedure to assess pharmacy practice experiences to promote achievement of educational outcomes.
- Describe how the assessment plan measures student achievement at defined levels of the professional competencies that support attainment of the educational outcomes and Entrustable Professional Activities (EPAs), in aggregate and at the individual student level.
- Describe how feedback from the assessments is used to improve student learning, outcomes, and curricular effectiveness.
- Describe how the results of curricular assessments are used to improve the curriculum with examples provided.
- Describe how the results of interprofessional education outcome assessment data are used to improve the curriculum.
- Describe how the use of assessments to show comparison and establishment of educational parity of alternative program pathways to degree completion.
- Describe how the college or school assesses the quality and quantity of student services to address the programmatic needs for health, wellness, and academic support in line with key elements 4.1e. to 4.1.h.
- Describe how the college or school regularly assesses the criteria, policies, and procedures to ensure the selection of a qualified and diverse student body with a description of how curricular outcomes data are correlated and related to admissions data.
- Describe how the college or school regularly assesses student retention and attrition data, criteria, policies, and procedures to identify and analyze trends and to make programmatic adjustments to optimize student progression as established in the annual monitoring policies documented in the ACPE Policies and Procedures manual.
- Describe how the college or school assesses faculty and staff workload to effectively address the programmatic needs of key elements 5.1 and 5.2.
- Describe how the college or school assesses the productivity of its faculty in scholarship, teaching, and service.
- Describe how the college or school assesses the preceptor needs based on enrollment.
- Describe how assessment data from practice sites is used for quality improvement.
- Describe how the college or school evaluates the physical facilities and financial resources based on programmatic needs and goals.
- Describe how the college or school utilizes assessment results to improve the educational outcomes and programmatic processes.
- Describe the process how the college or school ensures its Doctor of Pharmacy program meets all accreditation standards during the awarded accreditation term.
- Describe how the college or school uses information generated from the assessment plan(s) to advance quality within its Doctor of Pharmacy program.
- Describe any other notable achievements, innovations or quality improvements (if applicable).
- Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

[TEXT BOX] [52,500 character limit, including spaces] (Approximately 20 pages)

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

Compliant	Compliant with Monitoring	Partially Compliant	Non-Compliant
<p>No factors exist that compromise current compliance; no factors exist that, if not addressed, may compromise future compliance.</p>	<ul style="list-style-type: none"> <li>No factors exist that compromise current compliance; factors exist that, if not addressed, may compromise future compliance <b>/or</b></li> <li>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.</li> </ul>	<p>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.</p>	<ul style="list-style-type: none"> <li>Factors exist that compromise current compliance; an appropriate plan to address the factors that compromise compliance does not exist or has not yet been initiated <b>/or</b></li> <li>Adequate information was not provided to assess compliance</li> </ul>
<p><input type="checkbox"/> <b>Compliant</b></p>	<p><input type="checkbox"/> <b>Compliant with Monitoring</b></p>	<p><input type="checkbox"/> <b>Partially Compliant</b></p>	<p><input type="checkbox"/> <b>Non-Compliant</b></p>

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

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