#### Interim Report for the Professional Program Leading to the

#### [*name of degree*] Degree

**INTERNATIONAL-PREACCREDITATION VERSION**

**[*date of report*]**

**[*Name of University*]**

**[*Name of College/Faculty*]**

**[*City/Town*]**

**[*Country*]**

**Index**

|  |  |
| --- | --- |
|  | Page No. |
| 1. Introduction
 |  |
| 1. General Update Since the Last On-Site Evaluation or Interim Report *(key recent developments that are not covered elsewhere in the report)*
 |  |
| 1. Notable Changes (if any) in Status with the National Accrediting Body and/or Education Authority since Last ACPE On-Site Evaluation or Interim Report
 |  |
| 1. Quality Criteria with Monitoring Requests *(select from the list below, as required, to include ACPE’s current monitoring requests; i.e., delete the Criteria that are not specifically being monitored by ACPE)*
 |  |
| 1. Mission, Goals, and Values |  |
| 2. Professional, Ethical and Harmonious Environment |  |
| 3. Strategic Planning and Continuous Quality Improvement |  |
| 4. Assessment of Achievement of Mission and Goals |  |
| 5. School and University Internal Relationships |  |
| 6. External Collaborative Relationships |  |
| 7. Organizational Structure and Governance of the School |  |
| 8. Competencies of Graduates |  |
| 9. Development and Delivery of the Curriculum |  |
| 10. Teaching and Learning Methods |  |
| 11. Curricular Foundation in the Sciences |  |
| 12. Simulation and Practice Experiences |  |
| 13. Assessment of Student Learning and Curricular Improvement |  |
| 14. Student Services |  |
| 15. Program Information |  |
| 16. Academic Policies and Procedures |  |
| 17. Enrollment Management |  |
| 18. Student Representation, Perspectives, and Grievances |  |
| 19. Academic and Other Staff Resources – Quantitative |  |
| 20. Academic Staff Resources - Qualitative |  |
| 21. Continuing Professional Development of the Staff |  |
| 22. Performance Evaluation of the Staff |  |
| 23. Physical Facilities |  |
| 24. Library and Educational Resources |  |
| 25. Pharmacy Practice Sites and Preceptors |  |
| 26. Financial Resources |  |
| 1. General Updates for Other Quality Criteria *(select from the list below, as required, to address general updates; i.e., delete the Critera that are currently being monitored by ACPE and are included in the section above)*
 |  |
| 1. Mission, Goals, and Values |  |
| 2. Professional, Ethical and Harmonious Environment |  |
| 3. Strategic Planning and Continuous Quality Improvement |  |
| 4. Assessment of Achievement of Mission and Goals |  |
| 5. School and University Internal Relationships |  |
| 6. External Collaborative Relationships |  |
| 7. Organizational Structure and Governance of the School |  |
| 8. Competencies of Graduates |  |
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| 14. Student Services |  |
| 15. Program Information |  |
| 16. Academic Policies and Procedures |  |
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| 18. Student Representation, Perspectives, and Grievances |  |
| 19. Academic and Other Staff Resources – Quantitative |  |
| 20. Academic Staff Resources - Qualitative |  |
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| 22. Performance Evaluation of the Staff |  |
| 23. Physical Facilities |  |
| 24. Library and Educational Resources |  |
| 25. Pharmacy Practice Sites and Preceptors |  |
| 26. Financial Resources |  |
| 1. Substantive Change *(if applicable)*
 |  |
| 1. Faculty (Academic Staff) Resource Report (FRR) *[required supporting documentation]*
 |  |
| 1. Faculty (Academic Staff) List *[required supporting documentation]*
 |  |
| 1. Summarized Study Plan/Curriculum by Academic Year (organized by year of study and semester) *[required supporting documentation]*
 |  |
| 1. List of Current Committees *[required supporting documentation]*
 |  |
| 1. Organizational Chart of the School of Pharmacy *[required supporting documentation]*
 |  |

# 1. Introduction

The Accreditation Council for Pharmacy Education (ACPE) Board of Directors reviewed the [*name of program*] Program of [*name of university, name of school/college/faculty*], for the purpose of [*state purpose of last evaluation*] at its [*date of meeting*] meeting. The Board noted [*summarize key findings and conclusions of the Board as well as main items needing attention in order to bring them into compliance*].

The Board [*summarize the International-Preaccreditation action taken, with applicable terms/dates*]. The Board requested [*summarize the request; details of specific monitoring are not needed here*].

**2. General Update Since the Last On-Site Evaluation or Interim Report**

*Provide a brief general update on the Program, School/College/Faculty and University, focusing on any notable developments that are not covered by the monitoring requests.*

1. **Notable Changes (if any) in Status with the National Accrediting Body and/or Education Authority since Last ACPE On-Site Evaluation or Interim Report**

***In addition to the items specifically requested by ACPE****, please provide* ***a brief description*** *of any notable changes since the last on-site evaluation visit or interim report with regard to the accreditation status of the International-Preaccreditation degree program and/or the University by the country’s national accreditation body and/or any other accreditation or authorization that applies to the degree program and/or University.*

**4. Monitoring Requested for the Written Report:**

**Summary Table of the Criteria Requiring Monitoring**

*(Complete the table below; click on appropriate checkbox to indicate last assessment of compliance by ACPE. Delete rows for non-applicable Criteria.)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Quality Criteria** | **Meets Expectations** | **Focused Attention Needed**  | **Less than Expected** | **Much Improvement Needed** |
| ***MISSION, PLANNING, AND EVALUATION*** |  |  |  |  |
| 1. Mission, Goals, and Values
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Professional, Ethical and Harmonious Environment
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Strategic Planning and Continuous Quality Improvement
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Assessment of Achievement of Mission and Goals
 | [ ]  | [ ]  | [ ]  | [ ]  |
| ***ORGANIZATION AND ADMINISTRATION*** |  |  |  |  |
| 1. School and University Internal Relationships
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. External Collaborative Relationships
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Organizational Structure and Governance of the School
 | [ ]  | [ ]  | [ ]  | [ ]  |
| ***CURRICULUM*** |  |  |  |  |
| 1. Competencies of Graduates
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Development and Delivery of the Curriculum
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Teaching and Learning Methods
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Curricular Foundation in the Sciences
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Simulation and Practice Experiences
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Assessment of Student Learning and Curricular Improvement
 | [ ]  | [ ]  | [ ]  | [ ]  |
| ***STUDENTS AND ACADEMIC POLICIES*** |  |  |  |  |
| 1. Student Services
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Program Information
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Academic Policies and Procedures
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Enrollment Management
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Student Representation, Perspectives, and Grievances
 | [ ]  | [ ]  | [ ]  | [ ]  |
| ***STAFF RESOURCES*** |  |  |  |  |
| 1. Academic and Other Staff Resources - Quantitative
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Academic Staff Resources - Qualitative
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Continuing Professional Development of the Staff
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Performance Evaluation of the Staff
 | [ ]  | [ ]  | [ ]  | [ ]  |
| ***FACILITIES AND RESOURCES*** |  |  |  |  |
| 1. Physical Facilities
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Library and Educational Resources
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Pharmacy Practice Sites and Preceptors
 | [ ]  | [ ]  | [ ]  | [ ]  |
| 1. Financial Resources
 | [ ]  | [ ]  | [ ]  | [ ]  |

*[For each Criterion for which monitoring is requested, use the following format:]*

**[*Criterion Number*]: [*Criterion Name*]**

Following is a summary of the Board’s concerns related to this Criterion: *[Insert brief bulleted points.]* *[Note: Re-reading and then summarizing the Board’s and/or Team’s concerns helps to ensure that your response specifically addresses the request and concerns.]*

**Request:** *[Copy and paste the request exactly from the ACPE document.* ***Use bold text****.]*

**School’s Response:** *[refer to Interim Report Guidelines for guidance on length and required detail.]*

**Additional Comments on the Criterion:** *(if applicable; optional)*

**Supporting Evidence:** *(If applicable, refer to appendix/appendices where supporting evidence is provided.)*

1. **General Updates for other Quality Criteria**

*[Provide a* ***brief update*** *for each Quality Criterion for which specific monitoring was not requested by ACPE. For each Criterion, the text should be a maximum of ± 200 words.]*

**6. Substantive Change** *(if applicable) [Refer to Section 15 of the International-Accreditation and International-Preaccreditation Policies and Procedures for examples of what actual or anticipated changes should be reported to ACPE.]*

1. **Faculty Resource Report (FRR)** *[For the FRR, please use the template posted on the ACPE website:*

 [*https://www.acpe-accredit.org/pdf/ISP/FacultyResourceReport.xlsx*](https://www.acpe-accredit.org/pdf/ISP/FacultyResourceReport.xlsx)*)*

**8. Faculty List** *[Please use the template posted on the ACPE website:* [*https://www.acpe-accredit.org/pdf/ISP/FacultyList.docx*](https://www.acpe-accredit.org/pdf/ISP/FacultyList.docx)*]*

**9. Summarized Study Plan/Curriculum by Academic Year (organized by year of study and semester)**

**10. List of Current Committees**

[*please include a very brief statement about the function of each committee*]

**11. Organizational Chart of the School of Pharmacy**