



Condensed Self-Study Report of University of Southern California

University of Southern California

School of Pharmacy

1985 Zonal Avenue

Los Angeles

California - 90089-9121

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Pharmacy College or School Profile

University of Southern California

University of Southern California / School of Pharmacy

1985 Zonal Avenue

Los Angeles

California - 90089-9121

Departmental/Divisional Structure

Clinical Pharmacy, Pharmaceutical Economics and Po (CPPEP)

Pharmacology and Pharmaceutical Sciences (PPSI)

Branch/Distance Campus

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University of Southern California / School of Pharmacy

College or School's Overview
College or School's Overview (since last comprehensive on-site evaluation)

(School comments begin here)

Standards for Mission, Planning, and Evaluations

In 2010, we set out to revise our Strategic Plan, hiring Morwin Consulting Group to guide faculty, alumni, students and other constituents through an intensive process leading to the current plan articulating the School's vision, values, mission statement, goals and objectives.

Standards for Organization and Administration

The School recently underwent a number of administrative changes. Initially, two vice deans (Dr. Kathleen Johnson and Dr. Sarah Hamm-Alvarez) reported directly to the dean, with a variety of functional units reporting to each. As USC entered a \$6 billion campaign in 2010, the dean of each school at the university was expected to spend half his/her time fundraising, necessitating the transfer of more responsibility and authority outside the dean. The new structure functioned well until Johnson's tragic death. The dean appointed Hamm-Alvarez to the new position of executive vice dean. The School suffered another loss in 2014 with the death of Dr. Ron Alkana, associate dean for Graduate Affairs. Hamm-Alvarez took on the role of interim associate dean for Graduate Affairs. Other new administrative positions were added, with the current organizational chart including the following: 1) associate dean and assistant dean for Academic Medical Center Programs (both new); 2) senior director of Communications (promotion); 3) special assistant to the dean for Diversity; 4) executive vice dean (new); 5) associate dean for Research and Graduate Affairs; 6) associate dean for Graduate Affairs and Interdisciplinary Graduate Programs (open); 7) associate dean for Faculty/Student Affairs and Admissions; 8) assistant dean for Curriculum and Assessment, and director of Experiential Programs; 9) associate dean for Global Initiatives and Technology; and 10) director of Continuing Professional Education.

Dean R. Pete Vanderveen recently elected not to seek a third term. He will return to the faculty as professor and senior adviser to the USC Schaeffer Center for Health Policy and Economics. A national search is underway and a new dean is expected by July 1, 2015.

Standards for Curriculum

Several curricular modifications occurred over the last several years, with plans for further revision approved for 2015. Revisions include: 1) reducing the units required per semester; 2) reducing the prerequisites; and 3) offering a more robust and flexible slate of electives. The Introductory Pharmacy Practice Experiences (IPPE) programming is being revised to continue to meet or exceed the 300 hours required, and to make the experiences more consistent with emerging practice advances.

Courses with small-group breakout sessions and case studies are included in the curriculum, including all 11 therapeutics courses, the pharmaceuticals series and many offerings in law and ethics. New courses being developed focus on professional development, leadership and interprofessional education. We are moving through ExamSoft to more computerized forms of student testing. All courses are now video-captured. The School plays a leadership role in interdisciplinary, team-based learning with other health professional programs.

Standards for Students

Our students and their organizations continue to earn significant state and national awards, and students engage extensively in such activities as health fairs, professional programs and the admissions process. They lobby to expand pharmacists' roles, as evidenced in the passing of SB 493, which made California the first to designate all pharmacists as "providers."

Standards for Faculty and Staff

Our excellent faculty are regarded as innovators. Many have served as heads of leading professional organizations and on the boards of major journals. Accolades include a member of the Institute of Medicine, multiple recipients of APhA Foundation's Pinnacle Award and a recipient of the Presidential Citizens Medal. Recruitment of new faculty remains a challenge, exacerbated by the sudden loss of two key administrators. Recruitment of new faculty of equal caliber is one of our highest priorities. New staff positions were added in technology, IT, research and development, while other positions were eliminated after careful review.

Facilities and Resources

Our facilities have been modernized, with lecture hall renovations; a new student compounding laboratory; new offices for International Center for Regulatory Sciences, pharmacoeconomics faculty and the advancement staff; a new Medication Therapy Management Call Center; a successful transplant service; a new ambulatory care pharmacy (the School's third); new space for student organizations; and space for a closed-door specialty pharmacy to take advantage of 340B drug pricing. Many of these initiatives will provide both IPPE and Advanced Pharmacy Practice Experience (APPE) rotation sites.

University of Southern California / School of Pharmacy

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

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

(School comments begin here)

The Self-Study Committee for the USC School of Pharmacy was organized in February 2013, with Fred G. Weissman, PharmD, JD, associate dean for Faculty/Student Affairs and Admissions, given the responsibility by Dean R. Pete Vanderveen to serve as the committee's chair. Weissman invited key faculty members and students to join the committee to oversee and review the preparation of the standards that would comprise the final self-study report. Alumni, staff and student IPPE and APPE preceptors were also asked to serve. The 24 members of the Self-Study Committee include:

Fred G. Weissman, PharmD, JD, chair (faculty)

Krist Azizian, PharmD, assistant dean and chief pharmacist, Keck Medical Center (faculty)

Timothy Bensman, PharmD (PhD student)

Kathleen Besinque, PharmD, MEd, assistant dean and experiential programs director (faculty)

Enrique Cadenas, MD, PhD (faculty)

Amy Chatfield, MLS (faculty-libraries)

Andy Gelejian (PharmD student)

Jim Granderson, director of Admissions/Student Affairs (staff)

Sarah Hamm-Alvarez, PhD, executive vice dean, vice dean (faculty)

Dolly Harris, PharmD (alumna)

Ian Haworth, PhD, curriculum chair (faculty)

Kevin Hong (PharmD student)

Kathi Horgan, program assistant to the associate dean (staff)

Grant Lawless, PharmD, MD (faculty)

Lillian Lee (PharmD student)

Ed Lieskovan, PharmD, MBA (faculty and alumnus)

Sandy Melnick, PharmD, preceptor (alumnus)

Curtis Okamoto, PhD, chair of Department of Pharmacology and Pharmaceutical Sciences (faculty)

Jack Raber, PharmD (alumnus and faculty)

Kathryn Rich, PhD (staff)

Philip Sanshuck (PharmD student)

Azar Shahabi, associate dean for Administrative Affairs (staff)

Diana Shen (PharmD student)

Glen Stimmel, PharmD (faculty)

R. Pete Vanderveen, RPh, PhD (dean)

Michael Z. Wincor, PharmD, associate dean (faculty)

At the committee's first meeting, the chair assigned each of the 30 self-study standards, along with due dates. The committee met every other month to discuss and review drafts of the standards. As drafts were completed, committee members reviewed the drafts and shared their comments. The committee chair then reviewed comments and suggestions and made necessary changes and/or adjustments.

In September 2014, the School requested a visit by a member of the ACPE staff to discuss various aspects of the accreditation process and answer questions. Dr. Greg Boyer came to the School for one day to meet with deans and chairs, members of the Self-Study Committee and the Pharmacy Faculty Council. Once the Self-Study Committee completed final review of the draft standards, they were shared with the School's faculty, and specific staff, alumni, preceptors and students. The Self-Study Committee continues to meet regularly.

Summary of Compliance Status

Standards	Compliant	Compliant With Monitoring	Partially Compliant	Non Compliant
Mission, Planning, and Evaluation				
1. College or School Mission and Goals	✔			
2. Strategic Plan	✔			
3. Evaluation of Achievement of Mission and Goals	✔			
Organization and Administration				
4. Institutional Accreditation	✔			
5. College or School and University Relationship	✔			
6. College or School and Other Administrative Relationships	✔			
7. College or School Organization and Governance		✔		
8. Qualifications and Responsibilities of the Dean	✔			
Curriculum				
9. The Goal of the Curriculum	✔			
10. Curricular Development, Delivery, and Improvement.		✔		
11. Teaching and Learning Methods		✔		
12. Professional Competencies and Outcome Expectations	✔			
13. Curricular Core - Knowledge, Skills, Attitudes and Values	✔			
14. Curricular Core - Pharmacy Practice Experiences	✔			
15. Assessment and Evaluation of Student Learning and Curricular Effectiveness		✔		
Students				
16. Organization of Student Services	✔			
17. Admission Criteria, Policies, and Procedures	✔			
18. Transfer of Credits and Waiver of Requisites for Admission with Advanced Standing	✔			
19. Progression of Students	✔			
20. Student Complaints Policy	✔			
21. Program Information	✔			
22. Student Representation and Perspectives	✔			
23. Professional Behavior and Harmonious Relationships	✔			
Faculty and Staff				
24. Faculty and Staff - Quantitative Factors		✔		
25. Faculty and Staff - Qualitative Factors	✔			
26. Faculty and Staff Continuing Professional Development and Performance Review		✔		
Facilities and Resources				
27. Physical Facilities		✔		
28. Practice Facilities	✔			
29. Library and Educational Resources	✔			
30. Financial Resources	✔			

University of Southern California / School of Pharmacy

1. College or School Mission and Goals	
<p>The college or school of pharmacy (hereinafter "college or school") must have a published statement of its mission, its goals in the areas of education, research and other scholarly activities, service, and pharmacy practice, and its values. The statement must be compatible with the mission of the university in which the college or school operates. These goals must include fundamental commitments of the college or school to the preparation of students who possess the competencies necessary for the provision of pharmacist-delivered patient care, including medication therapy management services, the advancement of the practice of pharmacy and its contributions to society, the pursuit of research and other scholarly activities, and the assessment and evaluation of desired outcomes.</p>	

2. College or School's Self-Assessment

The college or school has a published statement of its mission; its long-term goals in the areas of education, research and other scholarly activities, service, and pharmacy practice; and its values.	Satisfactory
The mission statement is compatible with the mission of the university in which the college or school operates.	Satisfactory
The college or school's vision includes the development of pharmacy graduates who are trained with other health professionals to provide patient care services as a team.	Satisfactory
The college or school's vision and long-term goals include fundamental commitments of the program to the preparation of students who possess the competencies necessary for the provision of pharmacist-delivered patient care, including medication therapy management services, the advancement of the practice of pharmacy and its contributions to society, the pursuit of research and other scholarly activities, innovation, quality assurance and continuous quality improvement, and the assessment and evaluation of desired outcomes.	Satisfactory
The college or school's vision and goals provide the basis for strategic planning on how the vision and goals will be achieved.	Satisfactory
For new college or school initiatives, e.g., branch campus, distance learning, or alternate pathways to degree completion, the college or school ensures that: <ul style="list-style-type: none"> • the initiatives are consistent with the university's and the college or school's missions and goals • the same commitment to the instillation of institutional mission and academic success is demonstrated to all students, irrespective of program pathway or geographic location • resources are allocated in an equitable manner 	N/A

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/>	How the college or school's mission is aligned with the mission of the institution
<input checked="" type="checkbox"/>	How the mission and associated goals address education, research/scholarship, service, and practice and provide the basis for strategic planning

- How the mission and associated goals are developed and approved with the involvement of various stakeholders, such as faculty, students, preceptors, alumni, etc.
- How and where the mission statement is published and communicated
- How the college or school promotes initiatives and programs that specifically advance its stated mission
- How the college or school supports postgraduate professional education and training of pharmacists and the development of pharmacy graduates who are trained with other health professionals to provide patient care as a team
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACCP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. School's mission is consistent with the mission of the University.

The School's mission aligns with the 2004 USC Strategic Plan's mission statement: "The central mission of the University of Southern California is the development of human beings and society as a whole through the cultivation and enrichment of the human mind and spirit." The University's Strategic Plan includes the following goals to fulfill the mission: 1) span disciplinary and school boundaries to focus on problems of societal significance; 2) link fundamental to applied research; 3) build networks and partnerships; and 4) increase responsiveness to learners.

2. How the mission and associated goals address education, research/scholarship, service, and practice and provide the basis for strategic planning.

The School's mission states: "We will lead schools of pharmacy by demonstrating and shaping the future of pharmacy practice, integrative research, and educational excellence." The five goals that follow the mission statement are intended to fulfill the mission. Collectively they cover education, research/scholarship, service, and practice, all of which are essential to the School and formed the basis of our strategic-planning efforts.

3. How the mission and associated goals are developed and approved with the involvement of various stakeholders, such as faculty, students, preceptors, alumni, etc.

The School's mission and goals were created in 2011 by faculty, students, preceptors and alumni in strategic-planning sessions facilitated by knowledgeable consultants who helped guide stakeholders in arriving at a well-crafted vision, mission and goals. Development of the School's Strategic Plan culminated in a faculty retreat. The present plan was approved in 2011.

4. How and where the mission statement is published and communicated.

The mission statement is presently available on the School of Pharmacy website, and has been provided to each faculty member via email. The statement is also continually referred to by various standing committees (Curriculum, Admissions, Scholarship Standards, Assessment, and Faculty Selection and Promotion) and was a critical focus of our recent academic program review by the provost's office.

5. How the School promotes initiatives and programs that specifically advance its stated mission.

The School's curriculum is consistently being reviewed and revised to ensure that graduating students receive sufficient experiential training along with the skills and knowledge to make them excellent providers of healthcare and to ensure our curricular outcomes are consistent with CAPE outcomes. Skills such as physical assessment are learned early in the curriculum. Partnerships with USC's medical, dental, physical therapy and occupational therapy students strengthen the team approach to patient care, as well as foster respect and understanding for each profession's contributions to patient health. Students participate in required and voluntary health fairs to communicate with patients, primarily in underserved communities, where individuals often need guidance on how to enter the healthcare system. In addition, members of the School's faculty and student body actively participated in efforts to pass California Senate Bill 493, which now recognizes the pharmacist as a healthcare provider, and are now statewide leaders in implementation of the new law. Further, School faculty are initiating new models of care using clinical pharmacy teams in various settings, while the School's health economists are studying the value of that care on patient outcomes and cost. To promote integrative research, the School has developed shared translational research laboratories, initiated a pilot program providing seed funding for translational science projects, has increased joint appointments, and developed the International Center for Regulatory Science and the interdisciplinary Schaeffer Center.

6. How the college or school supports postgraduate professional education and training of pharmacists and the development of pharmacy graduates who are trained with other health professionals to provide patient care as a team.

A growing number of the School's graduates have applied and been accepted into pharmacy residency and fellowship training programs in the region and across the country. The School greatly encourages such continuing advancement of pharmacy education. The School continues to develop interprofessional training programs that allow pharmacy students to interact with medical, dental, physical therapy, and occupational therapy students. This team approach to learning, typically through case presentations, has fostered interdisciplinary problem-solving and has strengthened pharmacy students' skills in better understanding common and multiple disease states and the provision of effective drug therapy to manage these conditions. Of note, the School was recently recognized as an "exemplar innovator for integration of medication therapy management services in the medical neighborhood" and will be among the featured programs in an upcoming report by the University of California, San Francisco Center for Excellence in Primary Care.

7. How the school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The Strategic Plan addresses the advancement of student learning by directing changes in the curriculum, emphasizing more involvement in experiential programming, encouraging interdisciplinary learning experiences, stimulating ways for students to learn new skill sets along with the opportunity to use those skill sets (e.g., health fair participation), promoting ways for students to learn substantive information necessary for practice and helping the School provide a firm professional foundation for students. The School strives to bridge pharmacy education to existing and future opportunities for students in community and hospital practice, as well as in industry, managed care and government positions. The School has also further engaged in dual-degree programs to broaden opportunities for graduating students, including programs in business (MBA), law (JD), research (PhD), public health

(MPH), regulatory science (MS or doctorate), pharmacoeconomics and health policy (MS or PhD), healthcare decision analysis (MS), global medicine (MS) and gerontology (MS).

8. Any other notable achievements, innovations or quality improvements.

Over the past several years, students and faculty at the School have been acknowledged for their professional contributions in advancing pharmacy education and professional patient care services (see Exhibit 1-B). Most notable are a \$12 million grant from the Center for Medicare & Medicaid Innovation to expand and analyze the cost-effectiveness of the innovative collaborative practice developed at Los Angeles-area safety-net clinics (led by Dr. Geoffrey Joyce and Dr. Steven Chen) and an \$11 million National Institutes of Health grant to study the effects of various interventions on inappropriate antibiotic prescribing to patients with upper-respiratory symptoms (led by Dr. Jason Doctor). In therapeutic development, Dr. Roberta Brinton renewed a program project grant and secured additional funding of more than \$12 million to continue her Alzheimer’s research and initiate a Phase I study of the use of allopregnanolone. The School currently has six clinical trials in humans underway, focused on Alzheimer’s disease, prostate cancer, alcoholism and other topics. In addition, the dean, faculty and numerous students were deeply involved in the development and passage of Senate Bill 493, which increases the scope of practice for all pharmacists in California, designates pharmacists as providers and broadens collaborative practice opportunities from institutional settings to all licensed pharmacies. The dean participated in the committees drafting the language and implementing the bill. In addition, the dean testified at the Assembly Joint Committee hearing before the Senate Health Committee and the Senate Committee on Small Business and at the hearing before the Assembly Committee on Health, and accompanied the bill’s sponsor, Dr. Edward Hernandez, to numerous statewide op-ed editorial staff meetings.

9. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

For the most part, the School and the national data compare closely, especially when combining the “agree” and “strongly agree” categories. An exception to this has to do with our graduating students’ response to whether they would again choose to study pharmacy (graph 1). Our graduates are about 18% below the national average in affirming this career choice. Anecdotally, we believe this response has to do with the tightening job market and the strong desire among most of our graduates to remain in the Southern California area, where the market is especially competitive.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. Work continues on some of the objectives, results, and changes to the School’s Strategic Plan (see Exhibit 1-A, 2011 Strategic Plan). Some planning and various assessment instruments are still in progress, with several outcomes pending. The

assessment plan will provide insight on what has been accomplished. Our School's Strategic Plan is a work in progress, sometimes requiring modifications as we proceed.

University of Southern California / School of Pharmacy

2. Strategic Plan

The college or school must develop, implement, and regularly revise a strategic plan to facilitate the advancement of its mission and goals. The strategic plan must be developed through an inclusive process that solicits input and review from faculty, students, staff, administrators, alumni, and other stakeholders as needed, have the support of the university administration, and be disseminated in summary form to key stakeholders.

2. College or School's Self-Assessment

The program is in the process of or has developed, implemented, and regularly revises a strategic plan to advance its mission and long-term goals.	Satisfactory
The strategic planning process is inclusive, soliciting input and review from faculty, students, staff, administrators, alumni, and other stakeholders as needed, has the support of the university administration, and is disseminated in summary form to key stakeholders.	Satisfactory
The strategic plan of the college or school is aligned with the university's strategic plan.	Satisfactory
Substantive changes are addressed through the strategic planning process, taking into consideration all resources (including financial, human, and physical) required to implement the change and the impact of the change on the existing program.	Satisfactory
Consultation with ACPE occurred at least six months before recruiting students into new pathways or programs.	N/A
The college or school monitors, evaluates and documents progress toward achievement of strategic goals, objectives, and the overall efficacy of the strategic plan.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions

- How the college or school's strategic plan was developed, including evidence of the involvement of various stakeholder groups, such as faculty, students, preceptors, alumni, etc.
- How the strategic plan facilitates the achievement of mission-based (long-term) goals
- How the college or school's strategic plan incorporates timelines for action, measures, responsible parties, identification of resources needed, and mechanisms for ongoing monitoring and reporting of progress
- How the college or school monitors, evaluates and documents progress in achieving the goals and objectives of the strategic plan
- 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?
- How the strategic plan is driving decision making in the college or school, including for substantive changes to the program
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

(School comments begin here)

1. How the college or school's strategic plan was developed, including evidence of the involvement of various stakeholder groups, such as faculty, students, preceptors, alumni, etc.

In early 2010, the School set out to revise the Strategic Plan. Full-time faculty member Dr. Glen Stimmel, chaired the committee to review the 2005 Strategic Plan (see Appendix 2.1.1), and create a new document to guide us toward achieving the goals and objectives envisioned for the next five to seven years. He recommended we contract with Morwin Inc., led by Morley Winograd and Alan Glassman, who specialize in such projects.

In March 2010, our consultants established two committees:

Leadership Strategic Planning Group (LSPG): Dr. Stimmel, the dean, the associate dean for Administrative Affairs and the department chairs had overall responsibility for managing the strategic-planning formulation and designing the high-involvement process.

Strategic Planning Steering Committee (SPSC): Composed of 18 members representing a cross-section of stakeholders, including faculty, staff, students, preceptors, donors and alumni, this committee met for two to four hours monthly.

The Alumni Board, Board of Councilors, QSAD Centurion and University administration were regularly updated on the plan's development. In June 2010, the consultants led a three-day planning retreat with more than 70 faculty, students, alumni and staff. In January 2011, the final Strategic Plan was approved by faculty.

In March 2011, seven implementation teams of faculty, staff, students and alumni were created to address 20 objectives. Areas of focus were organizational structure, curriculum, space, admissions, technology, interdisciplinary initiatives and revenue. Reports were created and distributed to all faculty, presented and discussed at Pharmacy Faculty Council meetings through the remainder of 2011, and then sent to the appropriate committees.

In June 2012, a three-day planning retreat completed implementation recommendations. Faculty, alumni and students were assigned to seven working groups to further discuss implementation of four key areas of the Strategic Plan (curriculum, admissions, technology and interdisciplinary initiatives) and three new areas (teaching methodology, professional skills in students and interprofessional education).

Uniquely, our strategic-planning process fully engaged key stakeholders in both the creation and implementation of the plan. Following approval of the plan, key stakeholders remained fully engaged for an additional 18 months, working in 10 implementation teams that concluded their reports in summer 2012. Thus, faculty-, staff-, alumni- and student-driven agendas existed for implementing the Strategic Plan, with those reports and recommendations referred to the appropriate standing committees (e.g., Curriculum, Admissions, Technology) and to the deans and chairs for action.

2. How the strategic plan facilitates the achievement of mission-based (long-term) goals:

The Strategic Plan emphasizes five major, mission-based goals: 1) Impacting the campus environment in order to foster a high-performance culture that reflects our values and facilitates innovation; 2) Enhancing the student experience to fully prepare the next generation of diverse academic and professional leaders; 3) Developing clusters of excellence that will promote synergistic collaborations that advance knowledge and successfully implement new concepts in research, practice and student learning; 4) Influencing future practice by advancing the value of the profession within the healthcare system; and 5) Developing sustainable revenue sources that will advance the School's strategic initiatives and support our mission. In fulfilling these goals, we can achieve the School's vision of revolutionizing healthcare through discoveries and innovations that improve people's lives. To reach the School's stated goals, the core values of integrity, commitment, creativity and collaboration will be embraced by all participants.

3. How the school's strategic plan incorporates timelines for action, measures, responsible parties, identification of resources needed, and mechanisms for ongoing monitoring and reporting of progress:

The School established a timeline for the Strategic Plan that commenced in July 2011 and extended to July 2015 (see Appendix 2.1.1), incorporating objectives to be accomplished, actions to be taken, measurements to be applied, responsible parties involved, resources required, and methodology for monitoring and measuring the progress of each.

4. How the school monitors, evaluates and documents progress in achieving the goals and objectives of the strategic plan:

Progress in achieving the goals and objectives of the Strategic Plan is continuously monitored, evaluated and documented, with a system in place to report on progress at regular intervals to various and appropriate committees, to the general faculty, and to outside stakeholders for their input and comments (see detailed description of the ongoing monitoring, evaluation and assessment process in Standard 3, focus question 2). The School's administration meets twice yearly to review progress and an Assessment Committee has established a plan to ensure ongoing monitoring and evaluation of progress across all programming. The final results and outcomes will be made available through various sources, including on the School's website and in publications.

5. How the support and cooperation of University administration for the school plan was sought and achieved, including evidence of support for resourcing the strategic plan:

The University's administration has been involved with the Strategic Plan from its earliest stages, attending meetings with the consultants in 2010 and being regularly updated by the School's leadership. The School's Strategic Plan has intentionally been aligned with the University's 2011 Strategic Vision. The primary support received from University administration has been in the provision of additional space for faculty offices and research laboratory accommodations (discussed in detail in Standard 27). Further major support from the University was provided in 2013 with the renovation and expansion of the School's two major classrooms, along with added technology to enhance student learning.

6. How the strategic plan is driving decision making in the school, including for substantive changes to the program:

The School's Strategic Plan is a living document with a central role in decision-making. It serves as the core document in directing curriculum changes and the admissions process. It also serves as

a source of the School's expectations as to the type of students we are graduating, and helps build bridges between our educational programming and graduating students' professional opportunities. The Strategic Plan plays a major role in guiding recruitment of the best new faculty, enhancing the development of collaborative clusters of excellence and advancing the profession's value within the healthcare system. The Strategic Plan has also guided investment in important new programs such as the Master of Healthcare Decision Analysis as a timely and state-of-the-art educational opportunity that also provides an important new revenue stream, and in the investment in the new closed-door, specialty pharmacy to take advantage of 340B drug pricing, in conjunction with both Keck Hospital of USC and the Norris Comprehensive Cancer Center, which promises to meet the needs of low-income patients while providing investment in future clinical pharmacy services.

7. How the school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard:

The guidelines have motivated the School's administration and faculty to continually examine the curriculum and work tirelessly to improve our educational offerings. To this end, the School has made a number of changes to undergraduate prerequisites. Further, over the last five years, we have implemented a series of changes to ensure first-year PharmD students understand the importance of essential pharmacy practice skills (such as communication, acting professionally, compounding, physical assessments, immunizations, CLIA-waived blood testing, patient counseling and collaborating with other healthcare providers). To build upon that knowledge, we offer an extensive, 11-module series of therapeutic courses in the second and third years of the curriculum.

8. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms:

Relative to national peers, our faculty and other stakeholders are satisfied with Strategic Plan progress.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. The School is on track to meet the goals and objectives in the Strategic Plan by 2015.

University of Southern California / School of Pharmacy

3. Evaluation of Achievement of Mission and Goals

The college or school must establish and implement an evaluation plan that assesses achievement of the mission and goals. The evaluation must measure the extent to which the desired outcomes of the professional degree program (including assessments of student learning and evaluation of the effectiveness of the curriculum) are being achieved. Likewise, the extent to which the desired outcomes of research and other scholarly activities, service, and pharmacy practice programs are being achieved must be measured. The program must use the analysis of process and outcome measures for continuous development and improvement of the professional degree program.

2. College or School's Self-Assessment

The evaluation plan describes a continuous and systematic process of evaluation covering all aspects of the college or school and the accreditation standards. The plan is evidence-based and embraces the principles and methodologies of continuous quality improvement.	Satisfactory
Individuals have been assigned specific responsibilities in the evaluation plan.	Satisfactory
The evaluation plan uses surveys of graduating students, faculty, preceptors, and alumni from the American Association of Colleges of Pharmacy (AACCP).	Satisfactory
The evaluation plan includes assessments to compare and establish comparability of alternative program pathways to degree completion, including geographically dispersed campuses and distance-learning activities.	N/A
The program assesses achievement of the mission and long-term goals.	Satisfactory
The analysis of process and outcome measures is used for continuous development and improvement of the professional degree program.	Satisfactory
The program measures the extent to which the desired outcomes of the professional degree program (including assessments of student learning and evaluation of the effectiveness of the curriculum) are being achieved.	Satisfactory
The program measures the extent to which the desired outcomes of research and other scholarly activities, service, and pharmacy practice programs are being achieved.	Satisfactory
The evaluation plan includes the college or school's periodic self-assessment using the accreditation standards and guidelines to assure ongoing compliance.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/>	How all components of the program's mission and goals are being followed and assessed
<input checked="" type="checkbox"/>	How the college or school periodically self-assesses its program using the accreditation standards and guidelines to assure ongoing compliance.
<input checked="" type="checkbox"/>	A description of the instruments used in assessment and evaluation of all components of the program's mission (e.g. in the areas of education, research and other scholarly activity, service, and pharmacy practice).
<input checked="" type="checkbox"/>	How assessments have resulted in improvements in all mission-related areas

- Innovations and best practices implemented by the college or school
- Description of the members of the Assessment Committee (or equivalent structure/accountable person), charges and major accomplishments in the last academic year
- How the college or school makes available to key stakeholders the major findings and actions resulting from its evaluation plan
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements

(School comments begin here)

1. How all components of the program's mission and goals are being followed and assessed:

The School's missions and goals have been formalized into a table that assesses achievements and accomplishments under the five identified goals, including 1) Campus Environment, 2) Student Experiences, 3) Clusters of Excellence, 4) Future Practice and 5) Sustainable Revenue Sources. Each section is followed by action items associated with those goals and progress to date. Standard 1 details specific goals approved by the faculty. Results and assessments have been reviewed by the Self-Study Committee and Assessment Committee. The committees' reviews were presented for comments and approval at the 2014 Faculty Retreat. School leadership (dean, executive vice dean, associate and assistant deans, department chairs) meets weekly to discuss issues and formulate planning strategies. Annual planning meetings are also held with School leadership and the provost to further evaluate progress toward the mission and goals and revising the roadmap as appropriate. The reviews and recommendations include data from AACP's standardized anonymous surveys of students, faculty, preceptors and alumni to provide national comparisons and additional assessment information. The reviews and recommendations also include formative and summative evaluations, a list of stakeholders involved in the evaluative process and evaluations of student achievement of desired competencies.

2. How the school periodically self-assesses its program using the accreditation standards and guidelines to assure ongoing compliance:

The School's administration conducts twice-yearly reviews of progress in meeting specific action items in the Strategic Plan, which has proven an effective way to continually move forward. Integrating varied evaluative processes has been pivotal in accomplishing the mission and goals. To date, the School has accomplished the majority of the goals established in the Strategic Plan. In addition, the Assessment Committee has developed an assessment plan for reviewing existing evaluations, monitoring changes and impact, and structuring evaluation plans to ensure maintenance of quality and meaningful progress in all programming (see Standards 1 and 2). The School's duty to prepare graduates to perform at the highest professional level requires a structured evaluation process. A biennial faculty retreat provides the venue for thoughtful assessment and adjustments. Monthly faculty meetings offer opportunities to address issues on a routine basis. The Curriculum Committee plays an essential role in monitoring all courses and making necessary recommendations to ensure that every course follows its syllabus and stated objectives, goals and approved subject matter. The Admissions Committee continually evaluates the undergraduate curriculum and prerequisites. While GPA in undergraduate studies is an important criterion, an applicant's interview, essay and understanding of the pharmacy profession are significant components of the Admissions Committee's deliberations. The Executive Board of the Pharmacy Faculty Council (PFC) meets regularly to review program elements and suggest changes for full-faculty

consideration. While the Executive Board is composed only of faculty members, it seeks input from other stakeholders. The dean routinely communicates with the PFC president and attends the majority of Executive Board meetings.

Student clinical performance is systematically evaluated by faculty and preceptors. Preceptors are required to complete mid-course and final evaluations of students, and are surveyed at the end of each school year for specific curricular and experiential input. Students complete mid-course reviews to evaluate preceptors and rate the value of experiential courses. Faculty and students then work together to formulate a plan to address concerns. The results are reviewed by the Curriculum Committee and the Inter-Module Coordinating Council, which make recommendations if necessary for curricular or individual course changes. Faculty input about the curriculum is also discussed at these meetings. Recommended changes are voted on by the Curriculum Committee, sent to the PFC Executive Board, and distributed to the PFC for discussion and vote. Major recommended curricular changes are considered at the biennial faculty retreat after discussion and input from students. Any approved change to the curriculum is implemented either within the academic year or at the start of the next academic year.

The performance of graduates is evaluated by employers, including School alumni. Feedback consistently demonstrates that USC graduates perform at the highest level in their professional activities. The knowledge base of USC's PharmD graduates is validated by a consistent pass rate of approximately 94% on the California board exam.

In 2013-14, the School underwent a self-study of research and graduate programs, as required by the provost every 10 years and monitored by the University Committee on Academic Review, resulting in a largely satisfactory evaluation with recommendations for increasing faculty hiring, increasing program interdisciplinarity and reevaluation of promotion criteria for clinical faculty.

3. A description of the instruments used in assessment and evaluation of all components of the program's mission (e.g. in the areas of education, research and other scholarly activity, service, and pharmacy practice):

Every five years, the dean is formally reviewed by the provost with formal input from faculty and staff. Faculty are evaluated by colleagues and students through course and instructor evaluations. Results are provided to the dean and department chair and used as a factor in determining the faculty member's rank and compensation. The School undergoes regular external evaluations necessary for accreditation and/or licensure of programs including hospitals, School-owned pharmacies, residency program, advancement and grants, vivaria and continuing professional development. These evaluations and reviews, like the self-study, provide the School with important assessments that are immediately considered by the involved unit and senior administration. These reviews also offer comparative data from peer institutions, used in charting the School's future direction. Included in evaluation of the educational component is analysis of student performance on didactic course exams; student performance in assigned APPEs; student performance in capstone courses; AACP graduating student evaluations; and graduating student results on the California board exam.

4. How assessments have resulted in improvements in all mission-related areas:

a) Insuring that PharmD graduates are prepared to perform at the highest level of professional competency. Recent assessments have led to important curricular changes, such as the School's successful implementation of a vertical curriculum that starts with the end product and works backward. The School has also launched capstone assessment exams, which measure a student's readiness to

move from year three to year four. These exams have proven essential to identifying and filling gaps in the curriculum. Another major curricular change is vertically integrated disease-therapy case building during the 11 therapeutics modules. For example, Therapeutics Module V, in the third year, requires students to gain knowledge in pharmacokinetics, electrolyte balance, psychiatric disorders, neurological disorders, pharmacogenomics and cardiovascular disease states. As students are presented with patients with multiple diseases and drug-therapy regimens, they are challenged to assess the patient's disease and medication use in a way that simulates real-world practice. A number of additional major changes to the curriculum are scheduled to be implemented in fall 2015. The assessment information gained through the curricular-mapping process ensures that appropriate subject matter is covered in each course, repetitive subject matter is eliminated, courses build upon each other, and students are challenged to use creative and critical thinking. Further, assessments are used to ensure that students are gaining profession-building experiences in their experiential training, patient and healthcare colleague interactions, understanding of the expanded scope of practice opportunities for pharmacists and understanding of how pharmacists can work in diverse settings throughout the healthcare system.

b) To continue to enhance the student recruitment, admission process, and retention of the best applicants. The School is currently revamping our admissions interview process in response to evaluations from interviewers, faculty and students, while monitoring best practices at other schools. The School has standardized the interview process to help interviewers follow a more concise, consistent script. After a comprehensive review of undergraduate course prerequisites compared to peer institutions, many previously required courses have been eliminated to allow for an equally qualified but more varied student body. To help each student be successful, the School works with individual students on issues that may impact retention, such as engaging students who are experiencing academic difficulties and arranging meetings with the instructor, department chair or associate dean for Student/Faculty Affairs to help identify issues and resources (such as tutoring through Rho Chi) to alleviate the problem.

c) To continue to lead in the development of the new roles for the pharmacist. The School continuously promotes expanding the pharmacist's role in clinical settings and prepares graduates accordingly. The School continues to spearhead sustainable practice models in safety-net clinics throughout Southern California and as a national model, which has been endorsed and furthered by a \$12 million grant from the Center for Medicare & Medicaid Innovation. Since such safety-net clinics allow for clinical pharmacy practice at its highest level and provide unique training sites for students and residents, the School has dedicated resources to extend the practice to additional clinics in the community. Further, the School has hosted two national conferences (2012, 2014) on integrating clinical pharmacy services into safety-net clinics in an effort to expand this practice nationwide, and served as co-sponsor with APhA, CPhA and the National Alliance of State Pharmacy Associations at a 2013 conference on provider status.

The School has implemented a number of clinical expansions as part of past and present Strategic Plans, including a travel clinic, pain-management clinic, medication-therapy management call center, hospital-based pharmacy transplant service, student-initiated clinical pharmacy programs targeted to local indigent patients (SClinic, a patient-centered medical home in conjunction with Los Angeles County and the Orange County asthma program), outpatient investigational drug service supporting clinical trials at the University and services provided through our three ambulatory pharmacies. The School has also instituted entrepreneurial and industry tracks into the curriculum as well as several dual-degree programs, preparing students for the many roles of today's PharmD graduates. Each addition resulted

from the School's continual review process and the implementation of quality improvements to support the School's mission and goals.

5. Innovations and best practices implemented by the college or school:

As stated above, innovations and best practices have been implemented through the efforts of administrators and faculty to enhance the opportunities of our graduates. These include student involvement in specialty clinics, safety-net clinics, accountable care organizations, managed-care organizations, the pharmaceutical industry and community pharmacies.

6. Description of the members of the Assessment Committee (or equivalent structure/ accountable person), charges and major accomplishments in the last academic year:

The Assessment Committee, comprised of basic science faculty, clinical faculty, staff members and outside advisers, advises the direction and activities of the assistant dean for Curriculum and Assessment who is responsible for securing the necessary data for committee evaluation and subsequent recommendation. The School's administration and faculty believe that assessment planning and implementation are essential to all programs, particularly in ensuring that our PharmD graduates are fully prepared to enter contemporary pharmacy practice and optimally serve patients. As part of our assessment planning, the School continually evaluates all programs, with a focus on curriculum, pharmacy practice experiences, student development, admissions processes, research and scholarly pursuits, faculty growth and development, physical facilities and resources, graduate programs and continuing education. The recently developed curricular map of the first three years of the PharmD program has enabled us to better assess connectivity throughout the curriculum.

7. How the college or school makes available to key stakeholders the major findings and actions resulting from its evaluation plan:

Stakeholders learn of major findings and actions of evaluation planning through the School's website, and, when appropriate, in our quarterly e-bulletin (e-Results) and biannual magazine (*Rxresults*). In addition, information regarding these findings and actions is systematically communicated to the School's Board of Councilors and alumni organizations.

8. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard:

The Strategic Plan is the School's blueprint for achieving our mission, goals and objectives through a defined path with regular assessments. The values of the plan are foundational to all faculty, staff and students.

9. Any other notable achievements, innovations or quality improvements:

The School's faculty, administration, staff and other stakeholders are working to create innovative roles for graduates that definitively establish the pharmacist as a pivotal member of the 21st century healthcare team. These new roles will take our graduates to careers in clinics, accountable care organizations, hospitals, expanded community pharmacy practices, industry and academia. The School is committed to ensuring our graduates are prepared to take on these challenges and to preparing graduates who have the foundational knowledge, essential practice and care tools, and interpersonal skills to positively impact patient health.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant. We will continue to carefully evaluate our diverse educational programs, research and other scholarly activities, professional and community service, inter-professional education and pharmacy practice programs. The School is more closely monitoring data from the standard AACCP surveys (student, faculty, preceptor and alumni) to address areas of lower comparative scores and is developing strategies to better address these issues. Our multiple dual/joint degree and certificate programs and offers one of the richest set of experiential opportunities nationally. Alumni are permanent members of the Curriculum Committee, participate in our admissions process and have multiple venues to influence our educational programs. The low number of alumni and preceptor responses is something we are working to address. With more than 200 active preceptors, remaining in close contact with each presents a significant challenge.

University of Southern California / School of Pharmacy

4. Institutional Accreditation

The institution housing the college or school, or the independent college or school, must have or, in the case of new programs, achieve full accreditation by a regional/institutional accreditation agency recognized by the U.S. Department of Education.

2. College or School's Self-Assessment

The institution housing the program, or the independent college or school, has full accreditation by a regional/institutional accreditation agency recognized by the U.S. Department of Education or it is in the process of seeking accreditation within the prescribed timeframe.	Satisfactory
The college or school reports to ACPE, as soon as possible, any issue identified in regional/institutional accreditation actions that may have a negative impact on the quality of the professional degree program and compliance with ACPE standards.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions

- Any deficiencies from institutional accreditation that impact or potentially impact the college, schools or program (if applicable)
- Measures taken or proposed by the college or school to address any issues arising from institutional accreditation (if applicable)
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

(School comments begin here)

1. Any deficiencies from institutional accreditation that impact or potentially impact the college, schools or program (if applicable).

No deficiencies have been noted.

2. Measures taken or proposed by the college or school to address any issues arising from institutional accreditation (if applicable).

N/A

3. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The University of Southern California is fully accredited by the Western Association of Schools & Colleges, and its next capacity/preparatory review is scheduled for fall 2020 and the next educational effectiveness review is set for spring 2022. The School of Pharmacy's last self-study review resulted in a full reaccreditation through 2015 by the ACPE, with a requested interim report submitted in 2013.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. USC and the School of Pharmacy have no accreditation issues.

University of Southern California / School of Pharmacy

5. College or School and University Relationship

The college or school must be an autonomous unit within the university structure and must be led by a dean. To maintain and advance the professional degree program, the university president (or other university officials charged with final responsibility for the college or school) and the dean must collaborate to secure adequate financial, physical (teaching and research), faculty, staff, student, practice site, preceptor, library, technology, and administrative resources to meet all of the ACPE accreditation standards.

2. College or School's Self-Assessment

The university president (or other university officials charged with final responsibility for the college or school) and the dean collaborate to secure adequate financial, physical (teaching and research), faculty, staff, student, practice site, preceptor, library, technology, and administrative resources to meet all of the ACPE accreditation standards.	Satisfactory
The college or school participates in the governance of the university, in accordance with its policies and procedures.	Satisfactory
The college or school has autonomy, within university policies and procedures and state and federal regulations, in all the following areas: <ul style="list-style-type: none"> • programmatic evaluation • definition and delivery of the curriculum • development of bylaws, policies, and procedures • student enrollment, admission and progression policies • faculty and staff recruitment, development, evaluation, remuneration, and retention 	Satisfactory
The college or school's reporting relationship(s) is depicted in the university's organizational chart.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/>	How the college or school participates in the governance of the university (if applicable)
<input checked="" type="checkbox"/>	How the autonomy of the college or school is assured and maintained
<input checked="" type="checkbox"/>	How the college or school collaborates with university officials to secure adequate resources to effectively deliver the program and comply with all accreditation standards
<input checked="" type="checkbox"/>	How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/>	Any other notable achievements, innovations or quality improvements

(School comments begin here)

1. How the college or school participates in the governance of the university (if applicable).

A private institution, USC is governed by a Board of Trustees of 55 voting members. The University president, appointed by the Board of Trustees, serves as CEO in charge of all operations. The University is divided into 18 academic units, each led by an academic dean appointed by the president with input from the provost. Deans are appointed for set terms, normally five years, and may be reappointed following review and evaluation, including faculty and staff input. All academic deans report to the provost.

The *Faculty Handbook* is the governing document that establishes the contractual relationship between faculty and the University (see **Appendix 7.7.1**). The Academic Senate, which represents the entire USC faculty, has significant input into the president's and provost's planning for the University, and is organized as one central body with faculty councils in each academic unit. The School of Pharmacy has one voting faculty member. Over the years, our faculty have held key leadership positions, including president (twice), Executive Board member and chair of a number of committees. The Senate addresses a wide range of issues, including advancing faculty rights, interests and responsibilities, and seeking to preserve and enrich USC as a thriving academic institution.

2. How the autonomy of the college or school is assured and maintained.

Academic deans at USC have significant autonomy in managing each school's fiscal and physical resources. Schools set their own missions and goals and develop and implement their academic programs and curricula, working in conjunction with standing and ad hoc faculty committees, in addition to appropriate University-wide committees.

The University expects the School of Pharmacy to comply with standards set forth by the Accreditation Council for Pharmacy Education (ACPE) and the laws and standards enumerated in state and federal codes, and expects the School to advance as a leader in pharmacy education and maintain a distinguished reputation throughout the world.

The School retains autonomy in the following:

Programmatic Evaluation: The Curriculum Committee, Pharmacy Faculty Council (PFC) and its Executive Board, Inter-Module Coordinating Council (IMCC), individual course coordinators and pharmacy students (through committee membership or course evaluations), ensure that the curriculum meets the standards enumerated in ACPE's guidelines; AACP CAPE guidelines; University standards as they pertain to course content, student grading and evaluation, and relevancy to the professional practice of pharmacy; and federal and California laws where emphasis is placed upon statutory or regulatory requirements involving student training.

Definition and Delivery of the Curriculum: As noted above, the Curriculum Committee, through input from faculty, the IMCC and other committees, has primary responsibility for ensuring that all courses are continuously evaluated and are vertically and horizontally integrated, as assessed by a sophisticated curricular-mapping technique, to ensure that all graduates are well trained to fulfill their responsibilities as pharmacy professionals.

Bylaws, Policies and Procedures: The School is governed by a set of bylaws created in 1996 and amended as required (see **Appendix 7.6.1**) that are consistent with University bylaws, policies and procedures, and *Faculty Handbook* standards. The School's policies and procedures governing admissions, student retention and progression, grading and evaluation standards, essential student characteristics and abilities, student disabilities procedures, examination standards,

student honor system expectations, disciplinary actions for breaching honor system standards, and student dispute resolution and/or grievance procedures are outlined in the School's *Pharmacy Student Bulletin of Academic Policies & Procedures* (see **Appendix 19.3.1** and **onsite Exhibit**).

Student Admission and Progression Policies: Student admissions and progression policies are outlined in the *Pharmacy Student Bulletin of Academic Policies & Procedures* (see **Appendix 19.3.1** and **onsite Exhibit**). Required applications for each student candidate are shown in **Appendix 21.5.2** and on the [PharmCAS link](#).

Faculty and Staff Recruitment, Development, Evaluation and Retention: Faculty are evaluated on an annual basis by peer-review panels that have established criteria for teaching, research and service profiles agreed upon annually by department chairs and faculty. Evaluation rankings determine annual merit wage increases, typically 0-5% of base salary for the previous year. Staff members are evaluated by section directors using a standard evaluation form (see **Appendix 7.8.2**); evaluations are ranked to determine annual merit wage increases.

3. How the college or school collaborates with university officials to secure adequate resources to effectively deliver the program and comply with all accreditation standards.

The academic and budget-planning process, which begins in the fall, requires each dean to submit to the Office of the Provost an academic progress report, including a set of metrics of excellence, an updated strategic plan, a budget proposal for the upcoming fiscal year and a three-year budget forecast. Several meetings are held until final approval of the proposed budget is granted in spring. These meetings are attended by the dean, executive vice dean, associate dean for Administrative Affairs, executive vice provost, senior vice president from the Office of Budget and Planning (OBP) and OBP staff. An additional meeting to review advancement plans for the School is held with the executive vice provost, senior vice president for University Advancement, the dean, executive vice dean and the School's executive director for Advancement.

4. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

In monthly meetings with the Provost Council, key academic and administrative issues are discussed and reviewed prior to implementation. The provost selects several academic deans to join two committees: 1) the Provost Council Executive Committee, which provides advice and counsel to the provost regarding academic issues, initiatives and strategies, and 2) the Budget Steering Group, which advises the provost on fiscal matters. Over the years, the dean of the School of Pharmacy has participated in both advisory groups. The Provost Research Council, composed of deans of the major research units, including the School of Pharmacy, meets with the provost monthly. The dean also sits on the University's Strategic Planning Committee and the Vision and Voices steering committee.

5. Any other notable achievements, innovations or quality improvements.

For more than 100 years, the School has been an innovative leader in pharmacy education, research and practice. USC's administration has strongly supported and expected the School to maintain this status. We established the nation's first Doctor of Pharmacy degree in 1950, and the first clinical pharmacy curriculum in 1968. In 1970, USC became the first pharmacy school to offer clinical clerkships. Among other innovations, we launched the first PharmD/MBA program in 1988, the first PhD in pharmaceutical economics in 1990 and the first professional doctorate in regulatory science in 2008. At

the time they were implemented, many of these heralded radical advances. Some, such as the PharmD and clinical clerkship programs, are now considered foundational training for pharmacists throughout the U.S. Our partnership to create the USC Schaeffer Center is a model of intra-university collaboration, leading to a top-five health policy group and the opportunity for faculty to work on major grants and help shape national health policy.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring.

University of Southern California / School of Pharmacy

6. College or School and Other Administrative Relationships

The college or school, with the full support of the university, must develop suitable academic, research, and other scholarly activity; practice and service relationships; collaborations; and partnerships, within and outside the university, to support and advance its mission and goals.

2. College or School's Self-Assessment

The college or school, with the full support of the university, develops suitable academic, research, and other scholarly activity; practice and service relationships; collaborations; and partnerships, within and outside the university, to support and advance its mission and goals.	Satisfactory
Formal signed agreements that codify the nature and intent of the relationship, the legal liability of the parties, and applicable financial arrangements are in place for collaborations and partnerships.	Satisfactory
The relationships, collaborations, and partnerships advance the desired outcomes of the professional degree program, research and other scholarly activities, service and pharmacy practice programs.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> The number and nature of affiliations external to the college or school
<input checked="" type="checkbox"/> Details of academic research activity, partnerships and collaborations outside the college or school
<input checked="" type="checkbox"/> Details of alliances that promote and facilitate interprofessional or collaborative education
<input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements

(School comments begin here)

1. The number and nature of affiliations external to the college or school.

The School collaborates throughout USC and consistently expands external affiliations with pharmacy-related practice settings, helping grow our commitment to the best experiential instruction, research and patient care (see **Appendices 6.2.1, 6.2.2 and 6.2.3**). Robust state-of-the-art collaborations have allowed the School to competitively pursue funding for basic, translational, policy and clinical research. Our vibrant global outreach program directed by the associate dean for Global Initiatives and Technology has led to academic and scientific exchanges around the world for more than 25 years.

The dean and the entire senior administrative team work closely with the University's central administration through scheduled and informal meetings. Faculty are members/leaders on many University-wide committees, such as the Faculty Senate, Council of Deans, Benefits, Vivaria, Strategic Planning and Curriculum. At the provost's requests, the dean serves on an ad-hoc committee to review and recommend changes to the dental school's curriculum, organizational structure, research and

operations. He co-chaired the successful dean search committees for the Ostrow School of Dentistry and the Davis School of Gerontology.

A collaboration with the USC Price School produced the Schaeffer Center for Health Policy and Economics, one of the nation's top such programs. Our research faculty collaborate with USC faculty in medicine, engineering, arts and sciences as well as with faculty at universities around the globe.

The Los Angeles County+USC Medical Center, one of the nation's largest and busiest hospitals, provides a major clinical practice site. We also work closely with Keck Hospital of USC and the USC Norris Cancer Hospital. The School has major contractual relationships with two other teaching hospitals for experiential programming: Cedars-Sinai and the Veterans Administration. We maintain relationships with independent pharmacies, some 80 smaller hospitals and clinic sites, and 200 community pharmacy sites for IPPEs and APPEs, and provide students with several pharmaceutical company site rotations (see **Appendices 6.1.1, 6.2.1 and 28.1.1**).

2. Details of academic research activity, partnerships and collaborations outside the college or school.

In collaboration with other USC units and other programs within the School of Pharmacy, we have developed:

Joint- and dual-degree programs: PharmD/MBA, PharmD/JD, PharmD/MPH, PharmD/MS and Professional Doctorate in Regulatory Sciences, PharmD/PhD, PharmD/MS in Healthcare Decision Analysis, PharmD/MS in Gerontology, PharmD/MS in Global Medicine

Certificate programs: PharmD/Certificate in Gerontology, Regulatory Science Certificate.

Joint research/education programs, including plans for undergraduate minors related to pharmacy: medicine, gerontology, economics, chemistry, engineering, business, arts and sciences, public policy, cinema, social work.

The Schaeffer Center unites health policy experts, a seasoned pharmacoeconomics team, and other affiliated scholars from across USC and other universities to measurably improve value in health through evidence-based policy solutions, research excellence, transformative education, and private- and public-sector engagement. In other areas of research, the School's partnerships across USC and the world are numerous and diverse.

The School's associate dean for Student/Faculty Affairs and a research faculty member attend monthly meetings of the LAC+USC Medical Center's Medical Executive Board and work closely with its director of Pharmacy Services to ensure quality clinical pharmacy training experiences. The Department of Clinical Pharmacy and Pharmaceutical Economics & Policy chair meets routinely with the hospital's director of Pharmacy.

Dr. Scott Evans, associate dean for Academic Medical Center Programs and CEO of the Keck Hospital and USC Norris Cancer Hospital, and Dr. Krist Azizian, our assistant dean for Academic Medical Center Programs and strategic director of Pharmacy for both hospitals, works with the School's clinical faculty on hospital staff to ensure that pharmacy practices contribute appropriately to improving patient care while providing the highest-quality learning experiences for students. Along with the clinical department chair, they regularly review all learning experiences to ensure consistency with the objectives of course syllabi.

As noted above, we partner with numerous sites that provide training and pharmacy care-related services, while several (LAC+USC, Regional Medical Clinics of Los Angeles County, AltaMed clinics and certain community practice sites) offer students opportunities for advanced scholarly pursuits with patients with diabetes, asthma, anticoagulation, hypertension, hyperlipidemia, and autoimmune and infectious diseases, along with providing physical assessments, immunizations, hypertension/hyperlipidemia/hemoglobin A1C screening, and special monitoring of indigent patients.

Numerous research faculty at the School work with USC (medicine, engineering, arts and sciences), national and international collaborators. Many faculty from other USC schools maintain joint appointments in our School and vice-versa, reflecting these collaborations and shared education and training of PhD students — most of whom engage in collaborative science. Achievements include recognized programs in chemical biology and medicinal chemistry, aging and neurogeneration, autoimmunity and inflammation, drug delivery, cancer biology, and diabetes and metabolic disorders. Our School houses several core facilities utilized by researchers across the University. Funding for these areas has been stable despite major downturns in federal research support.

3. Details of alliances that promote and facilitate interprofessional or collaborative education.

Student rotations provide opportunities to learn clinical skills and integrate a pharmacy's full scope of services. Pharmacist preceptors and mentors provide training that allows students to perform various pharmacy-related patient care services. Each site offering an IPPE, APPE or elective is provided guidance through either a carefully developed, site-specific syllabus or specific learning objectives. Full-time and adjunct faculty work with the administration of the learning site and the School's clinical department to ensure students meet defined learning objectives.

Full-time clinical faculty collaborate with physicians and other health professionals at the medical school and clinic locations to enhance our interdisciplinary approach to improving care. In many of these settings, physicians are accustomed to working with the pharmacist as the medication expert on the team and rely upon their expertise.

The School of Pharmacy, the Keck School of Medicine and dentistry, physical therapy, occupational therapy and physician assistant programs have set up interprofessional educational programs that include case conferences to foster a team approach to care.

4. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

All clinical-training is coordinated through the School's Department of Clinical Pharmacy and Pharmaceutical Economics & Policy. Assessment is conducted by the assistant dean for Assessment and Curriculum, Dr. Kathy Besinque, working with the Curriculum Committee. Dr. William Gong coordinates the pharmacy residency and fellowship programs. All clinical rotations are assessed by students, and all students are assessed by preceptors according to a standardized, competency-based learning grid. Prior to beginning a clinical experience, each student is oriented to basic ethical standards and laws.

5. Any other notable achievements, innovations or quality improvements.

The School has been recognized with every major pharmacy award and by the U.S. Congress and state legislature for community outreach and impact on patient outcomes in safety-net clinics. Through physician/pharmacist collaborative practice agreements, pharmacy staff at the clinics modify drug

therapy as needed to help patients achieve treatment goals. Our program has resulted in improved patient outcomes and substantial cost savings by reducing ER visits and hospitalizations. All the safety-net clinics (with the exception of one we had to pull out of) retained the collaborative practice model after the initial external funding expired through reallocation of internal resources.

Faculty members Dr. Geoffrey Joyce and Dr. Steven Chen received a \$12 million CMMI grant to improve patient outcomes, reduce overall costs, and increase patient and physician satisfaction in safety-net clinics. The grant was identified for President Obama as one of the three most innovative grants funded by CMMI, and the School was encouraged by CMMI to stage a national conference to spread this practice model, successfully held in spring 2014. Another major grant, at \$11 million, was awarded by the NIH to Dr. Jason Doctor to address the overprescribing of antibiotics.

The dean was closely involved in drafting California SB 493 that establishes pharmacists as providers. He testified before legislative committees, met with journalists, and published opinion pieces in *The Wall Street Journal* and on Politico. The School also initiated and co-sponsored a national conference on provider status in conjunction with the APhA meeting in Los Angeles in December 2013.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring.

University of Southern California / School of Pharmacy

7. College or School Organization and Governance

The college or school must be organized and staffed to facilitate the accomplishment of its mission and goals. The college or school administration must have defined lines of authority and responsibility, foster organizational unit development and collegiality, and allocate resources appropriately. The college or school must have published, updated governance documents, such as bylaws and policies and procedures, which have been generated by faculty consensus under the leadership of the dean in accordance with university regulations.

2. College or School's Self-Assessment

The college or school is organized and staffed to facilitate the accomplishment of its mission and goals.	Satisfactory
The college or school administrative leaders working with the dean have credentials and experience that prepare them for their respective roles.	Satisfactory
The college or school administration has defined lines of authority and responsibility, fosters organizational unit development and collegiality, and allocates resources appropriately.	Satisfactory
The college or school has established mechanisms to foster unity of purpose, effective communication, and collaboration among administrators.	Satisfactory
The college or school's administrative leaders - individually or collectively - are developing and evaluating interprofessional education and practice opportunities	Needs Improvement
The college or school has published, updated governance documents, such as bylaws and policies and procedures, which have been generated by faculty consensus under the leadership of the dean in accordance with university regulations.	Satisfactory
If the college or school organizes its faculty into subunits, such as departments or divisions, subunit goals and objectives align with the mission and goals of the college or school.	Satisfactory
The effectiveness of each organizational unit is evaluated on the basis of its goals and objectives and its contribution to the professional program.	Satisfactory
Programs are in place to hone leadership and management skills of college or school administrators, including department/division chairs (if applicable).	Satisfactory
Faculty meetings and committees established to address key components of the mission and goals are part of the system of governance of the college or school.	Satisfactory
Where appropriate, faculty committees include staff, students, preceptors, alumni, and pharmacy practitioners.	Satisfactory
Minutes of faculty meetings and committee actions are maintained and communicated to appropriate parties.	Satisfactory
The college or school has policies and procedures that address potential systems failures, whether such failures are technical, administrative, or curricular.	Needs Improvement
Contingency planning includes creating secure backups of critical applications and systems data, providing mechanisms for making up lost course work and academic	Satisfactory

credit, securing alternate means for communication and information delivery, and creating exit strategies to protect students if part or all of a program loses viability.	
The college or school maintains an effective system of communication with internal and external stakeholders.	Satisfactory
Alternate program pathways are integrated into the college or school's regular administrative structures, policies, and procedures (including planning, oversight, and evaluation), and are supervised by an administrator who is part of the college or school.	N/A
The college or school ensures that workflow and communication among administration, faculty, staff, preceptors, and students engaged in distance-learning activities are maintained.	N/A
The college or school retains ultimate responsibility for the academic quality and integrity of distance-learning activities and the achievement of expected and unexpected outcomes, regardless of any contractual arrangements, partnerships, or consortia for educational or technical services.	N/A

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> A description of the college or school's organization and administration and the process for ongoing evaluation of the effectiveness of each operational unit
<input checked="" type="checkbox"/> A self-assessment of how well the organizational structure and systems of communication and collaboration are serving the program and supporting the achievement of the mission and goals
<input checked="" type="checkbox"/> How college or school bylaws, policies and procedures are developed and modified
<input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/> How the college or school's administrative leaders are developing and evaluating interprofessional education and practice opportunities
<input checked="" type="checkbox"/> How the credentials and experience of college or school administrative leaders working with the dean have prepared them for their respective roles.
<input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements
<input checked="" type="checkbox"/> Interpretation of the data from the applicable AACCP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. A description of the college or school's organization and administration and the process for ongoing evaluation of the effectiveness of each operational unit.

Our administration includes the dean, executive vice dean, vice dean, five associate deans, three assistant deans and two department chairs (see **Appendices 7.2.1 and 7.1.1**) who meet weekly to resolve issues or refer them to committees for review and resolution. The dean is reviewed annually by the provost and the executive vice dean is reviewed annually by the dean. Plans are in process for regular faculty input for each administrator on a three- to five-year cycle.

Also contributing to the School's leadership are directors of Continuing Professional Development, Credentialing & Distance Education; Diversity; Residency/Fellowship Programs; Admissions/Student Affairs; Communications; International Center for Regulatory Sciences; and Advancement.

The Pharmacy Faculty Council (PFC) is our formal faculty governance body, with members selected annually to serve as officers. The five-member PFC Executive Board reviews agendas for monthly meetings and routinely meets with the dean and executive vice dean. Policymaking and recommendations to the PFC originate with standing committees: Admissions, Scholarship Standards, Curriculum, Faculty Appeals, Graduate Affairs and Advanced Technology.

2. A self-assessment of how well the organizational structure and systems of communication and collaboration are serving the program and supporting the achievement of the mission and goals.

The deans and chairs meet weekly on issues of concern across the School and to coordinate programmatic efforts. Each department meets monthly. The dean and executive vice dean meet monthly with the PFC Executive Board. The associate dean for Student/Faculty Affairs and the assistant dean for Curriculum and Assessment meet routinely with student leadership. The faculty survey revealed concerns about the administrative team's unity and responsiveness to faculty concerns, perhaps due to the second reorganization and delay in replacing the department chairs after Dr. Johnson's death in 2011. As both chairs were filled in 2014, we anticipate improved faculty satisfaction. The way we handled matriculating P1 students this year, including deferring class elections so they could focus first on coursework, may have omitted some necessary connections with the administration. We are reevaluating this, including adding a weekly lunch with an administrator, to better communicate with first-year students.

The School spent a year and a half developing a Strategic Plan (see Standard 2).

3. How college or school bylaws, policies and procedures are developed and modified.

Faculty are governed by the University Faculty Handbook (see **Appendix 7.7.1**) and the School's bylaws (see **Appendix 7.6.1**) and policies of our departments. Modifications come to the PFC for consideration and faculty vote.

4. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The School is developing new collaborative models for improved administrative effectiveness and faculty engagement. For example, our curricular mapping process is helping identify redundancies and orchestrating how and when we impart the skills, knowledge and experiences our students need (see Standards 9 & 10 and **Appendices 10.2.1, 10.3.1, 11.4.2, 11.4.3, 12.1.1, 12.2.1, 13.1.1, 13.2.1, 14.2.1**). Our Assessment Committee advises the assistant dean of Assessment and Curriculum regarding areas for monitoring and improving.

Faculty responses indicated dissatisfaction with the effectiveness of faculty meetings. Attendance at departmental meetings is robust, so we interpret this to mean the PFC, with sporadic attendance. Plans are underway to energize this assembly, e.g., changing the time/format, using it for presentations on research and teaching effectiveness.

Faculty mentoring, development and evaluation, an area of some concern for faculty, is primarily coordinated by the department chairs and, in research mentoring, the vice dean for Research and Graduate Affairs (see Standards 24 and 26).

Faculty, students and alumni attend an annual three-day retreat to discuss and vote on curricular modifications that have been reviewed by the Curriculum Committee, the Inter-Module Coordinating Council and the administration based on revised practice standards, ACPE reports, CAPE standards, expanding roles of pharmacists and suggestions from employers of our graduates. Major changes to the curriculum are presented, debated and voted on at the retreat.

The dean works closely with the leadership team to establish the budget, which is submitted to the USC administration for review by March (the fiscal year commences July 1).

The vice dean for Research and the department chairs are responsible for ensuring all faculty engage in scholarly activities that add to knowledge, advance pharmacy practice and improve patient health. Each year they meet with faculty to agree on the percentage effort to be dedicated to research and scholarly pursuits. Each faculty member is peer-evaluated annually to determine whether or not they have attained the percentage. Each faculty member's peer review and profile are the basis for financial merit raises and promotion consideration.

5. How the college or school's administrative leaders are developing and evaluating interprofessional education and practice opportunities.

Discussions are ongoing with colleagues at the medical, dental, gerontology and social work schools, as well as the physical therapy and occupational therapy programs, to implement and expand interprofessional educational experiences and programs. From the first year of the curriculum, students engage with other schools at community-based health fairs, where they provide screenings for blood pressure, cholesterol, blood sugar, bone density, and medication management and compliance.

In the second and third years, joint small-group pharmacy and medical student conferences consider various patient-case scenarios, where both proper diagnosis and drug therapy are evaluated. In the fourth-year APPE rotations, pharmacy students make rounds and participate in conferences with medical students, physicians and other members of the healthcare team. Pharmacy faculty participate in these sessions to mentor students and assure quality. These interactive student experiences are evaluated by faculty through written tests, case study discussions and other verbal questioning.

6. How the credentials and experience of college or school administrative leaders working with the dean have prepared them for their respective roles.

Dean R. Pete Vanderveen has a BS (pharmacy), MS (clinical pharmacy) and PhD (university administration), and completed an ASHP-accredited residency; previously served as dean of the Mylan School of Pharmacy, Duquesne University.

Executive Vice Dean Sarah Hamm-Alvarez holds a PhD (biochemistry), postdoctoral fellowship (cell biology), previously served as the School's associate dean of research and department chair.

Dr. Kathy Besinque, assistant dean for Curriculum and Assessment, holds a PharmD and MEd and completed a residency in ambulatory care.

Dr. Fred Weissman, associate dean for Student/Faculty Affairs, holds a PharmD and JD.

Dr. Ron Alkana (recently deceased), associate dean for Graduate Affairs, had a PharmD and PhD (psychobiology).

Azar Shahabi, associate dean for Administrative Affairs, has an MBA and a strong background in budgeting.

7. Any other notable achievements, innovations or quality improvements.

For more than 110 years, the School has experienced active, progressive growth to prepare students for pharmacy practice and beyond. Over the last 50 years, the PharmD program has been the School's main focus. The School has outstanding full-time and part-time faculty to ensure a top-rate educational experience is in place for every student. School policy ensures that any student who experiences academic difficulty are extended help and opportunities to master the coursework (see Exhibit onsite).

8. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

Based on national comparisons, we recognize a clear need to improve administration-faculty interactions relative to defining administrative roles, faculty problems/needs, productive faculty meetings, faculty recruitment and tenure/promotion policies. Tenure/promotion has emerged as a major concern primarily for clinical faculty due to the lack of a clear path for advancement from associate to full professor. The School is working to address this issue.

The School's administrative structure has been adjusted several times over the past few years. The sudden loss of two longstanding school leaders and the realignment of the dean's time as head of the School's \$100 million campaign required these changes. The new executive vice dean position has been effective in providing a leader who is more available day to day while the dean focuses on fundraising and statewide/national activities to advance the profession. Recently, both departments have new chairs after being led by interim chairs for more than a year. New administrative roles have been added to ensure leadership throughout the School. The School recognizes a need to better communicate the new structure and roles to the faculty and to create a more cohesive administrative team, and is taking action, as noted above.

4. College or School's Final Self-Evaluation

<input type="checkbox"/> Compliant	<input checked="" type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant with monitoring. As noted above, we are putting plans in place to develop/evaluate our interprofessional education and practice opportunities and developing policies and procedures to address various systems failures.

University of Southern California / School of Pharmacy

8. Qualifications and Responsibilities of the Dean

The dean must be qualified to provide leadership in pharmacy professional education and practice, including research, scholarly activities, and service. The dean must be the chief administrative and academic officer and have direct access to the university president or other university officials delegated with final responsibility for the college or school. The dean must unite and inspire administrators, faculty, staff, preceptors, and students toward achievement of the mission and goals. The dean is responsible for ensuring that all accreditation requirements of the ACPE are met, including the timely submission of all reports and notices of planning for substantive changes.

2. College or School's Self-Assessment

The dean is qualified to provide leadership in pharmacy professional education and practice, including research, scholarly activities, and service.	Satisfactory
The dean is the chief administrative and academic officer and has direct access to the university president or other university officials delegated with final responsibility for the college or school.	Satisfactory
The dean unites and inspires administrators, faculty, staff, preceptors, and students to achieve the mission and goals.	Satisfactory
The dean is responsible for ensuring that all accreditation requirements of the ACPE are met, including the timely submission of all reports and plans for substantive changes.	Satisfactory
The dean has the assistance and full support of the administrative leaders of the college or school's organizational units and adequate staff support. In instances where the dean is assigned other substantial administrative responsibilities within the university, arrangements for additional administrative support to the office of the dean are made to ensure effective administration of the affairs of the college or school.	Satisfactory
The dean is responsible for compliance with ACPE's accreditation standards, policies, and procedures. In the event that remedial action is required to bring the college or school into compliance, the dean takes the necessary steps to ensure compliance in a timely and efficient manner.	Satisfactory
The qualifications and characteristics of the dean relate well to those called for in the standards, i.e.: <ul style="list-style-type: none"> • a degree in pharmacy or a strong understanding of contemporary pharmacy and health care systems • a scholarly concern for the profession, generally, and for the diverse aspects of pharmacy science and practice, in particular • publications in pharmacy and biomedical literature in areas relevant to the mission and goals of the college or school • appropriate leadership and managerial skills and experience in the academic (preferred) or health care sectors • recognition for career accomplishments by pharmacy or other health profession educators, researchers, and practitioners • strong written and interpersonal communication skills 	Satisfactory

<ul style="list-style-type: none"> • experience with and a commitment to systematic planning, assessment, and continuous programmatic improvement • a thorough understanding of and a commitment to teaching and student learning, including pedagogy • evidence of a commitment to the advancement of research and scholarship • the ability and willingness to provide assertive advocacy on behalf of the college or school to the university administration • the ability and willingness to provide assertive advocacy on behalf of the college or school and the profession of pharmacy in community, state, and national health care initiatives • a record of and willingness to continue active participation in the affairs of pharmacy's professional and scientific societies 	
<p>The dean has the authority and accepts ultimate responsibility for ensuring:</p> <ul style="list-style-type: none"> • development, articulation, and implementation of the mission and goals • acceptance of the mission and goals by the stakeholders • development, implementation, evaluation, and enhancement of the educational, research, service, and pharmacy practice programs • collaborative efforts to develop, implement, evaluate, and enhance interprofessional education, practice, service, and research programs • development and progress of the strategic plan and the evaluation plan, including assessment of outcomes • recruitment, development, remuneration, and retention of competent faculty and staff • initiation, implementation, and management of programs for the recruitment and admission of qualified students • establishment and implementation of standards for academic performance and progression • resource acquisition and mission-based allocation • continuous enhancement of the visibility of the college or school on campus and to external stakeholders • the effective use of resources to meet the needs and mission of the college or school 	Satisfactory
<p>The dean has ensured that ACPE has been notified in advance of the implementation of any substantive change, allowing sufficient time for evaluation of compliance with standards or the need for additional monitoring.</p>	Satisfactory

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> How the dean provides leadership for the college or school and program and how the qualifications and characteristics of the dean support the achievement of the mission and goals
<input checked="" type="checkbox"/> The authority and responsibility of the dean to ensure all expectations of the standard and guidelines are achieved
<input checked="" type="checkbox"/> How the dean interacts with and is supported by the other administrative leaders in the college or school

- How the dean is providing leadership to the academy at large, and advancing the pharmacy education enterprise on local, regional, and national levels.
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. How the dean provides leadership for the college or school and program and how the qualifications and characteristics of the dean support the achievement of the mission and goals.

Dean R. Pete Vanderveen holds a BS in pharmacy (1974) and an MS in clinical pharmacy (1976) from Purdue University, completed a residency in hospital pharmacy in Michigan and earned a PhD in university administration from Michigan State University (1987). He was previously a board-certified psychiatric pharmacist and practiced in community, hospital, long-term-care and psychiatric settings prior to assuming academic administrative roles. He has served as a pharmacy dean or assistant dean for the past 26 years.

Since joining USC, Dean Vanderveen's honors include Dean of the Year from the American Pharmacists Association, Bowl of Hygeia Award from the California Pharmacists Association and Pharmacy Great Communicator from the National Association of Chain Drug Stores. Previously, he was named Pharmacist of the Year by the Michigan Society of Hospital Pharmacists, Outstanding Teacher by the Oregon Health Sciences School of Medicine and fellow of the American Society of Health-System Pharmacists, the American Pharmacists Association and the National Academy of Practitioners. He earned the Purdue Distinguished Alumnus Award and received the Glen A. Sperandio Award for Pharmacy Practice.

The dean has brought a strong commitment to engage the School in cutting-edge, technology-enhanced learning methodologies and supported student training in physical-assessment skills and immunization procedures early in the curriculum to prepare them for preventive medicine and medication management.

Under his leadership, the School is the only institution to have won three APhA Foundation Pinnacle Awards, including two individual APhA Foundation Pinnacle awards. Other honors to faculty under his leadership include two ACCP Transformative Community Service Awards, one ASHP Best Practices Award and a Presidential Citizens Medal from the White House. These awards illustrate the culture of top-notch academic training and community outreach he has promoted. He has been a major supporter of the safety-net practice model developed at USC, which has earned a \$12 million Centers for Medicare & Medicaid Innovation (CMMI) award, was a finalist among more than 300 proposals in the Harvard Business School competition for healthcare innovation and was recognized by the Interprofessional Education Collaborative as among the best examples of interprofessional education in the nation.

2. The authority and responsibility of the dean to ensure all expectations of the standard and guidelines are achieved.

In addition to monthly department meetings and meetings of the Pharmacy Faculty Council (PFC) Executive Board, the dean attends the School's biennial three-day retreat, where faculty and administrators ensure the School is in alignment with the Strategic Plan and mission.

The dean has supported more vigorous attention to assessment of all School activities and has appointed an assistant dean for Curriculum and Assessment and provided technical support to facilitate this project (see **Appendix 8.2.1** for a full description of the dean's responsibilities). He has helped ensure that student knowledge is connected and coordinated with innovative pharmacy-practice models and the provision of pharmacy care, and that students are prepared for the role of medication expert on the healthcare team.

The dean requires department chairs and faculty search committees to recruit new faculty who have strong research as well as teaching qualifications and to seek out minority faculty. He emphasizes the need for collaborative research approaches within the School, the University and beyond. Research funding has more than doubled under his leadership. Of particular note, in partnership with the USC Price School of Public Policy, he established the USC Schaeffer Center for Health Policy and Economics. A strategic cluster hire from RAND Corporation, complemented by existing faculty, allowed for an immediately influential center ranked second only to Harvard after just five years in existence.

In the past three years, the center has received \$60 million in new federal research funds and was endowed with \$25 million from namesake Leonard D. Schaeffer.

3. How the dean interacts with and is supported by the other administrative leaders in the college or school.

The dean is continually updated by the executive vice dean, vice dean, associate deans and department chairs on various areas/programs at the School. The deans and chairs meet weekly.

4. How the dean is providing leadership to the academy at large, and advancing the pharmacy education enterprise on local, regional, and national levels.

The dean has challenged clinical faculty to develop programs that impact the communities surrounding campus. A number of faculty have acquired substantial grant support to provide outpatient clinical pharmacy services in safety-net settings. These efforts have brought the School recognition and have successfully improved health outcomes for underserved patients. The previously mentioned CMMI grant is allowing the School to develop a replicable model of care that aims to show the impact of pharmacy services on a large safety-net medical home network.

Both Congress and the state legislature have acknowledged the School's contributions to the community through public proclamations in their respective records (Congressional Record and a Commending State Resolution). Los Angeles County Supervisor Mark Ridley-Thomas notes, "Through innovative programs that bring pharmacists into direct contact with patients, the USC School of Pharmacy is leading the way in increasing healthcare access for underserved communities." The dean played a pivotal role in the passage of California Senate Bill 493, which declares pharmacists as "providers under Medi-Cal." Throughout his tenure at the School, he has strategically informed elected officials, the media and the public about the education level of today's pharmacists, their potential to cost-effectively improve health outcomes and their ability to meet the growing healthcare needs of the public. He has met with and testified before elected officials in Washington, D.C., and Sacramento, and has penned influential opinion pieces in *The Wall Street Journal* and on Politico. Under his leadership, the School

has sponsored three national conferences on expanded clinical pharmacy service and collaborative practice.

The School's publications, including the biannual print magazine *Rxresults*, are distributed to faculty, staff, students, supporters, alumni, USC administrators, deans of all U.S. pharmacy schools, pharmacy associations and select elected officials. The School maintains an extensive website as well as Facebook and Twitter accounts, actively responds to media requests for expert opinions and reaches out to the media on achievements and programs that promote the School and the profession. During the dean's tenure, the School has had major stories promoting the profession in Kaiser Health News, *USA Today* and the *Los Angeles Times*, among other major media. The senior director of communications reports directly to the dean and they meet weekly.

The dean is active in all major state and national pharmacy organizations as well as professional society and scientific organizations.

5. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The dean's reorganization of the School's leadership has established a clear path for improved decision-making and providing structure around a variety of meaningful projects and programs consistent with the School's and University's mission statements and strategic plans. Standing and other critical committees are held accountable by the dean to ensure that admissions, curriculum, scholarship standards, appointments and promotions, and resources are constantly improving. Weekly meetings with his administrative team and monthly meetings with the PFC Executive Board allow for continuous two-way communication.

Several areas are presently being addressed by the dean and his leadership team: addition of new faculty and hiring of replacement faculty to advance new teaching, service and research objectives; addition of new staff to support the expanding faculty research programs and new clinical service models; addition of new technologies for student-centered and distance learning; and provision of additional space to allow more small student conference break-out sessions.

6. Any other notable achievements, innovations or quality improvements.

Under Dean Vanderveen, the School became a top-10 pharmacy school in *U.S. News & World Report* rankings.

7. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

The 2013 responses from USC pharmacy faculty rated three of the AACP survey questions lower than national responses: 1) the School's administrators have clearly defined responsibilities; 2) the School's administrators function as a unified team and 3) the dean is an effective leader of the School. Alumni gave higher-than-national scores on two questions: 1) the dean is providing leadership and 2) the dean encourages alumni to stay involved. To some extent, these ratings may reflect the deaths of key administrators and subsequent reorganization of the administrative team, and the dean's refocusing a greater percentage of his efforts on fundraising, given the School's \$100 million campaign, as well as on national and state legislative issues (including passage of California SB 493).

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring.

University of Southern California / School of Pharmacy

9. The Goal of the Curriculum	
<p>The college or school's professional degree program curriculum must prepare graduates with the professional competencies to enter pharmacy practice in any setting to ensure optimal medication therapy outcomes and patient safety, satisfy the educational requirements for licensure as a pharmacist, and meet the requirements of the university for the degree.</p> <p>The curriculum must develop in graduates knowledge that meets the criteria of good science; professional skills, attitudes, and values; and the ability to integrate and apply learning to both the present practice of pharmacy and the advancement of the profession. Graduates must be able to identify and implement needed changes in pharmacy practice and health care delivery.</p>	

2. College or School's Self-Assessment

The curriculum prepares graduates with the professional competencies to enter pharmacy practice in any setting to ensure optimal medication therapy outcomes and patient safety, satisfies the educational requirements for licensure as a pharmacist, and meets the requirements of the university for the degree.	Satisfactory
The curriculum develops in graduates knowledge that meets the criteria of good science; professional skills, attitudes, and values; and the ability to integrate and apply learning to both the present practice of pharmacy and the advancement of the profession.	Satisfactory
The curriculum fosters the development of students as leaders and agents of change. The curriculum helps students embrace the moral purpose that underpins the profession and develop the ability to use tools and strategies needed to affect positive change in pharmacy practice and health care delivery	Satisfactory
In developing knowledge, skills, attitudes, and values in students, the college or school ensures that the curriculum fosters the development of professional judgment and a commitment to uphold ethical standards and abide by practice regulations.	Satisfactory
The college or school ensures that the curriculum addresses patient safety, cultural competence, health literacy, health care disparities, and competencies needed to work as a member of or on an interprofessional team.	Satisfactory
Curricular content, instructional processes, course delivery, and experiential education are documented, aligned, and integrated where appropriate.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/>	A description of the college or school's curricular philosophy
<input checked="" type="checkbox"/>	A description of how the curriculum fosters the development of students as leaders and agents of change and helps students to embrace the moral purpose that underpins the profession and develop the ability to use tools and strategies needed to affect positive change in pharmacy practice and health care delivery
<input checked="" type="checkbox"/>	How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. A description of the college or school's curricular philosophy.

Consistent with the School's mission of "leading other schools of pharmacy by demonstrating and shaping the future of pharmacy practice, integrative research and educational excellence," the curriculum has a strong scientific foundation, stresses interpersonal and communications skills, includes innovative practice settings and places an emphasis on serving diverse patient populations.

The USC School of Pharmacy offers a four-year, entry-level program leading to the Doctor of Pharmacy degree. All of our entering students have baccalaureate degrees that satisfy the unit requirements for entry. Our admitted students enter with strong math and science backgrounds. The pre-pharmacy coursework requires that students take 90 semester units or 135 quarter units of required courses to satisfy admissions requirements.

The School utilizes a semester system with four years required for completion. Students enroll in 18 units per semester for a total of 144 units. The curriculum provides a strong foundation of knowledge and skills upon which students build their clinical and professional capabilities. The core abilities enable graduates to practice pharmaceutical care in both established and emerging clinical settings. In each of the first three years of the curriculum, students are engaged in didactic instruction, small-group work, case-study discussions, clinical foundations and practical experience within the context of providing pharmaceutical care. The curriculum fulfills the educational requirements for licensure as a pharmacist and provides sufficient content and practice experiences for students to master the professional competencies for contemporary pharmacy practice.

Throughout the curriculum, students are trained to think like pharmacists and professionals, and to develop the clinical, legal and ethical judgments necessary to practice with the highest standards. They learn to provide clinical services including immunization, blood-pressure screening and glucose/cholesterol screening at community health fairs. Students receive the training for these activities in the first-year pharmacy practice course (PHRD 509). During the practical training at health fairs, students are carefully monitored by experienced clinical pharmacy faculty or preceptors. The School requires students to participate in one or more of the health fairs in Los Angeles and Orange counties that provide care to underserved and culturally diverse populations. Some of the health fairs are run in conjunction with the Keck School of Medicine of USC, the Ostrow School of Dentistry of USC and other USC health disciplines (e.g., physical therapy and occupational therapy professionals) fostering interprofessional education.

2. A description of how the curriculum fosters the development of students as leaders and agents of change and helps students to embrace the moral purpose that underpins the profession and develop the ability to use tools and strategies needed to affect positive change in pharmacy practice and health care delivery.

The School's academic environment encourages students to become critical thinkers and problem solvers. Students are taught to engage in decision-making challenges associated with patient care and workplace situations, as well as to serve as advocates influencing change in state laws and policies, thus

taking on leadership roles in the profession. Laws governing the practice of pharmacy have changed over the years, increasingly engaging the pharmacist in the role of a crucial healthcare provider. The School's first-year healthcare delivery systems course (PHRD 507) introduces students to the complexity of the healthcare system and the drivers of healthcare policy, giving them an understanding of how they can influence or promote change in healthcare and pharmacy practice.

When California Senate Bill 493 was introduced in 2013, many of the School's faculty and students took an active role in advocating for passage of the bill. The bill formally recognizes the pharmacist as a healthcare provider and expands the scope of practice for pharmacists to order drug-related laboratory tests, administer drugs, furnish oral contraceptives, promote smoking-cessation programs and provide travel medications. The new law also created an advanced practice pharmacist category that enables qualified pharmacists to initiate and manage drug therapy. The School thoroughly prepares students to take on this expanded role.

3. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The School has long been a leader in developing curricular advances that become model programs for the profession. For instance, the School was the first to develop the PharmD curriculum. The curriculum is focused on preparing graduates with the professional competence to enter practice in a wide variety of settings, with a strong emphasis on science, optimal therapy outcomes and patient safety, providing leadership that advances the profession, and advocating for and implementing needed changes in pharmacy practice and healthcare delivery. The curriculum also instills professional skills, attitudes and values through a vibrant experiential component. The IPPE program has been designed to run concurrently with the didactic courses to promote the application of coursework to patient care throughout the first three years.

4. Any other notable achievements, innovations or quality improvements.

The School's curriculum is heavily integrated with a significant team-teaching component in foundational courses. The therapeutics modules, for example, include basic science and clinical faculty co-coordinators in every course. This team-teaching approach now includes nearly all courses in the curriculum. Faculty teams work to ensure that the content presented is scientifically sound and clinically relevant. A grassroots interprofessional initiative to engage pharmacy students in meaningful interactions with students and faculty from a wide range of other health professions has led to publications, scholarship and a meaningful interprofessional curriculum. The Norris Medical Library [website describes the interprofessional initiatives](#) and opportunities for students and faculty. An electronic student portfolio has been developed and introduced into P1 and P2 to increase reflection and professional development. These portfolios can be shared with faculty and preceptors, and the electronic format enables better monitoring of student progress and attainment of competencies. Module XI (PHRD 612), a capstone course in P3, was developed to prepare students for APPEs by reinforcing foundational knowledge through multiple assessments including practical (on the objective structured clinical examinations model) and written examinations (see Appendix D)

5. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

AACP survey results for the School are generally in alignment with the national and/or cohort results. More than 90% of recent graduates strongly agreed or agreed that the program included opportunities to

develop professional attitudes, ethics and behaviors. Alumni survey results about awareness of program outcomes, while generally positive and consistent with national results, have motivated the School to consistently reinforce program outcomes in every course syllabus. AACP survey results regarding sequencing of courses and course loads being reasonable have been consistently less positive than national or cohort results. The School's curriculum is being revised to address these concerns.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. A revised curriculum is being developed and is anticipated to be in place for entering students in fall 2015.

University of Southern California / School of Pharmacy

10. Curricular Development, Delivery, and Improvement.	
<p>The college or school's faculty must be responsible for the development, organization, delivery, and improvement of the curriculum. The curriculum must define the expected outcomes and be developed, with attention to sequencing and integration of content and the selection of teaching and learning methods and assessments. All curricular pathways must have both required and elective courses and experiences and must effectively facilitate student development and achievement of the professional competencies.</p> <p>The curriculum for the professional portion of the degree program must be a minimum of four academic years or the equivalent number of hours or credits. The curriculum must include didactic course work to provide the desired scientific foundation, introductory pharmacy practice experiences (not less than 5% of the curricular length) and advanced pharmacy practice experiences (not less than 25% of the curricular length).</p>	

2. College or School's Self-Assessment

The college or school's faculty is responsible for the development, organization, delivery, and improvement of the curriculum.	Satisfactory
The curriculum defines the expected outcomes and is developed with attention to sequencing and integration of content and the selection of teaching and learning methods and assessments.	Satisfactory
All curricular pathways have both required and elective courses and experiences and effectively facilitate student development and achievement of the professional competencies.	Satisfactory
The curriculum for the professional portion of the degree program is a minimum of four academic years or the equivalent number of hours or credits.	Satisfactory
Introductory pharmacy practice experiences are not less than 5% (300 hours) of the curricular length.	Satisfactory
The advanced pharmacy practice experiences are not less than 25% (1440 hours) of the curricular length.	Satisfactory
On behalf of the faculty, the Curriculum Committee (or equivalent) manages curricular development, evaluation, and improvement to ensure that the curriculum is consistent with the collective vision of the faculty and administration.	Satisfactory
Learning outcomes for curricular courses and pharmacy practice experiences are mapped to the desired competencies and gaps and inappropriate redundancies identified inform curricular revision.	Satisfactory
Curricular design allows for students to be challenged with increasing rigor and expectations as they matriculate through the program to achieve the desired competencies. The curriculum design enables students to integrate and apply all competency areas needed for the delivery of holistic patient care.	Satisfactory
The Curriculum Committee (or equivalent) is constituted to provide balanced representation from all departments, divisions, and/or disciplines within the college or school.	Satisfactory

Faculty members are aware of the content, competencies, and learning outcomes for each other's courses and use that information to optimize these elements within their own courses.	Needs Improvement
The curriculum complies with university policies and procedures and the accreditation standards.	Satisfactory
Student representation and feedback are integral parts of curricular development and improvement.	Satisfactory
The Curriculum Committee (or equivalent) has adequate resources to serve as the central body for the management of orderly and systematic reviews of curricular structure, content, process, and outcomes, based on assessment data.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> A description of the curricular structure, including a description of the elective courses and experiences available to students
<input checked="" type="checkbox"/> How both the didactic and experiential components comply with Standards for core curriculum and IPPE and APPEs in regard to percentage of curricular length
<input checked="" type="checkbox"/> Any nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable)
<input checked="" type="checkbox"/> Data that link teaching-and-learning methods with curricular outcomes
<input checked="" type="checkbox"/> How the results of curricular assessments are used to improve the curriculum
<input checked="" type="checkbox"/> How the components and contents of the curriculum are linked to the expected competencies and outcomes through curricular mapping and other techniques and how gaps in competency development or inappropriate redundancies identified inform curricular revision
<input checked="" type="checkbox"/> How the curricular design allows for students to be challenged with increasing rigor and expectations as they matriculate through the program to achieve the desired competencies and how the curriculum design enables students to integrate and apply all competency areas needed for the delivery of holistic patient care.
<input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements
<input checked="" type="checkbox"/> Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. A description of the curricular structure, including a description of the elective courses and experiences available to students.

A map of the curriculum is included in **Appendix 10.3.3**. The year 1 curriculum includes a strong foundation of clinical, biomedical, social and administrative and pharmaceutical sciences. Core content includes anatomy, histology, biochemistry, physiology, pathology, public health, healthcare systems and pharmaceutical sciences. In the first three weeks, students take just one course, Pharmacy Practice and Experience 1, an intensive introduction emphasizing critical practice skills. They are trained to provide immunizations, take blood pressure readings, perform blood glucose and cholesterol screenings and

interview/counsel patients. This focused instruction enables students to begin participating in health fairs throughout Los Angeles and Orange counties. The first IPPE begins in week four. Foundational courses continue in the spring. The School recently completed a state-of-the-art compounding lab, where students learn non-sterile compounding. The Pharmacy Practice course series also includes an introduction to pharmacy law, standards, professional ethics and leadership skills, and “Top 200” drug content. Each P1 student spends four weeks in a community IPPE and four weeks in a hospital IPPE.

Year 2 students complete the foundation of biomedical and pharmaceutical sciences and begin the transition into therapeutic and clinical application. In the first of 11 therapeutics courses, students are introduced to medicinal chemistry, pharmacology, and clinical and pharmacogenomics principles. The second therapeutics course develops skills in challenging pharmacokinetic principles. Spring-term therapeutics courses focus on the central nervous system and general medicine/inflammatory disorders. Other courses in P2 include: Self-Care and Non-Prescription Drug Therapy, Immunology, Management within Healthcare Organizations, Pharmacy Practice and Experience 3 (IPPE) and Pharmacy Literature Analysis and Drug Information. The P2 IPPE course is taken either in the fall or spring term. Each student in a new IPPE course completes a hospital/health system experience. Sterile compounding is taught in the P2 IPPE course.

Year 3 completes the didactic portion of the curriculum, with clinical therapeutics courses constituting the majority (23 of 36) of units. The therapeutics modules for P3 include: cardiovascular (PHRD 601), endocrine (PHRD 603) and Infectious Disease I (PHRD 605), a course in nutrition. The second semester includes Infectious Disease II (PHRD 606), Oncology (PHRD 608), Special Topics and Special Populations (PHRD 610) and the capstone course (PHRD 612). Also in the spring, students study Pharmacy Law and Ethics (PHRD 617) and Pharmaceutical Economics and Outcome Studies (PHRD 614). P3 students choose one three-unit elective each semester. Electives include community pharmacy business management, women’s health, pharmaceutical industry, geriatric practice and hospital practice, and lab research rotations in pharmaceutical science or pharmacology.

Year 4 students complete six six-week APPEs and a yearlong Doctor of Pharmacy online capstone course. Students complete the affiliated APPEs, of six units each, at healthcare facilities. Four of the experiences are required APPEs (Acute Care 701, Primary Care 704, Community Practice 705 and Hospital Practice 718); the remaining two are electives such as clinical research, intensive care, homeopathic pharmacy and advanced ambulatory care.

2. How both the didactic and experiential components comply with Standards for core curriculum and IPPE and APPEs in regard to percentage of curricular length

The three-year didactic portion of the curriculum begins in the first year. The IPPE portion of the curriculum begins in P1 and runs concurrently with the didactic curriculum. The IPPE program is a minimum of 300 hours per student. APPEs commence after the didactic curriculum is complete and comprise one academic year (25% of the curriculum). All 300 IPPE hours are satisfied in the first three years, and 1,440 hours are acquired in year 4 through assignments in the APPE program. The IPPE and APPE portions comply with or exceed the standard’s requirements.

3. Any nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable).

N/A

4. Data that link teaching-and-learning methods with curricular outcomes.

The faculty is committed to utilizing effective teaching and learning strategies using active-learning techniques such as team-based learning, think-pair-share and one-minute write and reflection. Students are placed in small discussion groups in many courses to enhance their problem-solving and communication skills. Achievement of outcomes and competencies within and across courses is assessed using ExamSoft, E*Value and curriculum mapping. Data from these and other sources, such as curriculum-quality surveys, are used to monitor progress and implement change when needed.

5. How the results of curricular assessments are used to improve the curriculum.

Curricular assessments are used by the Curriculum Committee, Admissions Committee and faculty to make adjustments to improve the curriculum include curriculum-quality survey data, course/faculty evaluations, and student performance within courses and in capstone assessments. Assessments by individual faculty are also shared with appropriate committees; for example, analysis of poor-performing students in the Biological Systems course found that these students tended to have completed a prerequisite at a community college or through a course for non-science majors (or both). The Admissions Committee then reviewed all physiology courses and eliminated those that provided insufficient preparation. Results from preceptor feedback, capstone assessments and curriculum-quality surveys indicated that student literature-evaluation skills needed attention. Faculty teaching the Drug Information and Literature Evaluation course collaborated with preceptor faculty to make a more direct connection between literature evaluation and patient care. The impact of this change will be monitored by course coordinators and the Curriculum Committee. The low score in the curriculum-quality survey regarding, "my IPPEs were valuable in helping me prepare for my APPEs," led to a change in the IPPE program in 2014. Students will now have more traditional hospital/health system and community practice hours in place of the Parenteral Drug Therapy Practicum and will experience an ambulatory care experience in P3. A large percentage of IPPE hospital time spent in an IV room rather than in more direct patient-care activities might have contributed to the low score. Adding an ambulatory care experience to better prepare students for their required PHRD 704 Primary Care APPE is also anticipated to improve the perceived value of the IPPE. Students' end-of-course evaluations and formative evaluations are also useful in assessing and fine-tuning the curriculum. In addition, Curriculum Committee meetings and feedback from School-wide retreats contribute to curricular assessment and productive changes.

6. How the components and contents of the curriculum are linked to the expected competencies and outcomes through curricular mapping and other techniques and how gaps in competency development or inappropriate redundancies identified inform curricular revision.

The Curriculum Committee has developed detailed curricular maps to identify gaps and redundancies and ensure students are gaining the skills for successful practice. These maps highlight the connections between courses. The curricular map was compiled by surveying faculty about their courses, including content (**Appendix B, C and D**) and relationship to outcomes, then utilizing keyword text-searching technology within course documents. Using these strategies, the Curriculum Committee generated both tabular and interactive image-based maps of the curriculum and outcomes. The maps, along with other data, are being used to revise the curriculum. The goal is to build upon required competencies to ensure each student develops the necessary skills, knowledge and experiences to become an outstanding practitioner. Curriculum maps will be available onsite. Curricular mapping has led to changes in curriculum: The finding that informatics and medication-safety policy were covered minimally in our curriculum led to changes in the management course to cover these topics in greater detail and

in the capstone courses (P3 and P4) to include the WHO Medication Safety curriculum content. As we continue to map the curriculum, changes will be made to improve the curriculum and streamline the assessment process.

7. How the curricular design allows for students to be challenged with increasing rigor and expectations as they matriculate through the program to achieve the desired competencies and how the curriculum design enables students to integrate and apply all competency areas needed for the delivery of holistic patient care.

The early curriculum establishes a strong scientific foundation and orients students to the profession. As students matriculate, emphasis on higher-order thinking increases. Students apply knowledge and skills from the foundational courses to patient care and practice management. The therapeutics modules incorporate prior learning with patient-care problem-solving in small-group discussions where they discuss patient cases, simulate patient counseling, practice pharmacy-care skills and conduct a journal club. Cases include both the topics currently being presented in the modules and topics from prior modules. An example of the integration map of topics is included in the appendix. Cases increase in complexity as students progress through the curriculum. In addition to clinical learning, professionalism and communication skills are stressed and heavily weighted in each student's grade. A copy of the case-conference grading rubric is included in the appendix. Student readiness to enter APPEs is assessed at the end of the didactic program during the Capstone Module (PHRD 612). The APPE program places students in practice environments with the expectation that they will function as a "pharmacist in training" under the supervision of experienced preceptors. Curriculum-quality surveys indicate that students value their APPE experiences and are able to apply their knowledge and skills.

8. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

See *Appendix 10.3.1*.

9. Any other notable achievements, innovations or quality improvements.

Several achievements, innovations and quality improvements have recently been made: 1) The School remodeled two large classrooms to better accommodate students; 2) students are required to provide patient care at School-sponsored health fairs to document completion of practice skills and competencies; 3) as a result of the School's extensive collaboration with local safety-net clinics, P3 students work directly with a diverse, underserved patient population in a new IPPE experience; 4) the School has adopted systems to monitor teaching (CourseEval and e-value), learning and attainment of competencies (e-value and ExamSoft) and management of course materials (Blackboard). These technologies have significantly reduced paper use, consistent with the University's goal to achieve a "green" campus; 5) an Interprofessional Education working group, consisting of students and faculty from pharmacy, medicine, occupational therapy, physical therapy, social work and physician assistants, has initiated several innovative projects and curriculum changes; 6) the Curriculum Committee introduced a standard syllabus template that includes more direct links to School outcomes, policies and course requirements; and 7) formal technology requirements for entering students were adopted to ensure students have the abilities to successfully complete the curriculum and utilize technology embedded in courses/clinical experiences.

10. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

In general, results from faculty, preceptor, graduating student and alumni surveys are consistent with local and national results. Our graduates overwhelmingly report being prepared to enter practice (>90%), prepared to enter APPEs (close to 90%), and able to use their patient-care skills in hospital/health-system, community and ambulatory care environments.

Responses to whether course loads were reasonable were lower than the national average. The Curriculum Committee is engaged in the redesign of the curriculum to reduce the required units and create additional space for electives.

Curriculum-quality survey questions for faculty were higher than the national average on five topics:

1) curriculum is consistent with collective vision of the faculty, 2) faculty are consulted on curricular matters, 3) understanding that instructional content fits into the curriculum, 4) curriculum is taught at depth that supports understanding of central concepts and principles and 5) curricular collaboration among disciplines is encouraged. On two questions, faculty responses were below the national average:

1) organization and structure of curriculum is clear, and 2) school uses programmatic assessment data to improve the curriculum. Survey results for 2014 indicate improvement in the second question. The Curriculum Committee is striving to better communicate the link between assessment data and proposed changes to the curriculum.

4. College or School's Final Self-Evaluation

<input type="checkbox"/> Compliant	<input checked="" type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant with monitoring. With curricular changes underway, the School is developing a more complex curriculum map which promises to help faculty better understand the content and competencies covered throughout the curriculum so that they will be able to optimize their course content and outcomes.

University of Southern California / School of Pharmacy

11. Teaching and Learning Methods
 The college or school, throughout the curriculum and in all program pathways, must use and integrate teaching and learning methods that have been shown through curricular assessments to produce graduates who become competent pharmacists by ensuring the achievement of the stated outcomes, fostering the development and maturation of critical thinking and problem-solving skills, meeting the diverse learning needs of students, and enabling students to transition from dependent to active, self-directed, lifelong learners.

2. College or School's Self-Assessment

The program, throughout the curriculum and in all pathways, uses and integrates teaching and learning methods that have been shown through curricular assessments to meet the diverse learning needs of students and produce the desired professional competencies and outcomes, including the development and maturation of critical thinking, problem-solving, and self-directed, lifelong learning skills.	Satisfactory
Faculty members use a variety of teaching and learning techniques (e.g., active learning, case studies, etc.) that have been thoughtfully selected, designed, and/or tailored to help students achieve the learning outcomes articulated for their courses.	Satisfactory
The college or school evaluates the effectiveness of its curricular innovations through its assessment activities.	Needs Improvement
The outcomes of the distance-learning activities are appropriate for the student population and achievable through distance study.	N/A
Teaching and learning methods used assure that learning experiences, opportunities, and outcomes are comparable for all pathways, branches or campuses.	N/A

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/>	A description of teaching and learning methods and strategies employed in the delivery of the curriculum, including nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable), and how those methods are expected to advance meaningful learning in the courses in which they are employed.
<input checked="" type="checkbox"/>	Efforts of the college or school to address the diverse learning needs of students
<input checked="" type="checkbox"/>	The formative and summative assessments used to evaluate teaching and learning methods used in the curriculum, including nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable)
<input checked="" type="checkbox"/>	How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/>	Any other notable achievements, innovations or quality improvements
<input checked="" type="checkbox"/>	Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. A description of teaching and learning methods and strategies employed in the delivery of the curriculum, including nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable), and how those methods are expected to advance meaningful learning in the courses in which they are employed.

1) The P1 curriculum was revised in 2010 to create more flexibility and maximize the learning process. One change was to schedule students in only one course, Pharmacy Practice Skills, during the first three weeks of school to provide foundational skills needed to fully participate in health fairs. The P1 pharmaceuticals course, taught during the remainder of the semester, uses an intensive lecture series followed by cases studies. An exam week was instituted during which IPPEs and class sessions are suspended. Results of a survey to assess the revised schedule resulted in minor modifications and expansion to the second semester. 2) Course coordinators meet before each semester to create a joint/cooperative schedule; 3) The Inter-Module Coordinating Council (IMCC) has engaged in efforts to enhance case conferences and provide more uniformity in teaching and learning within the modules (11 courses over two years, totaling 28% of curriculum), including standardizing case conference formats, standardizing expectations for student performance, item-writing faculty development, syllabus review and curriculum mapping. 4) The Center for Excellence in Teaching regularly holds sessions on active learning, archived at its website. 5) Video-capturing sessions of large courses has been continued and upgraded to facilitate students' ability to review content. 6) The Audience Response System (ARS) or "clicker system" for increasing participation in the classroom is now being used for assessment of student learning (points awarded for correct answers) and to encourage participation in class (points for answering only). Faculty also use the ARS for real-time assessment of student understanding during instruction. Use of the ARS has declined recently in favor of more directly engaging methods of active learning. 7) Team-based learning (TBL) has been introduced in the last two years, primarily in the P2 curriculum. Both individual and group performance contribute to each student's grade. An expansion of TBL is being reviewed. 8) ExamSoft testing has been introduced to provide a direct ability to link program and course outcomes to the "embedded" student assessments. The reports are a rich source of feedback about students' mastery of content. 9) The capstone course (PHRD 612), now fully developed, is designed to assess a student's readiness for APPEs and provide feedback about curricular effectiveness. 10) Feedback has resulted in many changes to the curriculum, including restructuring PHRD 557 and 559 to create a semester-long pK course, enhancement of the drug information course, expansion of P2/P3 cases conferences to include required patient counseling, journal review and use of pharmacy practice elements. Capstone course assessments have been mapped to Appendix D and School outcomes.

2. Efforts of the college or school to address the diverse learning needs of students.

Delivery of the curriculum has evolved significantly from a traditional delivery model to a more student-centered model. Faculty members have expanded teaching methods to address the diverse learning needs of students. Changes to curriculum delivery and structure have been the result of a variety of assessment strategies, including student feedback, student performance in courses (grades and embedded assessments), student performance during IPPEs/APPEs based on preceptor evaluation, individual course analysis by faculty, annual curriculum-quality surveys and input from preceptors.

Specific strategies to transform our curriculum from "teacher-centered" to "student-centered":

1. Standardizing course syllabi throughout the P1-P3 curriculum

2. Aligning course objectives to program outcomes
3. Aligning lecture/course objectives to teaching and assessment methods
4. Incorporating active-learning strategies (ARS, TBL, small groups, practicums) into large classes
5. Coordinating exam dates within the academic year and in conjunction with outside professional meetings/events to reduce student stress and enhance learning, including adding an exam week to P1
6. Using instructional technology, including Blackboard, E*Value, ExamSoft, MediaSite and Norris Medical Library resources. The Development of Technology Requirements document outlines the computing capabilities students must possess.
7. Introducing peer student teaching, which trains senior students during community APPEs to facilitate small groups of P2 students for OTC/self-care case conferences, reinforcing foundational self-care concepts for both groups of learners
8. Expanding the use of rubrics for student assessment, including for case-conference scoring, IPPE evaluations, SOAP notes, CVs and patient counseling, in order to focus students/faculty on the desired performance, reduce emphasis on “points” and provide students with direct information to improve performance
9. Expanding performance-based assessments using objective structured clinical examinations (OSCE) to P1 (PHRD 509-510), P2 (PHRD 561) and P4 (PHRD 705/community practice APPE). Performance-based assessments provide students and faculty with direct evidence of each student’s ability to apply their learned knowledge and skills to real-life practice
10. Transitioning from paper handouts to electronic handouts in a methodical way to minimize the impact of the change and allow students to adapt to paperless courses

Additionally, the School has support systems in place for students with learning challenges. During orientation, students have a brief discussion of the utility of the form and importance of self-awareness with respect to learning styles. To support students with diverse needs, the School: 1) video-captures nearly 100% of course sessions to make course content available for review and support self-pacing; 2) provides large-group and individual tutoring sessions for P1 and P2 students prior to exams.; 3) supplies study materials, including *Success Types for Medical Students* (concept-mapping) and supplemental instructional materials (mnemonics for physiology); and 4) every course syllabus contains contact information for registration with the Office for Students with Disabilities, which provides evaluation and recommendations for students with learning challenges.

3. The formative and summative assessments used to evaluate teaching and learning methods used in the curriculum, including nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable).

To assess teaching, student evaluations are collected at the end of every course using CourseEval; student feedback is provided to committees; focus groups of students are conducted; informal and formal peer assessments of teaching are utilized; and feedback on teaching effectiveness is gathered using embedded assessments, the capstone course, APPE evaluations and board exams. To assess student learning, students complete embedded course assessments, including examinations, reflections,

assignments and in-class discussion, and ExamSoft, is used for item banking and linking of course objectives to student performance.

No non-traditional pathways are offered.

4. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

The School's curriculum is designed to support higher-order thinking. Students are encouraged to assume responsibility for their own learning throughout the program, and self-assessments facilitate this responsibility. Every course helps students develop their critical thinking and problem-solving skills. Courses with small-group sessions, often using case studies, are the most effective in developing critical-thinking and problem-solving skills. In larger courses, faculty members are encouraged to employ active-learning strategies and assessments to promote higher-order thinking skills. Assessments and examinations that require application and analysis build these skills further. A number of resources are available to faculty to support the implementation of new and/or innovative teaching and learning strategies, including access to experts in teaching methods and student learning; technology support from the Office of Information Technology and Media Services; resources available through the [Center for Excellence in Teaching](#), the [USC Faculty Portal](#) and faculty development programming; and courses offered by the [Department of Medical Education](#). A Teaching Skills Seminar Series is offered each year to P1 and P2 residents and faculty and teaching assistants.

Faculty are encouraged to collaborate and "experiment" with new strategies to improve student learning. Assessment of changes in methods or strategies to assess the success of innovation and for continuous improvement is shared at faculty retreats, course coordinator meetings, the IMCC and curriculum committee.

5. Any other notable achievements, innovations or quality improvements.

The adoption of revised program outcomes and updated curriculum mapping will be utilized extensively in the next curricular revision. Two faculty and one graduate student have been recognized by the University's Center for Excellence in Teaching over the past three years.

6. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

Curriculum-quality surveys (2008–2014) indicate high agreement (>90%) with statements asking whether the program has prepared students to reflect critically on personal skills and actions and make improvements; accept and respond to feedback; engage in active learning; continually learn after graduation; and assume responsibility for learning. These results, while similar to national results, indicate that the School's teaching and learning processes are effective. Responses to the question regarding the classrooms and laboratories being conducive to learning, while positive in general, are lower than national results and prompted the School to complete needed classroom renovations, including the redesign of large and small classrooms and building a new sterile compounding laboratory. Preceptors agree that students are encouraged to assume responsibility for their own learning, similar to national results. Alumni survey results indicate that respondents felt responsible for their own learning while in school and that they engaged in active learning, although to a slightly lesser extent than the graduating students surveyed, perhaps an indication that active-learning strategies are being used much more than in past years.

4. College or School's Final Self-Evaluation

<input type="checkbox"/> Compliant	<input checked="" type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant with monitoring. Curricular innovations require a regular, systemized assessment process that the School is pursuing as these changes take form.

University of Southern California / School of Pharmacy

12. Professional Competencies and Outcome Expectations

Professional pharmacist competencies that must be achieved by graduates through the professional degree program curriculum are the ability to:

1. Provide patient care in cooperation with patients, prescribers, and other members of an interprofessional health care team based upon sound therapeutic principles and evidence-based data, taking into account relevant legal, ethical, social, cultural, economic, and professional issues, emerging technologies, and evolving biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences that may impact therapeutic outcomes.
2. Manage and use resources of the health care system, in cooperation with patients, prescribers, other health care providers, and administrative and supportive personnel, to promote health; to provide, assess, and coordinate safe, accurate, and timesensitive medication distribution; and to improve therapeutic outcomes of medication use.
3. Promote health improvement, wellness, and disease prevention in cooperation with patients, communities, at-risk populations, and other members of an interprofessional team of health care providers.

These professional competencies must be used to guide the development of stated student learning outcome expectations for the curriculum. To anticipate future professional competencies, outcome statements must incorporate the development of the skills necessary to become self-directed lifelong learners.

2. College or School's Self-Assessment

Professional Competencies 1, 2 and 3 guide the development of stated student learning outcome expectations for the curriculum.	Satisfactory
The curriculum prepared graduates to provide patient care in cooperation with patients, prescribers, and other members of an interprofessional health-care team based upon sound scientific and therapeutic principles and evidence-based data.	Satisfactory
The curriculum fosters an understanding of, and an appreciation for, the legal, ethical, social, cultural, economic, and professional issues, emerging technologies, and evolving biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences that may impact therapeutic outcomes.	Satisfactory
The curriculum prepares graduates to manage and use resources of the health care system, in cooperation with patients, prescribers, other health care providers, and administrative and supportive personnel, to promote health; to provide, assess, and coordinate safe, accurate, and time-sensitive medication distribution; and to improve therapeutic outcomes of medication use.	Satisfactory
The curriculum prepares graduates to promote health improvement, wellness, and disease prevention in cooperation with patients, communities, at-risk populations, and other members of an interprofessional team of health care providers.	Satisfactory
Outcome statements include developing skills to become self-directed lifelong learners.	Satisfactory
The curriculum prepares graduates to independently seek solutions to practice-based problems in the scientific and clinical literature.	Satisfactory

Graduates possess the knowledge, skills, attitudes, and values needed to enter practice pharmacy independently by graduation.	Satisfactory
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3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> A description of the professional competencies of the curriculum
<input checked="" type="checkbox"/> A description of the assessment measures and methods used to evaluate achievement of professional competencies and outcomes along with evidence of how feedback from the assessments is used to improve outcomes
<input checked="" type="checkbox"/> How the curriculum is preparing graduates to work as members of an interprofessional team, including a description of the courses that focus specifically on interprofessional education
<input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements
<input checked="" type="checkbox"/> Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. A description of the professional competencies of the curriculum.

The curriculum’s professional competencies (see **Appendix 12.1.1**) were revised in 2014 after release of the 2013 CAPE Educational Outcomes. Previously, competencies were aligned with ACPE Standards 2009, rev. 2011. The School’s competencies address six areas: provision of patient care; application of foundational knowledge; demonstration of a comprehensive approach to patient care; professionalism; management and use of the resources of the healthcare system; and personal and professional development.

2. A description of the assessment measures and methods used to evaluate achievement of professional competencies and outcomes along with evidence of how feedback from the assessments is used to improve outcomes.

Assessment measures and methods used to evaluate student achievement of professional competencies and outcomes include: embedded course assessments; participation in small-group and case discussions; self-evaluations; capstone course assessments; performance as assessed by preceptors during IPPEs/APPEs; aggregate data from licensure exams (CPJE, NAPLEX, MPJE); curriculum quality survey responses; student feedback in committee meetings, focus groups and retreats; and course-performance grades and faculty assessments. The Curriculum Committee routinely reviews the above-mentioned assessments, and makes adjustments based on data from these assessments and stakeholder input. Minor curricular adjustments are made by course faculty in consultation with the Curriculum Committee. Structural changes to the curriculum, new courses, major course revisions and curriculum revisions go through the Curriculum Committee to the Pharmacy Faculty Council for approval. Recent changes include: Based on feedback from curriculum quality surveys, the drug information/literature evaluation course was modified to enhance applicability to patient care; based on feedback from preceptors and scores on capstone PK assessments, PHRD 557 and 559 therapeutics modules were reorganized and scheduled over the entire semester instead of taught in blocks; based

on review of course materials, student evaluations and capstone results, PHRD 562 was reorganized to focus on general medicine and inflammatory conditions; based on input from faculty and students and review of course outlines, some redundancy in coverage of viral hepatitis was removed from 562 as it is covered thoroughly in PHRD 606. PHRD 503-504 biological systems courses were modified to include more content on skin, lymphatic system and neurotransmitters, and oncology material was reduced; based on input from students, preceptors and faculty (including curriculum quality surveys) the IPPE program is undergoing revisions: a P3 IPPE in safety-net clinics has been added, the P2 IPPE now includes community and health-system experiences for each student, and compounding is taught in the new lab.

3. How the curriculum is preparing graduates to work as members of an interprofessional team, including a description of the courses that focus specifically on interprofessional education.

The School actively participates in the USC Interprofessional Education (IPE) Committee and engages in teaching, research and faculty development with the USC schools of medicine, social work and dentistry, and physician assistant, occupational therapy and physical therapy programs, and, through nearby Mount St. Mary's College, nursing. The curriculum includes IPE competencies in building student and faculty teaching modules. IPE conferences are held annually for all students. As a result of evaluations, the program is primarily focused on P1. Students in P1-3 are involved in several IPE initiatives, including the student-run clinic, a geriatrics program and health fairs. Courses that build communication, team skills and knowledge of other health professions include: Pharmacy Practice & Experience I & II (P1), where students participate in IPPEs in hospital and community settings and health fairs; Public Health & Epidemiology (P1), where students participate in a health fair for high school students and in an emergency-contraception training program with family planning residents and faculty, and provide a poison-prevention curriculum to elementary students; a Pharmacy Practice and Experience 3, (P2 IPPE) taught in community and health-system settings, where students are encouraged to work with other healthcare providers; P3 students engage with the healthcare team during primary care IPPE and APPE courses. In addition, primary care and acute care courses require regular contact with a healthcare team, and the Community Pharmacy APPE and Health-Systems Practice courses include interaction with healthcare providers.

4. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The guidelines have facilitated construction and optimization of the curriculum. Based on routine review of course evaluations and surveys, the School continuously improves strategies to evaluate student learning and curriculum effectiveness. Students are trained to: provide patient-centered care through IPPEs and APPEs and population-based care through required health fairs; manage human, physical, medical, informational and technological resources through IPPEs and APPEs, online instruction and USC Norris Medical Library resources; manage medication-use systems through training at community and hospital pharmacy sites during IPPE and APPE assignments; and promote the availability of effective health and disease-prevention services and health policy through IPPE and APPE rotations and health fairs.

5. Any other notable achievements, innovations or quality improvements.

The curriculum provides students with opportunities to appreciate the application of clinical research. Basic science, pharmacy economics and business, regulatory science and industrial pharmacy courses enhance critical thinking and guide students in developing career goals, research skills and

pharmacy-practice decision-making. Students are kept up to date about issues that affect healthcare and pharmacy. Faculty are required to ensure all subject matter is current and accurate. Some experiential courses have current-event reporting (e.g., Pharmacy Practice and Experience and Community Pharmacy APPE). The therapeutics modules include information about new drug products, new uses for older medications, and deleted medications. As new pharmacy services become available, training sites, including the School's three community pharmacies, incorporate these services, whether mandated by law or simply because they expand the professionalism of the pharmacist as a provider. Over the last few years, the School's community pharmacies have become responsible for immunization services, glucose/cholesterol/bone-density testing, blood-pressure monitoring, emergency contraception and medication counseling, serving as excellent learning rotations.

6. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

Curriculum quality surveys (2008–2014) indicate a high agreement rate (>90%) with statements that the program prepares students to communicate with healthcare providers, patients and caregivers; gather and use specific information (patient histories, medical records); identify and manage patient-medication problems; work with the healthcare team to implement a patient-care plan; manage the system of medication use; identify and use risk-reduction strategies to minimize medication errors; provide patient care in accordance with legal, ethical, social, economic and professional guidelines; promote wellness; practice in inter-professional and collaborative settings; evaluate healthcare literature; reflect critically on personal skills and actions and make plans to improve; accept and respond to constructive feedback; and enter practice. Areas with less than 90% agreement: interpret and apply drug-use policy and health policy; work with other stakeholders to resolve drug-related problems; interpret economic data relevant to disease treatment; interpret epidemiologic data relevant to specific diseases and their management; and document pharmaceutical-care activities. The Curriculum Committee is working with the management course, literature evaluation course and pharmacoeconomics faculty to enhance these content areas.

Faculty curriculum surveys reflect a lower percentage for student outcomes compared to national data, due to the large percentage of "unable to comment" responses from non-pharmacist faculty compared to the national sample (20% for USC and 8% national). When such responses are removed, results are similar to or more positive than the national results. Faculty in general are more critical of student performance than students are of themselves (at USC and nationally).

Preceptor curriculum surveys indicate the School's results are similar to the national comparison and lower than students' self-assessment. Preceptors are more critical of student performance than students are of themselves (at USC and nationally). The response rate from preceptors was low. A mail survey of preceptors is being planned to attempt a higher response rate.

Alumni curriculum surveys indicate the School's results are similar to national comparisons and lower than recent graduates' self-assessment. Responses to whether the program prepared alumni to evaluate health sciences literature and demonstrate expertise in informatics were slightly lower than the national cohort. Recent attention to this concern from the Curriculum Committee is anticipated to improve these ratings. Low response rate may also be a factor in evaluating the results.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

School is compliant and does not require monitoring. The curriculum quality surveys will be followed to determine the impact of recent changes to the professional outcomes. Strategies to increase the visibility of the outcomes (standard syllabus with the outcomes, students performing self-assessment of progress toward competencies and re-structure of the IPE program) have been introduced. The IPE program is growing and the impact on questions related to interprofessional education are expected to improve.

University of Southern California / School of Pharmacy

13. Curricular Core - Knowledge, Skills, Attitudes and Values
<p>To provide the thorough scientific foundation necessary for achievement of the professional competencies, the curriculum of the professional degree program must contain the following:</p> <ul style="list-style-type: none"> • biomedical sciences • pharmaceutical sciences • social/behavioral/administrative sciences • clinical sciences <p>Knowledge, practice skills, and professional attitudes and values must be integrated and applied, reinforced, and advanced throughout the curriculum, including the pharmacy practice experiences.</p>

2. College or School's Self-Assessment

The curriculum contains at an appropriate breadth and depth the necessary elements within the following areas as outlined in Appendix B of the Standards:	Satisfactory
biomedical sciences	Satisfactory
pharmaceutical sciences	Satisfactory
social/behavioral/administrative sciences	Satisfactory
clinical sciences	Satisfactory
The content of curricular courses is mapped to Appendix B to assess where specific content foundations are addressed in the curriculum. Gaps in curricular content and inappropriate redundancies identified in the mapping process inform curricular revision.	Satisfactory
The didactic course work provides a rigorous scientific foundation appropriate for the contemporary practice of pharmacy.	Satisfactory
Knowledge, practice skills, and professional attitudes and values are integrated and applied, reinforced, and advanced throughout the didactic and experiential curriculum.	Satisfactory
The biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences are of adequate depth, scope, timeliness, quality, sequence, and emphasis to provide the foundation and support for the intellectual and clinical objectives of the professional degree program and the practice of pharmacy.	Satisfactory
The sciences provide the basis for understanding the development and use of medications and other therapies for the treatment and prevention of disease.	Satisfactory
Courses and other formal learning experiences are coordinated and integrated across disciplines.	Satisfactory
Where instruction is provided by academic units of the university other than the pharmacy program, these areas are developed in accordance with the professional degree program's curricular goals and objectives; and assessment liaison mechanisms ensure effective instructional delivery and achievement of the educational objectives of the program.	N/A

3. College or School's Comments on the Standard

Focused Questions

- The curricular structure and content of all curricular pathways
- A description of the breadth and depth of the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences components of the didactic curriculum, and the strategies utilized to integrate these components
- How the curricular content for all curricular pathways is linked to Appendix B of Standards 2007 through mapping and other techniques and how gaps in curricular content or inappropriate redundancies identified inform curricular revision
- Examples of assessment and documentation of student performance and the attainment of desired core knowledge, skills and values
- Evidence that knowledge, practice skills and professional attitudes and values are integrated, reinforced and advanced throughout the didactic and experiential curriculum
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. The curricular structure and content of all curricular pathways.

The curriculum is structured as a four-year, eight-semester program, including six semesters of foundational and therapeutic courses, and IPPEs scheduled concurrently during the regular academic year. The P4 APPEs are offered over a 12-month period, during which each student must complete six of eight blocks for two semesters of course credit). Students enrolled in dual-degree programs complete the requirements of the second degree either during the summer, by taking a year break from the PharmD program or a combination of the two. The curriculum is aligned with the School's mission and vision statements, provides a strong scientific foundation, with a focus on working with diverse patient populations and developing models for pharmacy practice in the future. The foundational science core courses are taught early in the curriculum and constitute the majority of P1 and P2 units. The clinical sciences are introduced in P1 and P2 and are the focus of P3 and P4.

2. A description of the breadth and depth of the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences components of the didactic curriculum, and the strategies utilized to integrate these components.

The School's faculty is committed to offering an integrated core curriculum. USC was an early innovator when, 30 years ago, the School introduced an interdisciplinary teaching approach integrating clinical pharmacokinetics, pharmacology and biomedicinal chemistry. Faculty members continue to enhance integration of curricular content by developing new courses, collaborating across courses and restructuring current courses when appropriate. Most of the curriculum is team taught; course coordinators, generally one from the basic science faculty (PPSI) and one from the Department of Clinical Pharmacy and Pharmaceutical Economics & Policy, are assigned to courses with either a mixture of scientific and clinical content or primarily in the scientific core but critical for clinical courses

taught later in the curriculum (e.g., biological systems). The Inter-Module Coordinating Council (IMCC), which reports to the Curriculum Committee, oversees the therapeutics courses, reviewing course syllabi, recommending changes to content and ensuring coverage is of sufficient depth and breadth. This committee, which includes faculty and students, meets monthly in addition to an annual working retreat. In the curriculum listing below, the therapeutic series is listed in the clinical sciences; however, a significant portion of each module includes biomedical and pharmaceutical science content. Elective courses include options in all areas of the foundational core. Each student selects six units of electives in P3 and 12 units of electives in P4.

The curricular core includes foundational courses (course credit/units) in the following areas:

1) Biomedical Sciences (20 units)

Biological Systems I and II (4, 6)

Biochemical and Molecular Sites of Drug Action (4)

Molecular Genetics (3)

Immunology (3)

2) Pharmaceutical Sciences (10 units)

Pharmaceutics I and II (4, 3)

Pharmaceutics III (3)

3) Clinical Sciences (57 units plus 36 units APPEs)

Pharmacy Practice and Experiences I, II and III (4, 4, 3)

Self-Care and Non-Prescription Therapies (5)

Therapeutics I-XI (4, 3, 6, 4, 6, 3, 4, 2, 2, 3, 2 = 39 units)

Nutrition (2)

APPEs (Acute Care, Primary Care, Community Practice, Hospital Practice, Electives)

4) Behavioral, Social and Administrative Sciences (15 units)

Health Care Delivery Systems (2)

Pharmacy Literature Analysis and Drug Information (3)

Management within Health Care Organizations (2)

Public Health and Epidemiology (2)

Pharmaceutical Economics and Outcome Studies (3)

Pharmacy Law and Ethics (3)

3. How the curricular content for all curricular pathways is linked to Appendix B of Standards 2007 through mapping and other techniques and how gaps in curricular content or inappropriate redundancies identified inform curricular revision.

The Curriculum Committee recently completed an update to the Appendix B map to the curriculum. In preparation for a curriculum revision, the Curriculum Mapping Subcommittee and the Assessment Committee completed a new map of the curriculum to Appendix B, C and D and the recently revised School program outcomes. The Curriculum Committee uses the mapping information to identify subject-matter gaps, unnecessary redundancy and where too much or too little time is being used for certain areas. In addition to mapping, the School uses feedback from preceptors, faculty and alumni, results from capstone assessments and student feedback to identify gaps and redundancy. Accomplishments include: 1) The School's Curriculum Committee and Assessment Committee made adjustments to course sequencing within the curriculum and made adjustments to course content after reviewing the most recent map and curriculum-quality survey data. 2) the Curriculum Committee, Assessment Committee and faculty have developed revised outcomes for the curriculum. 3) the Curriculum Committee has utilized a new method for curriculum mapping using keyword searching and indexing of course documents. The new curriculum map is interactive. The revised map will be available on-site. 4) ExamSoft has been implemented and will be used by the Curriculum Committee to map assessments to improve curriculum delivery, identify areas of weakness in aggregate performance, and ensure the depth and breadth of assessments match the curriculum plan. To ensure courses remain aligned with the School's outcome objectives, faculty are required to identify on the standard syllabus which program objectives are covered in each course. We anticipate that including this link between courses and program outcomes will help both students and faculty better understand how each course fits into the program plan. Compliance with this syllabus requirement is tracked by the Curriculum Committee, which provides feedback to the faculty member if changes are needed.

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

In addition to the embedded course assessments, student achievement is measured during the capstone course, through curriculum-quality surveys, and from the results of national and state board examinations. The School has also expanded use of electronic student portfolios to track attainment of core knowledge and outcomes/competencies. The portfolio includes opportunities for self-assessment and reflection, allowing students to assess their accomplishments and evaluate how well they have prepared themselves to be competent professionals. Examples of performance documentation will be available in notebooks on site.

5. Evidence that knowledge, practice skills and professional attitudes and values are integrated, reinforced and advanced throughout the didactic and experiential curriculum.

Throughout the four years of study, the curriculum aims to equip students with skills, knowledge and experiences that include communication, critical thinking, problem-solving, professionalism, patient safety, health and wellness, teamwork, calculation skills and information management. For example: 1) many courses require students to deliver oral reports or engage in discussion to enhance communication skills; 2) small-group sessions are conducted (especially in the therapeutics modules) to develop critical-thinking, problem-solving and communication skills by examining challenging situational cases; 3) students are encouraged to participate in professional organizations to strengthen appreciation of current advances in the profession; 4) faculty also participate in professional organizations and serve as role

models (two have served as president of the California Pharmacists Association); 4) students in IPPEs and APPEs are expected to interact with patients and other healthcare professionals and ensure patient safety and understanding regarding medication use; and 5) many courses foster information-seeking and networking skills to help students understand the importance of building team approaches to patient care.

6. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard

The School utilizes assessment data from courses, stakeholders and graduates' performance on national and state board examinations to refine and adjust the curriculum. The School is committed to delivering an effective curriculum that prepares graduates to practice as competent professionals.

7. Any other notable achievements, innovations or quality improvements.

A number of changes have been made to the curriculum since the 2009 accreditation review. Eleven therapeutics modules are now offered (up from eight). The capstone course and its contribution to student and curriculum assessment has led to several improvements, including the redesign of Therapeutics I and II, reorganization of the drug information/literature evaluation content throughout the curriculum and increased use of performance-based assessment (on an objective structured clinical examinations model). The required APPE has been adjusted to assure that the systems-based competencies of **Appendix C** are covered. A new capstone course during P4 provides professional development (conflict resolution, leadership content) and systems of practice content (medication errors, controversies in contemporary practice). The course eventually will include the senior thesis or capstone project, which is currently being developed by the Curriculum Committee.

8. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

Results from the CQS for most areas are similar to national and/or cohort results. In general, recent graduates reported agreement that they were prepared to enter practice (92.6%) and that pharmacy and APPE electives met their needs (87.1%, 90.2% respectively). Question 47 (on whether students felt academically prepared for APPE) results for USC fall between national and cohort results with 87.1% in agreement. Alumni results on whether they were prepared for their first job and whether electives met their needs were more positive than the national results. Given the small number of responses in the Alumni survey, there are no significant differences between the School and national or cohort results.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. The Curriculum Committee has been working with faculty, students and other stakeholders over the last two years to assess the current state of the curriculum in anticipation of a curriculum change for 2015 and beyond. The implementation of a revised curriculum will be monitored carefully by the School. Additionally, the rollout of ExamSoft has produced

mixed reviews by both faculty and students. The School is increasing technical support and training in an effort to optimize its use and will closely monitor progress on effective usage of this system.

University of Southern California / School of Pharmacy

14. Curricular Core - Pharmacy Practice Experiences	
<p>The college or school must provide a continuum of required and elective pharmacy practice experiences throughout the curriculum, from introductory to advanced, of adequate scope, intensity, and duration to support the achievement of the professional competencies presented in Standard 12.</p> <p>The pharmacy practice experiences must integrate, apply, reinforce, and advance the knowledge, skills, attitudes, and values developed through the other components of the curriculum. The objectives for each pharmacy practice experience and the responsibilities of the student, preceptor, and site must be defined. Student performance, nature and extent of patient and health care professional interactions, where applicable, and the attainment of desired outcomes must be documented and assessed.</p> <p>In aggregate, the pharmacy practice experiences must include direct interaction with diverse patient populations in a variety of practice settings and involve collaboration with other health care professionals. Most pharmacy practice experiences must be under the supervision of qualified pharmacist preceptors licensed in the United States.</p>	

2. College or School's Self-Assessment

The college or school provides a continuum of required and elective pharmacy practice experiences throughout the curriculum, from introductory to advanced, of adequate scope, intensity, and duration to support the achievement of the professional competencies presented in Standard 12.	Satisfactory
The pharmacy practice experiences integrate, apply, reinforce, and advance the knowledge, skills, attitudes, and values developed through the other components of the curriculum.	Satisfactory
Pharmacy practice experiences include periods for preparation and guided reflection.	Satisfactory
The objectives for each pharmacy practice experience and the responsibilities of the student, preceptor, and site are defined.	Satisfactory
Goals and outcomes for each pharmacy practice experience are mapped to activities listed in Appendix C to ensure that students' experience will cover, at a minimum, all the listed activities.	Satisfactory
Student performance, nature and extent of patient and health care professional interactions, where applicable, and the attainment of desired outcomes are documented and assessed.	Satisfactory
In aggregate, the pharmacy practice experiences include direct interaction with diverse patient populations in a variety of practice settings and involve collaboration with other health care professionals.	Satisfactory
Most pharmacy practice experiences are under the supervision of qualified pharmacist preceptors licensed in the United States.	Satisfactory
The college or school ensures that all preceptors (especially first-time preceptors prior to assuming their responsibilities) receive orientation regarding the outcomes expected of students and the pedagogical methods that enhance learning, ongoing training, and development.	Satisfactory

A quality assurance procedure is in place that facilitates standardization and consistency of experiences and outcomes while allowing for individualization of instruction, guidance, and remediation by the preceptor based on student needs.	Satisfactory
Students do not receive remuneration for any pharmacy practice experiences (introductory or advanced) for which academic credit is assigned.	Satisfactory
The introductory pharmacy practice experiences involve actual practice experiences in community and institutional settings and permit students, under appropriate supervision and as permitted by practice regulations, to assume direct patient care responsibilities.	Satisfactory
Introductory pharmacy practice experiences account for not less than 300 hours over the first three professional years. The majority of students' time (minimum 150 hours) is balanced between community pharmacy and institutional health system settings.	Satisfactory
The length of the advanced pharmacy practice experiences is not less than 1440 hours (36 weeks) during the last academic year and after all pre-advanced pharmacy practice experience requirements (i.e., introductory pharmacy practice experiences and required core didactic course work) are completed.	Satisfactory
All <u>required</u> advanced pharmacy practice experiences in all program pathways are conducted in the United States or its territories and possessions (including the District of Columbia, Guam, Puerto Rico, and U.S. Virgin Islands).	Satisfactory
Required experiences include primary, acute, chronic, and preventive care among patients of all ages and develop pharmacist-delivered patient care competencies in the following settings: <ul style="list-style-type: none"> • community pharmacy • hospital or health-system pharmacy • ambulatory care • inpatient/acute care general medicine 	Satisfactory
Simulation is used appropriately as a component of introductory pharmacy practice experiences; it does not account for greater than 20% of total introductory pharmacy practice experience time and does not substitute for the hours devoted to actual experiences in community pharmacy and institutional health system settings.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> 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
<input checked="" type="checkbox"/> How, in aggregate, the practice experiences assure that students have direct interactions with diverse patient populations in a variety of health care settings
<input checked="" type="checkbox"/> 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
<input checked="" type="checkbox"/> How the college or school uses simulation in the curriculum
<input checked="" type="checkbox"/> How the college or school establishes objectives and criteria to distinguish introductory from advanced practice experiences.

- How the college or schools assures, measures, and maintains the quality of site used for practice experiences
- How quality improvements are made based on assessment data from practice sites
- How the goals and outcomes for each pharmacy practice experience are mapped to the activities listed in Appendix C of Standards 2007 to ensure that students' experience will cover, at a minimum, all the listed activities
- How the college or school is applying the guidelines for this standard, and the additional guidance provided in Appendix C, in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. 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.

Student performance during APPEs and IPPEs is documented and assessed in E-Value. Each APPE has a general syllabus that lists goals and objectives, and each site/preceptor provides a site-specific syllabus with a description of the site, the site's requirements, grading expectations and required presentations or projects. Each student enrolled in an IPPE or APPE receives a midpoint and a final performance assessment using a rubric in E-Value, leading to the final grade in that rotation, prepared and reviewed with the student by the preceptor. Students also complete assignments and reflections that contribute to the final grade.

Students engage in patient care and interact with healthcare professionals during all core IPPEs and APPEs. Year 4 (P4) students are assigned to six six-week APPEs (1,440 hours). Four of the APPEs are required: community pharmacy, inpatient/acute care general medicine, ambulatory care, and hospital or health-system pharmacy practice. The two remaining six-week APPEs are electives. Each student is required to take two electives; only one elective that does not involve patient care/contact is permitted. Changes to the IPPE program during the last year will increase opportunities for patient contact and interaction with healthcare professionals.

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

The School's patient-care sites are located primarily in the Los Angeles area, which provides ample opportunity for interaction with diverse populations. The School has more than 160 community and clinic pharmacy sites, more than 100 hospital pharmacy sites, and a variety of experiences available in other settings, such as pharmaceutical companies, the Food and Drug Administration, the Centers for Disease Control and Prevention, international sites and managed-care providers. The overwhelming majority of the School's students are assigned to sites in the local area. Students in good standing are permitted to complete rotations in sites outside the local area that are affiliated formally with USC. Medical centers that accommodate a large number of students include: Kaiser Permanente, Los Angeles County+USC Medical Center, Veterans Affairs of Greater Los Angeles, Keck Medical Center of USC and the USC Norris Cancer Hospital. Patients who come to this wide array of community pharmacy sites and hospital facilities represent large, diverse populations from varying ethnic and cultural backgrounds.

3. 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.

Changes to sterile-compounding laws affecting LAC+USC Medical Center resulted in cancelation of the parenteral IPPE during the P2 year and a redesign of the IPPE program. The current IPPE program includes a transitional phase for students who have completed the parenteral IPPE. P3 students complete a primary care IPPE (32 hours) in safety-net clinics affiliated with the School. P2 students complete both a hospital and community IPPE experience (80 hours evenly split), participate in health fairs, receive sterile-compounding training and shadow faculty. Over the next six months, the revised IPPE program will include the required 300 hours as follows: P1 and P2 students will complete both hospital and community IPPEs, totaling 175 hours evenly split, in licensed pharmacies. Health fairs, competency attainments (such as immunizations), elective courses, reflections and embedded training will remain required elements for the first two years. The P3 year will broaden and permit students to complete more advanced experiences in hospital, primary care, community pharmacy or specialty pharmacy practice settings. The P3 requirement will include more hours than the current IPPE program.

4. How the college or school uses simulation in the curriculum.

Approximately 30 hours of the 300 hours dedicated to IPPEs are associated with simulation experiences. These include activities that incorporate patient-encounter exercises (physical- and medication-assessment exercises), including training on procedures such as immunizations, CPR, blood-pressure checks, and cholesterol and glucose testing; electronic medical record cases; and sterile-compounding training (clean room, PAT testing).

5. How the college or school establishes objectives and criteria to distinguish introductory from advanced practice experiences.

During IPPEs, students are closely supervised and engage in patient-care activities consistent with the training they have received. Basic practice skills are observed and practiced. The competencies (immunization, patient counseling, self-care assistance) for an IPPE build the foundation for the APPE. During APPEs, students are expected to perform as a pharmacist-in-training under the supervision of a preceptor. APPE students are expected to make interventions, develop patient-care plans and assume a greater degree of responsibility for patient care. (See **Appendix C and Appendix D** for guidelines.)

6. How the college or schools assures, measures, and maintains the quality of site used for practice experiences.

The director of Experiential Programs and the director of IPPE Programs monitor the quality of the experiences provided at each site and each preceptor's quality in providing those experiences; ensure that the goals and objectives stated in every experiential syllabus are being met; consider student evaluations and preceptor/student communication; and conduct periodic site visits. Review of evaluations completed by preceptors of students and student performance across sites/courses are monitored for consistency and overall outcomes (student board passage rates) are compared. The ratio of preceptors to students is generally 1:1, which allows for close supervision.

7. How quality improvements are made based on assessment data from practice sites.

Preceptor feedback has an impact on maintaining curriculum quality. For example, over the last four years, preceptors reported that students were not as proficient as expected in PK assessments during early APPEs. The therapeutics course was revised to reinforce PK skills and a more rigorous

PK assessment during the capstone course was implemented. The preceptors no longer report this issue. Similarly, the literature-evaluation abilities of students were reported as weak. As a result, the therapeutics courses now include a journal evaluation during each weekly case conference to reinforce these skills. Student evaluations are also a source for quality assurance data. Deficiencies or consistently low scores are discussed with the Curriculum Committee and/or Inter-Module Coordinating Council to generate changes to the curriculum when needed. Information regarding APPE/IPPE sites and preceptors is reviewed by the director of Experiential Programs and staff in the Office of Professional Experience Programs. If any negative evaluations are received, the director speaks with students assigned to the site (evaluations are anonymous) about their experiences to better understand any concerns. The director may also contact the site to inquire about the status of the teaching program. Based on the findings, the director will work with the preceptor/site to improve the conditions or, if the issues are not resolved, discontinue use of the site/preceptor. On-site preceptor-training programs often improve evaluations and increase preceptor engagement. Ensuring that preceptors receive feedback from student evaluations has been a challenge. The move to EMS and then to E-Value was made in part to improve preceptor access to student evaluations/feedback. Despite the fact that preceptors can access their evaluations at any time (following the end of the academic year), preceptor responses on curriculum-quality surveys continue to indicate that getting feedback is an issue. In response to the 2014 surveys, the School has printed and prepared evaluations for mailing to preceptors directly.

8 & 9. How the goals and outcomes for each pharmacy practice experience are mapped to the activities listed in Appendix C of Standards 2007 to ensure that students' experience will cover, at a minimum, all the listed activities. And, How the School is applying the guidelines for this standard, and the additional guidance provided in Appendix C, in order to comply with the intent and expectation of the Standard.

The general syllabi for each of the IPPE/APPE courses include the activities mapped to Appendix C that are required for that course. Since the last site visit, the number of courses has been condensed from more than 35 to less than 10. A smaller number of courses enables a topic, such as a cardiology APPE, to be categorized based on the type of experiences and activities available rather than the disease state/clinic location. For example, PHRD 718, Hospital Pharmacy Practice, focuses on "systems competencies and activities." The course can be offered in a wide variety of hospital practice settings. Each site has the ability to add to the minimum requirements outlined in the general syllabus.

The director of Experiential Programs reviews all APPE site-specific syllabi to ensure that the expected goals and objectives will be met. The director follows the recommendations in the Appendix C guidelines on what is expected from preceptors, as well as the training preceptors should have before working with students. The information in the appendix about content, format recommendations and expected outcomes is addressed in each syllabi for IPPEs and APPEs (both mandatory and elective).

10. Any other notable achievements, innovations or quality improvements.

11. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

The survey results for the School are consistent with national responses. Areas for improvement include ensuring preceptors receive evaluations (as discussed above), and developing additional evaluation

instruments for non-patient-care sites (feedback from preceptors and surveys regarding the evaluation not fitting their rotation/experience).

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. We recognize that our IPPEs must better prepare students for APPEs by providing more patient involvement in a variety of settings.

University of Southern California / School of Pharmacy

15. Assessment and Evaluation of Student Learning and Curricular Effectiveness

As a component of its evaluation plan, the college or school must develop and carry out assessment activities to collect information about the attainment of desired student learning outcomes. The assessment activities must employ a variety of valid and reliable measures systematically and sequentially throughout the professional degree program. The college or school must use the analysis of assessment measures to improve student learning and the achievement of the professional competencies.

The college or school must systematically and sequentially evaluate its curricular structure, content, organization, and outcomes. The college or school must use the analysis of outcome measures for continuous improvement of the curriculum and its delivery.

2. College or School's Self-Assessment

The college or school develops and carries out assessment activities to collect information about the attainment of desired student learning outcomes. The assessment activities employ a variety of valid and reliable measures systematically and sequentially throughout the professional degree program.	Satisfactory
The college or school's evaluation of student learning determines student achievement at defined levels of the professional competencies, in aggregate and at the individual student level	Satisfactory
The college or school uses the analysis of assessment measures to improve student learning and the achievement of the professional competencies.	Satisfactory
The college or school systematically and sequentially evaluates its curricular structure, content, organization, pedagogy, and outcomes.	Satisfactory
The college or school uses the analysis of outcome measures for continuous improvement of the curriculum and its delivery.	Satisfactory
The college or school has developed a system to evaluate curricular effectiveness.	Satisfactory
The college or school ensures the credibility of the degrees it awards and the integrity of student work.	Satisfactory
The college or school has mechanisms to assess and correct underlying causes of ineffective learning experiences.	Satisfactory
The college or school's assessments include measurement of perceived stress in faculty, staff, and students, and evaluate the potential for a negative impact on programmatic outcomes and morale.	Needs Improvement

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> A description of formative and summative assessments and measures used to evaluate teaching and learning methods and curricular effectiveness, including nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable)

- A description of the assessment measures and methods used to evaluate student learning and, achievement at defined levels of the professional competencies and educational outcomes, both in aggregate and at the individual student level
- How achievement of required competencies by all students is assessed and assured on completion of the program
- Comparisons with national data and selected peer-group programs (include a description of the basis for the peer-group selection) and trends over time
- How feedback from the assessments is used to improve student learning, outcomes, and curricular effectiveness
- The mechanisms in place to assess and correct causes of ineffective learning experiences, including the measurement of perceived stress in faculty, staff, and students and evaluation of the potential for a negative impact on programmatic outcomes and morale
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. A description of formative and summative assessments and measures used to evaluate teaching and learning methods and curricular effectiveness, including nontraditional pathway(s) leading to the Doctor of Pharmacy degree (if applicable).

A variety of assessment methods are used throughout the curriculum to measure the attainment of skills and competencies. Didactic courses with a significant knowledge component rely heavily on examinations and discussion-section participation. Experiential courses rely on performance-based rubrics (see appendices). Students are provided with an assessment of their performance after each graded activity and informally through individual meetings as needed. In courses that have small-group sessions, instructors have abundant opportunities to review each student's performance and, if necessary, provide suggestions for improvement. In large classroom courses, students whose performance is below an acceptable standard are contacted by the course coordinator to discuss their individual situation. Summative evaluations for students are reflected in the final grade for the course, which is determined by exam and quiz scores, written reports and oral presentations, class participation and fulfillment of required competencies. A capstone course (Therapeutics Module XI) at the end of P3 has been used over the last eight years to determine readiness for entry into APPEs. Results from capstone assessments have served as valuable tools in evaluating the strengths and weaknesses of the curriculum as well as individual student competencies. The Curriculum Committee has implemented changes in course content, sequencing of subject matter, time allotted to given information and methods in which certain subject matter is taught as a result of the School's observations of student performance on the capstone exam. A subcommittee is evaluating student performance on the exam to further determine the structure and content of subsequent capstone exams, minimum passage rate and how to effectively remediate students who perform poorly. Curriculum-wide formative assessment focus groups are used in courses where potential problems exist and during times of major curricular change

to assess implementation and monitor progress. Last spring a formative assessment focus group series was conducted for all five P1 courses in anticipation of changes to the curriculum.

2. A description of the assessment measures and methods used to evaluate student learning and achievement at defined levels of the professional competencies and educational outcomes, both in aggregate and at the individual student level.

Embedded course assessments provide both individual and aggregate assessment of learning. Over the last 12 months, the School has moved from standalone exams and LXR testing software to ExamSoft, which has the capacity for measuring attainment of learning objectives, professional competencies, and individual and aggregate performance. ExamSoft's reporting features provide students with significantly better feedback than they previously received. Using exam technology and item banking enables the Curriculum Committee and faculty to evaluate learning in courses/content over time, and is used to improve teaching, identify areas of individual student weakness and ascertain curricular areas that need to be revisited. As previously mentioned in Standard 13, faculty and students have registered usage problems with ExamSoft. For example, there have been issues with students taking exams on older laptops and general ease of use has been disputed. The School is exploring ways to make ExamSoft a more accessible and efficient tool.

All courses in the curriculum measure student achievement with a combination of formative and summative evaluation methods, including midterm and final exams, in-class and take-home quizzes, written assignments, performance during discussion sections, oral presentations and team-based learning.

A capstone course with several assessments is required prior to entering APPEs. The course includes content updates (topics selected based on current practice changes), assessment of proficiency in performing calculations and pK assessments, a written exam based on appendices B and D, and a performance-based assessment (objective structured clinical examination) based on appendices A and D. Student performance is evaluated individually and in aggregate. The Curriculum Committee and Inter-Module Coordinating Council use the aggregate data for curriculum augmentation when needed.

APPE teaching is evaluated by students using rubrics within E*Value. The rubric is mapped to the overarching goals of the program. Students are also required to complete a competency form prior to graduation. The competency form includes basic practice abilities in hospital and community settings. Students may complete individual competencies at any point during their IPPEs/APPEs, and may also complete competencies through outside practical experiences. Students who have completed the community competencies prior to the community practice APPE are permitted to select from a broader range of sites for the rotation. Students lacking in the competencies are assigned to pharmacies that can provide the full range of practice experiences to complete the competencies.

3. How achievement of required competencies by all students is assessed and assured on completion of the program.

The School closely follows graduates' performance on board exams, primarily the California Practice Standards and Jurisprudence Examination but also the North American Pharmacist Licensure Examination. The School's graduates consistently earn top scores in California and nationally. Graduates' self-assessments on AACP curriculum-quality surveys are reviewed annually by the faculty and discussed at the annual Curriculum Committee retreat. Results from faculty, preceptor and alumni surveys are also reviewed.

During APPEs, evaluations of students by preceptors are monitored closely. Students must demonstrate that they have satisfied all competencies associated with these mandatory courses by receiving a “credit” grade. At each of its meetings, the Curriculum Committee reviews any student performance issues and takes corrective action as appropriate. Pre-APPE competency attainment is measured by embedded course assessments (see above) and during the capstone course. The capstone course is graded as “credit/no credit”; students must pass every competency assessment to receive credit for the course. One or two students each semester must remediate for specific areas of competency, but all students have passed after review and remediation.

4. Comparisons with national data and selected peer-group programs (include a description of the basis for the peer-group selection) and trends over time.

In curriculum-quality and other surveys, the School compares favorably to national and peer-group programs in most areas. The assessment by USC pharmacy faculty that the School uses programmatic assessment data to improve the curriculum was lower than for the national comparison group. The Assessment Committee was recently restructured to address this perception and broader reporting of how assessment data is utilized is now underway. Preceptors gave lower-than-national responses about their awareness of the mechanism to provide feedback to the School regarding the PharmD curriculum. A plan to increase communication with preceptors and engage them in School-wide curriculum discussions is now in place, and discussion of the process will be included in preceptor manuals and discussed at the annual preceptor meeting. Preceptors also gave lower-than-national responses regarding the assessment tools provided to them for their sites to measure student performance, an issue that has been raised before by preceptors primarily offering non-traditional experiences or APPEs that do not involve patient care. The Office of Professional Experience Programs is investigating different assessments for those experiences. Alumni gave a lower-than-national response regarding the School having solicited their input/feedback since their graduation for programmatic improvement. As with the preceptor results, the School needs to improve communication with alumni. Of note, the response to the online alumni survey is lower than the response when surveys were sent using postal mail. The Assessment Committee is considering using a postal mail survey in the upcoming year to try to improve communication and gather broader feedback from alumni.

5. How feedback from the assessments is used to improve student learning, outcomes, and curricular effectiveness.

The Curriculum Committee routinely reviews assessments and course-performance information across the curriculum, and makes appropriate adjustments. Changes to courses’ prerequisites, units, contact time and coverage of subject matter as well as proper placement of content or courses in the curriculum, have been made as a result of committee review. At its annual retreat, the Curriculum Committee discusses assessment information and reflects on the prior year. The retreat regularly generates proposals for changes and improvements. Minor changes are made with approval from the Curriculum Committee alone or with approval of the Pharmacy Faculty Council Executive Board. More significant changes are discussed and voted on at Pharmacy Faculty Council meetings. Discussion about the curriculum and a report from the Curriculum Committee to the full faculty occurs every two years at the faculty retreat. During the most recent retreat, a “game show” format was used to highlight innovative active-learning methods in use by the faculty (e.g., team-based learning, reflective writing, group work, case studies). Technological changes, such as ExamSoft, video-capturing lectures, Blackboard courseware and the “clicker system,” have been presented at the retreat in past years. The retreats include a broad range of stakeholders, including PharmD and graduate students, alumni, preceptors,

faculty and members of support organizations (Board of Councilors, Alumni Board, QSAD). Recent actions have included an updated curriculum-mapping project and an initiative to improve the clarity of vertical “threads” between courses.

6. The mechanisms in place to assess and correct causes of ineffective learning experiences, including the measurement of perceived stress in faculty, staff, and students and evaluation of the potential for a negative impact on programmatic outcomes and morale.

Ineffective learning experiences are identified by routine monitoring of student performance on embedded course assessments; curriculum-quality survey data from students, preceptors and faculty; and course and faculty evaluations conducted at the end of each term using CoursEval. The Curriculum Committee, the dean and the chair of the Pharmacy Faculty Executive Committee review reports and determine necessary adjustments. Student focus groups and reports from student members of School committees are also used to identify “stress” in the School. Office of Student Affairs staff and the staff of the professional programs have significant face-to-face contact with students and regularly provide input to their directors when possible student/faculty stress is identified (see appendices).

7. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

Based on review/analysis from student and course evaluations, survey information, and performance on national and state board examinations, the School is engaged in continuous quality assessment of student learning and curriculum effectiveness. A large percentage of the assessment practices employed within the School are conducted at a “local” level (course, faculty member, committee) with results/ solutions communicated back to the faculty as a whole. The “local” approach facilitates more rapid change than a central, “top-down” approach.

8. Any other notable achievements, innovations or quality improvements.

A major notable achievement has been developing a significant variety of APPEs in safety-net clinics serving underserved patients, and at Kaiser Permanente and Veterans Affairs clinics. All students in P3 complete a primary care IPPE, primarily in the safety-net clinics. The School has expanded the utilization of student portfolios during IPPEs and APPEs. Students, faculty and preceptors are encouraged to use the portfolios to assess accomplishments and monitor progress toward completion of the competencies on a longitudinal basis. The student portfolio is currently being transitioned from paper to electronic format utilizing E*Value.

9. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

Information regarding chart data from the survey questions posed for this standard is discussed in item 4, above.

4. College or School's Final Self-Evaluation

<input type="checkbox"/> Compliant	<input checked="" type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant with monitoring. At present, the Curriculum Committee, under the leadership of Dr. Ian Haworth and working with the faculty and the Assessment Committee, is preparing for a major curriculum change based on curriculum mapping, upcoming changes to ACPE standards and feedback from multiple stakeholders. The implementation of the revised curriculum is expected in fall 2015 for P1. As we transform curriculum, we recognize the need to assess stress among faculty, staff and students and to proactively evaluate and address it.

University of Southern California / School of Pharmacy

16. Organization of Student Services
The college or school must have an organizational element(s) devoted to student services. The administrative officer responsible for this organizational element must oversee and coordinate the student services of the college or school.

2. College or School's Self-Assessment

The college or school has an organizational element(s) devoted to student services.	Satisfactory
The organizational element(s) devoted to student services has an administrative officer responsible for overseeing and coordinating them.	Satisfactory
The budget assigned to student services is sufficient to provide needed services.	Satisfactory
The college or school has an ordered, accurate, and secure system of student records which are confidential and maintained in compliance with the Family Educational Rights and Privacy Act (FERPA).	Satisfactory
Student services personnel are knowledgeable regarding FERPA law and its requirements.	Satisfactory
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, e.g., residencies, fellowships, and graduate school.	Satisfactory
The college or school offers access to adequate health and counseling services for students. Appropriate immunization standards exist, along with the means to ensure that such standards are satisfied.	Satisfactory
The college or school has policies in place so that students who have off-campus classes or pharmacy practice experiences fully understand their insurance coverage and where and how to access health and counseling services.	Satisfactory
The college or school has a policy on student services, including admissions and progression, that ensures nondiscrimination as defined by state and federal laws and regulations, such as on the basis of race, religion, gender, lifestyle, sexual orientation, national origin, or disability.	Satisfactory
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, counseling).	Satisfactory

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> A description of 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, counseling)
<input checked="" type="checkbox"/> A description of the sections of the student handbook that deal with specific requirements of the standard and guidelines

- 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
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACCP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. A description of 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, counseling).

The School of Pharmacy's Student Services is under the leadership of the associate dean for Student/Faculty Affairs and Admission. The Student Services staff is headed by the director of Admission and Student Affairs, and is comprised of one adviser/recruitment coordinator, three admissions counselors and two financial aid counselors.

The Office of Admission and Student Affairs maintains all records of applications and admissions documents received, grades for both undergraduates and professional education program students, financial aid information, certain health records, student grievances, Scholarship Standard Committee decisions regarding academic standing and information pertaining to students requiring special accommodations based upon disability determinations. All records are maintained as confidential in compliance with the Family Educational Rights and Privacy Act (FERPA). Student Services personnel are knowledgeable regarding FERPA and its applications. The duties of the support staff in the Office of Admission and Student Affairs also include recruitment, admissions evaluations, course registration, pre-financial aid counseling, financial packets, financial aid advisement for settlement of fees, coordination and maintenance of academic and financial records, coordination of graduation requirements, creation and maintenance of *The Pharmacy Student Bulletin of Academic Policies & Procedures*, and brochures and recruitment materials. The staff also serves as liaison to the University's committees and administrative departments that have direct impact on student progress in the pharmacy program.

Tutorial services are provided through the office of the assistant dean for Curriculum and Assessment.

Other services offered to students by the University include housing accommodations, health services through the Student Health Center, and evaluation and accommodations for students with disabilities. The School has only one campus and one PharmD degree pathway. Students in a dual-degree program with PharmD have equal access to all student services.

2. A description of the sections of the student handbook that deal with specific requirements of the standard and guidelines.

The student orientation handbook is distributed to all incoming students during the three-day orientation. It, and the School and/or University websites, contains descriptions of the curriculum, student

organizations and governance, career options and overview, information about the Student Health Center and its services, student gym and other facilities. The orientation schedule includes presentations by the Student Health Center, Student Counseling Center, insurance services, campus security, financial aid and dual/joint degree programs. A curriculum overview, including presentation of professional outcomes, introduction to internship and licensure, time management and study tips, is conducted by the assistant dean for Curriculum and Assessment. Incoming students are also provided electronically with information on financial aid and health services.

A copy of *The Pharmacy Student Bulletin of Academic Policies & Procedures* is provided to all students at the orientation. It includes:

Technical Standards

Students with Disabilities

Academic Policies & Procedures

Policy Regarding Missed Examinations & Quizzes

The Student Honor System

Student Evaluation Dispute Resolution Policy

Student Grievance Procedures

Throughout the curriculum, courses include sessions on pharmacy career options (APhA Pathway program), residency and fellowship planning, and CV and interviewing skills. In addition to formal class sessions, the residency and fellowship programs and student organizations hold workshops throughout the year to assist students with post-graduate education and training opportunities.

3. 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.

The School provides all incoming students with individual guidance, academic advising, career-pathway information including post-graduate residency and research programs, special personalized counseling, and information about where students can get help with personal health, emotional issues and disability matters. The Student Services financial aid counselors gather, interpret and provide information on federal, state and University financial aid policies and sources, which are provided to applicants as well as currently enrolled students. In addition, the counselors evaluate financial aid documents to determine eligibility for funding for need-based loans and scholarships; compile and input data according to University guidelines for disbursement into student accounts; analyze accounts for student refunds and/or fund returns for account adjustments; maintain an electronic database of financial aid recipients; share responsibility for institutional reporting of financial aid distributions; and maintain the financial aid website. The Student Services adviser/recruitment coordinator provides academic counseling to prospective students and their parents according to the guidelines established by the University and the School. The recruitment coordinator also provides academic advising based on career pathways.

4. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The School works with every student to ensure that the above services are made available, and helps students take the necessary steps to acquire any services needed. The School takes pride in the fact that, through advisement and counseling, it cares for each and every student's financial, health, tutoring, housing and disability needs. Both the School and University are well equipped to meet the individual needs of each student.

5. Any other notable achievements, innovations or quality improvements.

The director of Admission and Student Affairs works diligently to ensure that students have the best student loan rate available.

6. Interpretation of the data from the applicable AACPS standardized survey questions, especially notable differences from national or peer group norms.

The responses to the CQS indicate the student level of satisfaction with student services at USC is similar to or above the national data pool for most items. USC students have a significantly higher rate of "did not use" for many services, which when taken into consideration skews the data considerably. A low number of students (10%) reported disagreement that advising met their needs. In the area of career planning, 32.5% of student indicated they did not use the service and approximately 20% disagreed that career planning and guidance met their needs. This may reflect the increased difficulty faced by new graduates in obtaining entry-level positions nationally and in the competitive Southern California market. The School may need to strengthen the career planning support in the curriculum. For the areas of financial advising, student health services and information about post-graduate training opportunities, the CSQ results indicate our graduates are more satisfied with those services than the national or cohort populations. For question 81, common areas for students, the CQS indicates that our students are less satisfied than national or cohort groups. The School is aware of the need for more student social and study spaces. The opening of a new campus fitness center provides some but not enough needed space. A Health Sciences Education Building that would include social, inter-professional and teaching space was under discussion but has not received approval from the University.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

USC's graduating pharmacy students provided strongly agreed and agreed responses to survey questions at a rate equal to/higher than the national pharmacy graduating student response regarding organization of student services. Assessment of student health and wellness services, timely reporting of news events and welcoming of students with diverse backgrounds were in the 90th percentile range for strongly agreeing/ agreeing. Even though the School received high ratings on tutorial services, career planning and guidance and academic advisement, the School recognizes that more should be done to enhance these student services.

University of Southern California / School of Pharmacy

17. Admission Criteria, Policies, and Procedures	
<p>The college or school must produce and make available to students and prospective students criteria, policies, and procedures for admission to the professional degree program. Admission materials must clearly state academic expectations, required communication skills, types of personal history disclosures that may be required, and professional standards for graduation. As a component of its evaluation plan, the college or school must regularly assess the criteria, policies, and procedures to ensure the selection of students who have the potential for academic success in the professional degree program and the ability to achieve the professional competencies and to practice in culturally diverse environments.</p> <p>Student enrollment must be managed in alignment with available physical, financial, faculty, staff, practice site, preceptor, and administrative resources. The dean and a duly constituted committee of the college or school must share the final responsibility for enrollment and selection of students.</p>	

2. College or School's Self-Assessment

The college or school produces and makes criteria, policies, and procedures for admission to the professional degree program available to students and prospective students.	Satisfactory
Admission materials clearly state academic expectations, required communication skills, types of personal history disclosures that may be required, and professional technical standards for graduation.	Satisfactory
As a component of its evaluation plan, the college or school regularly assesses the criteria, policies, and procedures to ensure the selection of students who have the potential for academic success in the professional degree program, the ability to achieve the professional competencies, and the disposition to practice in culturally diverse environments.	Satisfactory
Student enrollment is managed in alignment with available physical, financial, faculty, staff, practice site, preceptor, and administrative resources.	Satisfactory
The dean and a duly constituted committee of the college or school share the final responsibility for enrollment and selection of students.	Satisfactory
Written and verbal communication skills are assessed for student admissions in a standardized manner.	Satisfactory
Interviews are structured to consistently address key admission criteria for each applicant.	Satisfactory
Interviewers have appropriate credentials and are trained in successful interview strategies and techniques.	Satisfactory
Evaluation of professional attitudes and behaviors is a component of the student selection process.	Satisfactory
The college or school develops and employs admission criteria that set performance expectations for admission tests, evaluations, and interviews used in selecting students who have the potential for success in the professional degree program and the profession.	Satisfactory
The admission evaluation of students is documented and records are maintained by the college or school.	Satisfactory

Admission criteria, policies, and procedures are not compromised regardless of the size and quality of the applicant pool.	Satisfactory
In accordance with United States Department of Education regulations, the college or school has a process in place through which the college or school establishes that the student who registers in a distance education course or program is the same student who participates in and completes all course or program requirements and receives academic credit.	N/A
Consultation with ACPE occurs at least six months before recruiting students into new pathways or programs.	N/A
The college or school ensures that early assurance students are at least as well qualified as students accepted for direct entry into the first professional year. Early assurance agreements and policies allow the college or school to manage student enrollment in alignment with physical, financial, faculty, staff, practice site, preceptor, and administrative resources.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> Admissions and enrollment Information, highlighting how specific requirements of the standards and guidelines are met, including those for early admission agreements or policies, if applicable
<input checked="" type="checkbox"/> How admission evaluations of students is documented and how records are maintained.
<input checked="" type="checkbox"/> A description of the college or school's recruitment methods
<input checked="" type="checkbox"/> A description of methods used to assess verbal and written communication skills of applicants to the program
<input checked="" type="checkbox"/> How enrollment is managed in alignment with available physical, financial, staff, faculty, practice site, preceptor and administrative resources
<input checked="" type="checkbox"/> How curricular outcomes data are correlated with admissions data
<input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements
<input checked="" type="checkbox"/> Interpretation of the data from the applicable AACCP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. Admissions and enrollment information, highlighting how specific requirements of the standards and guidelines are met, including those for early admission agreements or policies, if applicable.

Admissions requirements, application procedures and course equivalency articulations are readily available on our website. A supplemental application is required and includes a detailed outline of the essential characteristics and abilities required for the PharmD program. Applicants must disclose any criminal convictions and complete a background and fingerprinting check prior to matriculation in order to be placed at experiential sites and to obtain licensure in California.

Admissions decisions are made by the Admissions Committee, composed of elected representatives from both departments and an elected chair. This committee is charged with developing and assessing admissions criteria and making final admissions decisions. A newly formed faculty subcommittee, charged with assessment related to admissions criteria, policies and procedures, meets on a regular basis and is expanding upon and implementing our assessment plan to ensure that admission criteria facilitate success. The Admissions Committee regularly reports to the Pharmacy Faculty Council, associate dean of Academic Affairs, executive vice dean and dean. Faculty also engage in the admissions process by participating in interviews and/or conducting file reviews.

2. How admission evaluations of students is documented and how records are maintained.

Admissions data is captured, accessed and stored via the online database WebAdmit. All information from PharmCAS applications is accessible through this website, and the Admissions Committee, staff and faculty file reviewers input additional evaluation scores. Candidates complete the School's supplemental application, which is uploaded and stored in the online database ApplyYourself, and is accessed and evaluated by the Admissions Committee, staff and faculty file reviewers. Interview scores and performance on the required essay are collected on interview day and kept as hard copies. Paper files are retained for one year for applicants who were not accepted, and until graduation for applicants who matriculate. All admissions data is stored in a database developed in-house and maintained on the School's server.

3. A description of the college or school's recruitment methods.

Admissions Committee members visit high schools and colleges within and outside the state to provide information regarding the profession and pharmacy education. Information is sent to college and university student advisers about our programs. Recruitment brochures are provided to potential candidates upon request, and information sessions are held periodically at the School that enable potential candidates to meet faculty and students. Admissions faculty and staff also engage with pre-pharmacy societies of various universities. Applications from USC undergraduates are encouraged via the Trojan Admission Pre-Pharmacy Program.

4. A description of methods used to assess verbal and written communication skills of applicants to the program.

Candidates' verbal communication skills are evaluated by both a faculty and student interviewer using a standardized form. Faculty participating in the admissions process are trained via online videos to follow a standardized format. Students also receive training in live sessions that incorporate the training video. Written communication skills are evaluated by review of the PharmCAS application as well as the School's supplemental application by faculty file reviewers. During interview day, candidates are required to write a timed position essay addressing a contemporary healthcare issue. Critical thinking, composition and grammar skills are evaluated by trained essay readers.

5. How enrollment is managed in alignment with available physical, financial, staff, faculty, practice site, preceptor and administrative resources.

The School can accommodate an incoming class of 200 students each year. In 2013 the School's two major lecture halls were remodeled to accommodate 200 students at any given time. The School is well endowed financially based on tuition, University support, grant and research funding, and donor support. At present, staffing appears sufficient to manage day-to-day operations. While we have lost a number

of faculty through death, retirement or job transfer, we are making every effort to fill the necessary positions. Over the past three years, the School's administration has expanded to ensure our many programs are carried out successfully. The School has a large network of experiential sites and adjunct faculty throughout Southern California that provide excellent learning experiences for our students.

6. How curricular outcomes data are correlated with admissions data.

The School, through various committees, including admissions, curriculum and scholarship standards, evaluates the academic program and makes necessary modifications. Over the last four years, the Admissions Committee has worked to revise the admissions process, guided by student outcomes data. Many of the changes implemented are described under focus questions 7 and 8 and in the Admissions Process Revisions Timeline appendix. Recent revisions include implementation of full file reviews by faculty, an increased emphasis on the evaluation of critical thinking, redesign of the file review and interview process, and distribution of learning materials to incoming students prior to starting the PharmD program. At the Faculty/Student Retreat in May 2014, all prerequisites were reviewed and, using curricular outcomes data, were revised to eliminate or alter many prerequisites. The Admissions Assessment Subcommittee periodically reviews admissions data for specific students based on curricular outcomes and performance data to determine whether admissions criteria should be revised or adjusted.

7. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

Admissions is a multifaceted, ever-evolving process, guided by our Strategic Plan, student outcomes data and the current healthcare climate. Efforts are consistently made to examine the appropriateness of admissions criteria and to implement revisions to reflect the mission of the School and the profession as a whole, as well as to incorporate predictors of success in the PharmD program.

8. Any other notable achievements, innovations or quality improvements.

Since the development of the School's 2011 Strategic Plan, the Admissions Committee and staff have made significant changes to the admissions process, as outlined above. This process has been streamlined and standardized through online databases and a rubric developed and validated by the Admissions Committee (see File Review Rubric Revised 10-29 in appendices). Attendees at the 2014 Faculty/Student Retreat brainstormed about desired characteristics of incoming students, then faculty approved selected additions (see USC School of Pharmacy Desired Characteristics for Admission in appendices). All elements of the admissions process, from the file-review rubric to the interview-scoring form (refer to 2014-2015 Interview Scoring Form A), have been designed to evaluate a candidate based on the presence of these characteristics. Another change includes moving interview days to weekdays to allow more faculty participation. To enhance recruitment, interview days were revamped to include a luncheon for candidates, a small-group discussion session with current students and faculty, and a formal tour. Faculty and administration agreed to make participation in the admissions process mandatory for all faculty in the form of conducting file reviews, interviews or a combination of the two. A student admissions committee was also formed to ensure consistency of participation among current students.

9. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

The major survey question asked of 2014 USC graduating pharmacy students was whether the School's admissions process was well organized. Results showed that 92% of respondents strongly agreed or agreed. This was slightly higher than the national response (91.3%). The survey also showed that 4.9% of respondents either disagreed or strongly disagreed with that statement, which was lower than the national result of 6.4%. The number of respondents who chose "strongly disagree" increased from the 2012 and 2013 results. This may be due to the fact that these respondents entered the PharmD program in 2010, when the School was just beginning revision of the admissions process, which may have appeared to be less organized at that time. The School will continue to assess changes to the admissions process.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. We face similar challenges as most other pharmacy schools. Our applicant pool over the last five years has dropped from 1,400 to 1,100, perhaps due to the increase in California pharmacy schools. Five to eight additional new schools will further increase competition.

University of Southern California / School of Pharmacy

18. Transfer of Credits and Waiver of Requisites for Admission with Advanced Standing	
The college or school must produce and make available to students and prospective students transfer credit and course-waiver policies, based on rational procedures and defensible assessments.	

2. College or School's Self-Assessment

The college or school produces transfer credit and course-waiver policies, based on rational procedures and defensible assessments and makes that information available to students and prospective students.	Satisfactory
The college or school implements policies and procedures for the evaluation of the equivalency of educational courses (preprofessional or professional) prior to admission or transfer to the professional degree program.	Satisfactory
Requisites are only waived based upon an educationally sound assessment of the professional competencies (as set forth in Standard 12) that have been achieved through continuing pharmacy education, other postgraduate education and training, and previous pharmacy practice experience.	Satisfactory
The college or school has established and implemented policies and procedures for students who request to transfer credits or who wish to change from one program pathway to another.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/> 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	
<input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard	
<input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements	

(School comments begin here)

1. 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.

The School has no transfer students, no international students and no students who have been admitted with advanced standing. The School's [policy](#), referenced on its website, states that transfer students are considered on a seat-available basis. However, in practice, we do not accept transfer students. Only one transfer student has been admitted in the last two decades. The decision was made many years ago to keep the policy open for flexibility in the future. The same goes for admitting students with advanced standing status, and the policy is described on the School's [website](#) (see Appendix 18.2.1). Since we

have not had any transfer students in more than a decade, no assessment of the correlation between the criteria in the transfer policy and success in the program is available.

2. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

As noted above, the policies are available on the School's website.

3. Any other notable achievements, innovations or quality improvements.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. Since we do not accept transfer students, international students or candidates with advanced standing, minimal monitoring is required. These policies will be reconsidered and revised periodically as necessary.

University of Southern California / School of Pharmacy

19. Progression of Students	
The college or school must produce and make available to students and prospective students criteria, policies, and procedures for academic progression, academic probation, remediation, missed course work or credit, dismissal, readmission, rights to due process, and appeal mechanisms.	

2. College or School's Self-Assessment

The college or school produces and makes available to students and prospective students criteria, policies, and procedures for academic progression, academic probation, remediation, missed course work or credit, dismissal, readmission, rights to due process, and appeal mechanisms.	Satisfactory
The college or school's system of monitoring student performance, based on formative assessments of learning outcomes provides for the early detection of academic difficulty.	Satisfactory
The college or school maintains a record of student retention, attrition, and on-time graduation, identifies and analyzes trends, and makes programmatic adjustments as needed.	Satisfactory
The college or school ensures that all students have comparable access to individualized student services such as comprehensive academic success counseling, tutoring and faculty advising.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/> How student matriculation, progression and graduation rates correlate to admission and transfer policies and the college or school's mission <input checked="" type="checkbox"/> The academic counseling and/or student support staff available to work with students seeking to retain or regain good academic standing, and how extensively they are utilized <input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard <input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements <input checked="" type="checkbox"/> Interpretation of the data from the applicable AACCP standardized survey questions, especially notable differences from national or peer group norms	

(School comments begin here)

1. How student matriculation, progression and graduation rates correlate to admission and transfer policies and the college or school’s mission.

In keeping with the School’s mission of “leading other schools of pharmacy by demonstrating and shaping the future of pharmacy practice, integrative research and educational excellence,” the students selected for our program must be not only academically qualified but must meet additional criteria. The

faculty identified the following characteristics as important for student success and selection into our program and redesigned the admissions process to include direct assessment of these characteristics: scholarship, leadership, interpersonal skills, communication skills, dedication/service, knowledge of the profession and problem-solving skills. Assessment of these changes is ongoing. The School maintains a low overall attrition rate for students entering our program, and a high percentage of students offered admission enter the program each year. The School utilizes PharmCAS and WebAdmit and reviews Applicant Decision Reports annually to assess the matriculation patterns of accepted students. Despite a large increase in new pharmacy schools opening in California, the rate of accepted offers remains high. Student matriculation, progression through the curriculum and on-time graduation rates are closely followed by the Curriculum, Admissions and Scholarship Standards committees. At the end of each term, admissions and progression files of students with poor academic performance are evaluated. Any factors that may be contributing to poor academic outcomes are communicated to the responsible faculty committee for action. For example, in 2011, faculty members noted that students in the P1 year were experiencing academic difficulty due to excessive time commitments required to join certain student organizations. The faculty instituted policies to restrict the time commitment and delay the organizations' recruitment period until new students acclimate to the program. Assessment of the overall program is conducted at the end of each year and has indicated a reduction in the number of students disqualified in the first semester. The on-time graduation rate for our program is higher than the national average, and the number of academic disqualifications is lower than the national average, indicating that our matriculation and progression efforts are successful.

The on-time graduation rate for the Class of 2014:

- 189 students matriculated
- 172 students graduated from the four-year program in 2014 (94.5%)
- 4 students withdrew from the program for personal reasons*
- 5 students were academically disqualified
- 5 students experienced academic delays (usually a year behind)
- 3 students requested a leave of absence for personal reasons*

*excluded from on-time graduation calculations

The School has not accepted transfer students for at least a decade.

2. The academic counseling and/or student support staff available to work with students seeking to retain or regain good academic standing, and how extensively they are utilized.

Academic counseling and student support are provided by the faculty and coordinated through the Student Affairs Office. Student tutoring is available for those experiencing low academic performance. Academically struggling students are first encouraged to seek support directly from course faculty and teaching assistants, and, if additional tutoring is required, a Rho Chi student tutor is made available. In addition to tutoring assistance, students are connected to resources for study help ([SuccessTypes Medical Education Site](#), [AccessPharmacy learning tools](#), [APA Pharmacy Library](#)). Each year, 5-7% of first-year students utilize academic support services. The number of students seeking academic support in subsequent years (P2, P3, P4) is significantly lower. Students on academic contracts are required to

meet with the assistant dean for Curriculum and Assessment for study help and tutor referral. To reduce the likelihood of poor first-year outcomes, the associate dean for Student/Faculty Affairs and Admission coordinates with course coordinators and mentors to identify and offer assistance to students. Students are assigned faculty mentors during the first year; each mentor is assigned 10-15 students. Faculty mentors are encouraged to contact students periodically to monitor their progression in the program. All P1 course coordinators provide regular reports about any students performing below passing level to the associate dean for Student/Faculty Affairs and Admissions, who then notifies the assigned faculty mentor of the student’s academic difficulties. The mentor then meets with the student to provide support and referrals. Since institution of the early identification process, the attrition rate associated with failing grades in the first year has been greatly reduced. The attrition rate in the second and third years of the program is extremely low. Faculty mentor support is available throughout the entire program. Students in the P4 year are monitored by the director of Experiential Programs and referred for counseling or academic support as needed. Students with a history of academic difficulties are scheduled for APPEs in the local area to ensure that support is readily available.

3. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The School is proactive in identifying student issues related to admission and progression. We have monitored the success of the new policies and practices implemented over the last several years, including the process for admission in relation to student success and changes to the student advising process and scheduling during the P1 year. Resources relating to policies and support for students are [available on the School’s website](#).

4. Any other notable achievements, innovations or quality improvements.

A School-wide, three-day stakeholder retreat is conducted every two years, providing an environment that promotes interaction and engagement. The retreat agenda includes critical issues, curricular matters, admissions policies and student concerns. Stakeholders attending include faculty, alumni, graduate and PharmD students, faculty and preceptors. Proposals are considered and voted on at the retreat. For example, at the 2012 and 2014 retreats, pre-pharmacy courses were reevaluated, the grading system for courses and APPEs was revised, changes to first-year courses were considered and APPEs were restructured to better streamline the flow of courses.

5. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

The faculty survey indicated that the faculty perception of the management of poor academic performance of students is slightly lower than the national average. This may reflect that some pharmacy faculty, especially those not directly involved with course management, may not be aware of the full range of mentoring and tutorial programs available for our students. The School’s administration must ensure that all faculty are made aware of this type of programming. The surveys indicated that the program attrition rate and the number of academic dismissals are better than the national average, results that reinforce the effectiveness of the School’s academic and progression policies.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring.

University of Southern California / School of Pharmacy

20. Student Complaints Policy

The college or school must produce and make available to students a complaints policy that includes procedures to be followed in the event of a written complaint related to one of the accreditation standards, student rights to due process, and appeal mechanisms. Students must receive information on how they can submit a complaint to ACPE for unresolved issues on a complaint related to the accreditation standards.

2. College or School's Self-Assessment

The college or school produces and makes available to students a complaints policy that includes procedures to be followed in the event of a written complaint related to one of the accreditation standards, student rights to due process, and appeal mechanisms.	Satisfactory
Students receive information on how they can submit a complaint to ACPE for unresolved issues on a complaint related to the accreditation standards.	Satisfactory
The college or school includes information about the complaint policy during student orientation.	Satisfactory
The college or school maintains a chronological record of student complaints related to matters covered by the accreditation standards and allows inspection of the records during on-site evaluation visits by ACPE.	Satisfactory
The college or school informs ACPE during an on-site evaluation if any of the student complaints related to the accreditation standards have led to legal proceedings, and the outcomes of such proceedings.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/>	How the complaint policy is communicated to students
<input checked="" type="checkbox"/>	The number of complaints since the last accreditation visit and the nature of their resolution
<input checked="" type="checkbox"/>	How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/>	Any other notable achievements, innovations or quality improvements
<input checked="" type="checkbox"/>	Interpretation of the data from the applicable AACCP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. How the complaint policy is communicated to students.

The “Student Evaluation Dispute Resolution Policy” and “Student Grievance Procedures Policy” are both incorporated into the yearly [Pharmacy Student Bulletin of Academic Policies & Procedures](#) (see **Appendix 19.3.1**) The bulletin is provided to every student at the beginning of the academic year. Its highlights, including the portions regarding student evaluation disputes and grievance procedures, are discussed at length at the orientation for first-year pharmacy students.

Any complaint registered by a student who believes he or she has been treated by a fellow student, instructor, staff member or administrator in an arbitrary, capricious or discriminatory manner that fundamentally deprives that student of an alleged or perceived right, as written within the policies of the University, is investigated and dealt with in a timely manner to ensure that the student is provided with the appropriate protections.

The School's Student Complaint Policy has both an "informal resolution" section and a more detailed "formal resolution" section. With an informal resolution, either a department chair or the associate dean for Student/Faculty Affairs attempts to bring the student and the party whom the complaint is registered against together to resolve the conflict. If a resolution cannot be achieved under an informal attempt, then the student may pursue a formal proceeding.

Under the formal resolution procedure:

- The student must bring the complaint in writing within 30 days of the occurrence to the office of the associate dean for Faculty/Student Affairs.
- The written complaint must provide identification of the person or persons the complaint is brought against and the person or persons bringing the complaint; details of the complaint; the date and location of the subject occurrence; any and all steps taken for informal resolution and why the informal process was unsuccessful; the name of any witnesses who may have observed or participated in the action that has given rise to the complaint, along with the contact information for those witnesses; and a listing of all individuals who received copies of the complaint.
- Once the written complaint is received by the associate dean, he/she will either investigate the substance of the complaint or assign a disinterested faculty member or other School administrator to investigate the complaint.
- Procedures are noted in the core of the policy of who shall be provided with the complaint or investigate the complaint if it involves a faculty member, department chair, member of the School's administration, staff member or another student.
- A written report of the investigation will be produced, including a description of the investigation, a summary of relevant information gathered, and a determination of whether or not the complaint has merit. When a complaint is found to have merit, a proposed administrative resolution to the complaint will be included in the report.
- If either the complainant or respondent is unwilling to accept the administrative resolution, a formal hearing within the School of Pharmacy may be requested in writing within 15 calendar days of the report's release. Should no request for a hearing be initiated, the administrative resolution will be final and binding.
- If the complainant or the respondent does not accept the administrative resolution, the School's administration will appoint an impartial panel to preside over the hearing and render a decision. The panel will consist of two faculty members, an Office of Student Affairs staff member and a student. One of the two faculty members will be appointed to chair the hearing. The chair will arrange to convene the hearing within 30 calendar days of receipt of the written request.
- The panel will provide a written decision on the matter within 15 calendar days of the hearing's conclusion. The written decision will include a statement of the panel's findings and, if the complaint was

determined to have merit, a recommendation for appropriate action. Before issuance to any other party, the decision will be submitted to the dean and to the University's Office of Student Affairs and is subject to the dean's review and modification. Once approved for release, the decision is final and binding for all parties.

2. The number of complaints since the last accreditation visit and the nature of their resolution.

From 2009 to the present, one student complaint was filed. Records regarding the complaint are kept in the Office of Admissions and Student Affairs. The complaint was filed during the 2011–2012 academic year. A third-year student received a fail grade after she was well informed that she could drop the course by a certain date, did not drop the course and subsequently put herself in a position of being discharged from the academic program. The student appealed her case through the available channels outlined in the *Pharmacy Student Bulletin of Academic Policies & Procedures*. Ultimately, she brought her case before a University review board, which overturned the School's decision to dismiss the student since the student brought up after the fact that she had disabilities (unrecorded with the Student Disability Office or the School of Pharmacy) that caused her to both fail the course and fail to follow the School's policy and procedure instructions. The resolution, based upon the University's review, was that the student was able to return in fall 2014 to take the course she failed, and is being provided with accommodations for her disabilities.

3. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

Students who have complaints are encouraged to report them to the Office of Student Affairs and the associate dean for Student/Faculty Affairs and Admission, and to discuss their issues in person with the director of Student Affairs and the associate dean. Most matters can be handled quickly through either of these offices within the School; otherwise the complaint can go through a due process arrangement as outlined in the *Pharmacy Student Bulletin of Academic Policies & Procedures*.

If a student is not satisfied with the outcome of the resolution procedure, he or she may submit a written complaint directly to the ACPE via e-mail (csinfo@acpe-accredit.org). ACPE contact information currently can be provided to the student by the director of Student Affairs or the associate dean and will be included in any subsequent printings of the *Pharmacy Student Bulletin of Academic Policies & Procedures*.

4. Any other notable achievements, innovations or quality improvements.

Students are provided with multiple paths for voicing complaints. Further, the dean, associate dean for Student/Faculty Affairs and Admission, the director of Student Affairs, the department chairs and many faculty members have an open-door policy that offers students an opportunity to discuss problems and complaints. Every student is encouraged to use these channels to voice complaints. Also, the dean and associate dean hold fireside chats with students throughout the year as a way to discuss issues of concern.

5. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

In the 2013 survey for USC graduating pharmacy students, 79.7% strongly agreed or agreed that they were aware of the process for raising issues with the School administration. This response was slightly lower than the national graduating pharmacy student response of 81.2%. The School intends to make

students even more aware of the process for raising issues, and to engage mentoring faculty to be more mindful of any and all student issues or complaints that are brought to their attention.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring.

University of Southern California / School of Pharmacy

21. Program Information

The college or school must produce and make available to students and prospective students a complete and accurate description of the professional degree program, including its current accreditation status.

2. College or School's Self-Assessment

The college or school produces and makes available to students and prospective students a complete and accurate description of the professional degree program, including its current accreditation status.	Satisfactory
Admissions policies, procedures, and practices fully and clearly represent the conditions and requirements related to distance learning, including full disclosure of any requirements that cannot be completed at a distance.	N/A

3. College or School's Comments on the Standard

Focused Questions

- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. How the college or school is applying the guideline for this standard in order to comply with the intent and expectation of the standard.

The Mission, Goals, Objectives and Educational Philosophy of the Professional Degree Program.

The School's mission, goals, objectives and educational philosophy for the PharmD degree are stated in the [School's Strategic Plan](#) (2011 to 2015) provided to each enrolled student (see Standard 1). The School's website fully addresses the [Doctor of Pharmacy](#) program.

The Curricular Plan, Courses and Credit Hours.

The School's curricular plan, courses and credit hours may be found on the [School's website](#), with similar information outlined in the [University's Catalogue 2014-2015](#).

Resources Available to Support the Curriculum.

A listing of sites for IPPE and APPE training programs is available in **Appendices 14.4.1 & 14.4.2**. Library and computing resources are detailed in Standard 29. Information on these resources is available on the School website, among other sources.

Criteria, Policies and Procedures Related to Admissions, Progression and Access to Student Records.

riteria, policies and procedures related to [admissions](#) and [progression](#) can be found on the School's website and in [The Pharmacy Student Bulletin of Academic Policies & Procedures](#), section III (see **Appendix 16.4.1**). The University's student records policy can be found in the [University of Southern California Catalogue 2014-2015](#).

Required Disclosures by Students and Background Checks Prior to and After Admission to the Professional Pharmacy Program.

All prospective students must submit the information required by PharmCAS and indicate any prior convictions. Upon acceptance to the program, a background check is performed through PharmCAS and delivered electronically to the School, essential for screening students before placement in an IPPE/APPE site. Each student also must obtain and maintain an intern pharmacist license from the California State Board of Pharmacy. In that application, students must answer questions related to prior convictions (including expunged violations). A copy of these questions is provided to students during the admission process (see appendix Intern Licensing Questions 2014). LiveScan fingerprints are screened by the FBI and DOJ. Students are again fingerprinted during the IPPE/APPE program by Los Angeles County +USC and/or the Veterans Affairs medical centers for access to those facilities. Many IPPE/APPE sites require drug screening (disclosed in their site-specific syllabi). Notice of possible background checks and drug screening is provided to all applicants through PharmCAS and to accepted students with the offer of admission. Students with "positive" background checks or who disclose expunged convictions are advised of the potential implications of their status. (Example letters are available on site.)

School Grading Policy, Grade Scheme And GPA Calculation Policy.

Grading policies are explained in [The Pharmacy Student Bulletin of Academic Policies & Procedures](#), section III, Academic Policies & Procedures.

Student Code Documents, Involving Ethics, Conduct and Professional Behavior.

Each entering pharmacy student is advised to review the University Student Conduct Code, available on the University's [SCampus](#) website. In addition, the School's policy on student integrity and sanctions, consistent with the University's sanctions, can be found in [The Pharmacy Student Bulletin of Academic Policies & Procedures](#), section V, The Student Honor System.

Off-Campus Curricular Requirements, Such as Practice Experiences in Other Geographic Locations. Over the last 45 years, the School has utilized approximately 300 experiential sites to train students in [IPPE and APPE](#) patient-care settings. While the majority of these sites are in Southern California, many others are available in the state and in other countries.

Graduation Requirements.

Graduation requirements are set forth in [The Pharmacy Student Bulletin of Academic Policies & Procedures](#), section III and [online](#).

Tuition and Fees, Including Refund Policies.

The [cost of attendance](#), including tuition and fees, is outlined on the School's website. [Tuition refund information](#) is on the University's site, including details on refunds, refund insurance and deadlines for refund requests.

Financial Aid Guidance.

Financial aid is readily available and may be sought by meeting with a financial aid officer in Student Affairs. At orientation, incoming students receive information (also available on the [School's website](#)) regarding aid.

Statement of Nondiscrimination.

The University and the School's statements regarding a [nondiscrimination policy](#) toward students appear in the University of Southern California Catalogue 2014-2015. This policy applies to all USC academic units.

Provision for on and off Campus Housing.

Housing is limited on the USC Health Sciences Campus, with one major dorm accommodating 80 to 100 residents. Campus housing is available on the University Park Campus, seven miles from our campus, and students may use University-subsidized transportation between the campuses. The [USC Housing](#) office provides full information on student living options. Students on APPE assignments are usually responsible for their own housing. However, if the APPE sites are outside the county, state or country, the School will arrange accommodation for student room and board at minimal or no cost to the student. The University's future plan includes major development on the Health Sciences Campus, including student housing, hotel/conference center, restaurants and other amenities.

Graduation and Placement Rates.

Statistics over the past 14 years show that 98% of each entering class graduates. Of these, an average of 95% passes the California board examinations on their first attempt. To facilitate career readiness, we hold interview days, interview training sessions, and career days throughout the academic year. Approximately 25% of the graduating class enter residency-training programs. [Graduation and board passage rates](#) are available on the School website.

Current Accreditation Status of the Pharmacy School Program.

In 2009, the School received a six-year accreditation status, [as noted on our website](#).

Expectations for Attitudes, Values, Traits and Ethics Required in the Profession.

The [Pharmacy Student Bulletin of Academic Policies & Procedures](#), section I, Desired Characteristics of Incoming Students (see **Appendix 21.5.3**), discusses the expected traits, attitudes, values and ethics a student must possess when entering the School, upon graduation and entry into practice. They include dedication, commitment, leadership, scholarship, and excellent communication and interpersonal skills.

If students demonstrate deficiencies in any of these characteristics, the policy provides authority to the School's administration, through appropriate due process, to dismiss them from the program.

Policies Regarding Student Life, Such as Accommodations for Disabilities, Harassment, Antiviolence, etc.

The School, working with the USC Office of Student Disabilities, ensures that students with physical or learning disabilities are provided proper accommodations to succeed in the academic program. The [Pharmacy Student Bulletin of Academic Policies & Procedures](#), section II, Students with Disabilities (see **Appendix 16.4.1**), provides students with procedures to follow so that accommodations can be made. The School requires all administrators, faculty and staff to undergo two hours of harassment-prevention training every two years. The University’s policy on Student Life, Harassment and Violence is in the [SCampus](#) guide. The University also provides the guidance to faculty regarding disruptive behavior.

Immunizations and Other Health or Practice Site Requirements.

Every entering student is required to have a battery of immunizations and a physical examination prior to the first day of classes. The required immunization and health screening is provided to students at the Student Health Center. Health screening must be updated regularly for participation in the IPPE/APPE program and records are maintained by the Student Health Service. Some sites require annual influenza vaccination, annual or semi-annual TB screening, drug screening and/or annual physical examination for participation in IPPEs/APPEs.

Admissions Policies and Procedures for Courses Presented by Distance Learning.

Our PharmD program currently does not have a distance-learning component. Other programs within the School, including regulatory science and healthcare decision analysis, may utilize distance education. The School currently makes available recorded videos of lectures for courses in the PharmD program to students currently enrolled in those courses.

2. Other notable achievements, innovations or quality improvements.

Recent Pass Rates of Graduates Taking the Standardized Licensure Examinations for the First Time.
Licensure in California requires passage of the North American Pharmacist Licensure Examination

(NAPLEX) and the California Practice Standards and Jurisprudence Examination (CPJE). The Multistate Pharmacy Jurisprudence Examination (MPJE) is not used in California. Over the last five years, graduates taking NAPLEX for the first time have nearly a 100% pass rate as noted on the School website. During this same period, graduates show a first-time pass rate of about 95% on the CPJE.

(See *Appendices* in Standard 3 for a comprehensive review of USC graduating student performance on both NAPLEX and CPJE over the last five years.)

3. Interpretation of data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

Graduating student survey data showed results that were comparable to the national averages.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. The School provides students and prospective students with essential information in multiple formats and through various venues. The School's website is updated daily and the *Pharmacy Student Bulletin of Academic Policies & Procedures* is published yearly to reflect new programmatic information. In the next printing, text will be added to advise students that they may report a student grievance to the ACPE, along with a section that discusses the responsibility of the School and a student whose pharmacist intern license is placed in a probationary status by the Board of Pharmacy.

University of Southern California / School of Pharmacy

22. Student Representation and Perspectives	
The college or school must consider student perspectives and include student representation, where appropriate, on committees, in policy-development bodies, and in assessment and evaluation activities.	

2. College or School's Self-Assessment

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.	Satisfactory
The college or school involves student representatives on appropriate program committees, as well as in accreditation self-studies and strategic planning activities.	Satisfactory
The pharmacy students feel their perspectives are heard, respected, and acted upon in a fair and just manner.	Satisfactory
A clear process exists for students to follow to raise issues with the college or school administration.	Satisfactory
The college or school administration responds to problems and issues of concern to the student body.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/> The participation and contribution of students on college or school committees <input checked="" type="checkbox"/> The organization, empowerment, and implementation of a student government association or council <input checked="" type="checkbox"/> The 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 <input checked="" type="checkbox"/> Examples of quality improvements in the college or school that have been made as a result of student representation and perspectives <input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard <input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements <input checked="" type="checkbox"/> Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms	

(School comments begin here)

1. The participation and contribution of students on college or school committees.

Students are voted by peers or selected by faculty to participate in a number of the School's committees, including Curriculum Inter-Module Coordinating Council, Self-Study, Assessment, Faculty/Student Retreat, Graduate Affairs, Student Honor System, Student Grievance, Special Student Awards, Strategic Plan and Advanced Technology.

Students assigned to these committees take their roles seriously, and are important contributors to discussions and policy development. Students are also represented at faculty retreats on curriculum and research.

2. The organization, empowerment, and implementation of a student government association or council.

The School's students have a well-structured and effective student government that has developed strong interactive relationships with faculty, pharmacy organizations and associations, and community health programs. The Associated Students of the School of Pharmacy, comprised of 43 student leaders representing a central student body council, meets monthly and operates under well-established bylaws (see *Exhibits* onsite). The associate dean for Student/Faculty Affairs & Admission serves as the faculty adviser.

3. The 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.

First- and second-year students have a series of "fireside chats" with the dean. First-year students meet with course coordinators and the associate dean for Student/Faculty Affairs for formative evaluation sessions to discuss issues pertinent to specific courses in the first year. Several student evaluations involving first-, second- and third-year students are utilized to determine the degree of satisfaction with courses, instructors and technology. The dean, executive vice dean, associate dean for Student/Faculty Affairs and department chairs maintain an open-door policy to allow students to discuss any issues of concern.

4. Examples of quality improvements in the college or school that have been made as a result of student representation and perspectives.

The School's strategic plan incorporated recommendations formulated by student representatives, which has led to many significant improvements in curriculum sequencing, experimental programming and coordination of case conferences. Student feedback on alternative teaching methodologies has led to a partnership with the USC Rossier School of Education and the formation of the Excellence in Teaching Committee. Students have expressed a widespread interest in managed care, which has led to the re-introduction of the managed care elective.

5. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

We continuously foster student participation in the affairs of the School, which has been noted in national AACP surveys, with responses provided by graduating pharmacy classes of 2008 and 2013. Students have had increased opportunities to participate in committees and to have their suggestions and comments carefully listened to by faculty and administration.

6. Any other notable achievements, innovations or quality improvements.

Students have been given increased opportunities to participate in various School committees, allowing them to influence changes in curriculum, admissions policy and general student governance. Additionally, having up to 10 students from each class year participate in the biennial faculty retreats has provided a focused opportunity for student voices to be heard on issues that include curriculum,

admissions and technology. These retreats have proven extraordinarily effective, and have prompted other committees (Curriculum, Admissions, Assessment) to hold mini retreats that also provide an opportunity for student participation.

7. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

In 2013 AACP surveys, the School’s graduating students rated student involvement on various committees and the ability to express their opinions to the administration as highly favorable (comparable to national averages).

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. This year’s P1 class has expressed concerns around the use of ExamSoft, as discussed previously, and the delay in holding student elections. The School is working to optimize ExamSoft usage and is revising the policy on P1 student election timing.

University of Southern California / School of Pharmacy

23. Professional Behavior and Harmonious Relationships

The college or school must provide an environment and culture that promotes professional behavior and harmonious relationships among students, faculty, administrators, preceptors, and staff. Faculty, administrators, preceptors, and staff must be committed to developing professionalism and fostering leadership in students and to serving as mentors and positive role models for students.

2. College or School's Self-Assessment

The college or school provides an environment and culture that promotes professional behavior and harmonious relationships among students, faculty, administrators, preceptors, and staff.	Satisfactory
Faculty, administrators, preceptors, and staff are committed to developing professionalism and fostering leadership in students and to serving as mentors and positive role models for students.	Satisfactory
The college or school develops, via a broadly based process, a policy consistent with university policies on student, faculty, preceptor, and staff professionalism that defines expected behaviors and consequences for deviation from the policy, as well as due process for appeals.	Satisfactory
The activities undertaken by the college or school to promote professional behavior are effective.	Satisfactory
The activities undertaken by the college or school to promote harmonious relationships are effective.	Satisfactory
The activities undertaken by the college or school to promote student mentoring and leadership development are effective.	Satisfactory
Faculty receive support from peers to participate in student mentoring and leadership development activities, and these efforts are viewed favorably by college or school administration.	Satisfactory
The college or school supports students, faculty, administrators, preceptors, and staff participation, where appropriate, in pharmacy, scientific and other professional organizations.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/>	Strategies that the college or school has used to promote professional behavior, and the outcomes
<input checked="" type="checkbox"/>	Strategies that the college or school has used to promote harmonious relationships among students, faculty, administrators, preceptors, and staff; and the outcomes
<input checked="" type="checkbox"/>	Strategies that the college or school has used to promote student mentoring and leadership development, and the outcomes
<input checked="" type="checkbox"/>	How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/>	Any other notable achievements, innovations or quality improvements

Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. Strategies that the School has used to promote professional behavior, and the outcomes.

Professionalism and behaviors expected of students enrolled in the School are clearly spelled out in *The Pharmacy Student Bulletin of Academic Policies & Procedures*, which lays out the professional, defined behaviors expected under Section 1, “Essential Characteristics & Abilities,” and Section V, “The Student Honor System” (see *Exhibit* onsite). These sections include an explanation of the sanctions that may be imposed if principles, rules or standards of professionalism or expected conduct are violated. All students receive the bulletin each academic year they are enrolled. Students also are held to the principles and rules set forth in the *California Board of Pharmacy Handbook of Laws and Regulations* in the section, “Professional Competency in Pharmacy” (see *Exhibit* onsite). Emphasis on professionalism begins in the initial, first-year, three-week course on pharmacy practice and continues throughout the four-year PharmD program in IPPEs and APPEs, as well as in an extensive array of service-learning opportunities.

2. Strategies that the School has used to promote harmonious relationships among students, faculty, administrators, preceptors, and staff; and the outcomes.

Faculty and administration of the School encourage and support pharmacy students to participate in self-government, take on leadership roles and become involved in the major pharmacy professional organizations. Students are financially subsidized to attend and participate in professional pharmacy-related meetings. Through the “dean’s subsidy,” student organizations within the School are provided collectively up to \$84,000 to pursue activities such as promoting health fairs, traveling to and registering for professional organization meetings, and participating in legislative activities such as supporting the recently passed Senate Bill 493 that recognizes pharmacists as healthcare providers undertaking specific patient-care functions (see *Exhibit* onsite). The School is proud of our students for the leadership roles they assume, the national and international award recognition they continuously receive, and their strong desire to work together in meaningful projects such as health fairs, Kids’ Day, the Fred Jordan Mission for the underprivileged, visits to senior citizen retirement centers, and Christmas giving and celebrations at Children’s Hospital. Our strong collaborations with nearly two dozen safety-net clinics in Los Angeles and Orange counties allows us to host student volunteers throughout the year, who provide intern-level support and learn how to evaluate patients with complicated medication-related problems (commensurate with each student’s capabilities/level of training). Every student who has volunteered for an extended period of time in our safety-net clinics has, upon graduation, continued on to residency training. In a number of cases, preceptors also receive financial support to attend meetings with students or receive educational grant funding to support the efforts of our APPE programming (e.g., \$95,000 distributed for special APPE teaching programs for our students provided annually to Cedars-Sinai Medical Center and Veterans Administration of Greater Los Angeles pharmacy departments). Many of the School’s staff members work with students. For example, Dr. Raffi Svadjian, a staff member who also directs the School’s pharmacies, helps students who wish to purchase community pharmacies after graduation. Likewise, many School preceptors and alumni mentor students, guiding their professional aspirations while in School and helping start their careers post- graduation. New students are welcomed to the School with a fall reception at the Dean’s home, giving them an opportunity to socialize with other students, faculty and alumni. To celebrate, graduating students also enjoy a reception at the Dean’s

home, again along with faculty and alumni. The Dean has also instituted a monthly Thursday night “mixer,” with In-‘n- Out trucks on campus providing free hamburgers to students, faculty, alumni and staff and a relaxed atmosphere for conversation.

3. Strategies that the college or school has used to promote student mentoring and leadership development, and the outcomes.

Faculty, preceptors and alumni provide students with a robust slate of mentors. Academic progress of first-year students is closely monitored, with faculty and/or the associate dean for Student/Faculty Affairs meeting with students experiencing academic difficulties. This approach has resulted in the School having a very low attrition rate among first-year students. Faculty members who have specialty backgrounds also mentor students about opportunities and career paths, and sometimes mentor students to enter residencies or specialty pharmacy-related areas such as industry, research, teaching and dual-degree programs. Some students work with core faculty who train them in pursuing government positions and federal and state legislative opportunities. The School’s Diversity Initiative provides students from under-represented groups with mentorship that covers a broad range of issues to help these students succeed. The School’s Student Industry Association, with input from the Life Industries Council (an industry-oriented group of alumni and friends) mentors students interested in careers in the pharmaceutical industry. These opportunities have successfully helped students succeed in their studies and ultimately in their careers. The School recently received a gift to establish the Margaret and John Biles Leadership Center, which will provide a unique opportunity for students to develop leadership skills. A faculty committee is developing a program that will capitalize on USC’s relationships with policymakers and innovators.

4. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

Further interaction among students, faculty, administrators, preceptors and staff in formal and informal situations that promote professional behavior and harmonious relationships:

- Faculty members serve as advisers to the various School student organizations.
- Administration, faculty, preceptors and staff attend events such as the four major student-sponsored dinners held each year, and various parties, dinners and dances held by individual student organizations.
- Students, faculty and staff work together at the student-organized Legislative Day, health fairs, Kids’ Day, Bowling Night, fraternity mixers and Movie Night.
 - The dean holds “fireside” chats with students, providing an open forum to discuss issues of concern.
 - Many faculty, staff, preceptors and administrators are involved in and attend the White Coat Ceremony, graduation and many social events at the School.
- All faculty members participate in interviews of prospective students.

In addition to opportunities for students to learn professional behavior from faculty and staff, they also learn such standards from professionals at APPE and IPPE sites, health fairs and other community service, and the annual Career Day and Building Bridges events, where they interact with representatives from pharmaceutical companies, hospitals, chain drugstores and pharmacy benefit management firms.

5. Any other notable achievements, innovations or quality improvements.

Students serve on various School and faculty committees, including Curriculum, Admissions and Disciplinary. Their input during meetings has been important in the recognition of problems with the curriculum and the social environment of the School that would not otherwise have been recognized. Also, two to three students from each of the four years participate in the School's biennial faculty retreats. Their input at the retreats and fireside chats has been very significant in regard to making changes to the curriculum and admissions policies.

6. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

The 2013 survey responses of USC graduating pharmacy students to questions in this standard mostly appeared in the 90th percentile, and were slightly higher than the national response (see reporting and commentary in the chart data section of this standard). However, some responses in the USC faculty survey were lower than national pharmacy faculty responses and will be addressed, such as the USC faculty perception of the School's effective management of academic and professional misconduct by students. Also, USC pharmacy preceptors gave similarly low ratings, somewhat lower than the national pharmacy preceptors, on the same issues. USC alumni responses, however, were favorable (in the 90th percentile range) in recognizing that the School provided an environment and culture that promoted professional behavior and harmonious relationships among students, faculty, administrators, preceptors and staff. Further, USC alumni responded in the 90th percentile in noting that faculty and others were committed to developing professionalism, fostering leadership, and serving as mentors and positive role models, and that faculty displayed respect for their colleagues and students.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. Due to some changes in teaching technologies and delayed class elections, there was a lack of continuity and communication between the administration and P1 students. The School is changing the structure for next year to better meet student needs. While responses to the student survey questions indicated that USC pharmacy students were on par with the national student response levels with few significant deviations, USC faculty and preceptor responses appeared to be more critical of such issues as: 1) the School effectively managing professional misconduct by students as it pertains to repeated tardiness/absences, drug diversion, etc., and 2) preceptors knowing how to utilize the School's process to effectively manage academic misconduct (e.g., plagiarism) by students. More programs need to be developed to deal with managing incidences of students' professional and academic misconduct.

University of Southern California / School of Pharmacy

24. Faculty and Staff - Quantitative Factors	
The college or school must have a sufficient number of qualified full-time faculty and staff to effectively deliver and evaluate the professional degree program, while providing adequate time for faculty development, research and other scholarly activities, service, and pharmacy practice.	

2. College or School's Self-Assessment

The college or school has a sufficient number of qualified full-time faculty to effectively deliver and evaluate the professional degree program, while providing adequate time to ensure that the following are achieved:	Satisfactory
effective organization and delivery of the curriculum through classroom, small group, laboratory, practice simulation, service learning, and oversight and provision of experiential education	Satisfactory
faculty mentoring	Needs Improvement
student advising and mentoring	Satisfactory
research and other scholarly activities	Satisfactory
faculty development as educators and scholars	Satisfactory
professional/community service and pharmacy practice (where indicated by their position)	Satisfactory
participation in college or school and university committees	Satisfactory
assessment and evaluation activities	Satisfactory
The college or school has a sufficient number of qualified full-time staff to effectively support the delivery and evaluation of the professional degree program.	Satisfactory
Faculty receive adequate support staff resources.	Satisfactory
The college or school periodically conducts faculty workload and needs assessments, at appropriate intervals.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/>	A description of the process and interval for conducting faculty workload and needs assessments
<input checked="" type="checkbox"/>	An analysis of teaching load of faculty members, including commitments outside the professional degree program
<input checked="" type="checkbox"/>	The rationale for hiring any part-time faculty, and the anticipated duration of their contract
<input checked="" type="checkbox"/>	Evidence of faculty and staff capacity planning and succession planning
<input checked="" type="checkbox"/>	A discussion of the college or school's student-to-faculty ratio and how the ratio ties in with the college or school's mission and goals for the program
<input checked="" type="checkbox"/>	How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/>	Any other notable achievements, innovations or quality improvements

Interpretation of the data from the applicable AACCP standardized survey questions, especially notable differences from national or peer group norms.

(School comments begin here)

1. A description of the process and interval for conducting faculty workload and needs assessments.

Assessments to fulfill School-level goals in teaching, service and research occur on an ongoing basis through department meetings and meetings of the deans and chairs. This assessment is taken into account in each annual evaluation. Annually, each faculty member sets goals for the following year and works with the department chair to develop a profile of teaching, research, clinical practice and service activities that meets both School, departmental and the faculty member's needs. Evaluation for either promotion or annual merit salary increases is based upon performance with respect to this annual profile and on student course evaluations.

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

Teaching loads are determined by each faculty member and department chair. Faculty may suggest the courses that they would like to either coordinate or teach. While almost all School of Pharmacy faculty contribute to PharmD teaching, many faculty also contribute significantly to courses in the PhD and MS programs enrolling >200 students. Tenure-track hiring of faculty with the desired research portfolio requires some protected time for them to successfully establish their programs and secure funding. Thus, junior faculty may transition over time to a full teaching load. Because of the significant startup costs for research-active faculty, including seed money and laboratory remodels, such hires must be staggered to reflect available resources. The pace of this hiring has caused some frustration among current faculty. We will pursue targeted senior faculty recruitment in the coming year, once additional space is vacated by retiring faculty, which will allow more senior faculty recruits to quickly assume a full teaching load. A number of high-quality lecturers provide additional short-term coverage of materials that will eventually shift back to faculty.

A number of faculty teach in other departments at the University (e.g., introductory graduate biosciences courses and physician assistant training program). Other, less time-consuming teaching (4–6 hours/year) is required for secondary appointments in another department.

3. The rationale for hiring any part-time faculty, and the anticipated duration of their contract.

The School's part-time faculty address emergencies such as unexpected faculty departures, long-term illness or death. More frequently, the School hires part-time faculty with unique skills in specific subject matter (e.g., pathology, human anatomy, histology, business skills, pharmaceutical industry information) that enrich our coursework and accommodate all competencies. Such contracts are usually annual and based on continuing need and demonstrated teaching effectiveness.

4. Evidence of faculty and staff capacity planning and succession planning.

Following our recent losses, the School's leadership has ensured that every course will be taught by a well-qualified faculty member or experienced adjunct. Faculty recruitment is carefully coordinated and the School's leadership works to ensure administrative continuity through mentoring and assessment of interest and ability. The same considerations are also involved with key staff members who need to

be replaced or added. To prepare for succession, faculty are supported and regularly take advantage of the ACCP Research Fellowship, ACCP Leadership Fellowship, AACP Research Fellowships, HERS Fellowships, among others. The School is also supporting staff pursuing advanced degrees either through time release and/or support.

5. A discussion of the college or school's student-to-faculty ratio and how the ratio ties in with the college or school's mission and goals for the program.

The School's full-time faculty of 75 includes basic science, clinical and research faculty and lecturers, with five vacant budgeted positions. Currently, 738 students are enrolled in the PharmD program. The overall ratio of faculty to students is approximately 1:9.8; the faculty-to-student ratio is 1:1 in many of the IPPEs and APPEs, although the ratio goes up to 1:4 for a few professional experiences. Many didactic courses taught in the main lecture halls have 185–200 students. However, most of the didactic courses now have smaller breakout sessions of eight to 20 students and one faculty facilitator. The curriculum implemented in 1996 provided for a number of elective courses (which have grown over time in P3) with smaller classes. The addition of part-time faculty where needed has reduced the strain on faculty that primarily teach in the program's didactic portion.

We plan to add five to six new positions over the next accreditation cycle, resulting in a faculty-to-student ratio closer to 1:9. Several opportunities for revenue generation may enable us to reach this goal. The School is opening a closed-door, specialty pharmacy to serve Keck Hospital of USC and the Norris Cancer Hospital, which are both 340B-eligible entities. This pharmacy is expected to generate significant new contributions to the School over the next five years that can be reinvested in clinical faculty providing patient care as well as teaching and experiential training experiences.

6. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

We have hired new faculty to replace those who have left and to expand our educational program into new areas. The School is applying the guidelines in compliance with the intent and expectation of the standard as detailed in the accompanying Self-Study discussion.

7. Any other notable achievements, innovations or quality improvements.

As the CVs of our diverse faculty attest, we have national and international leaders in each subject area, greatly enriching the student experience. Our faculty's national honors and recognition are noted in earlier standards.

8. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

Overall, faculty responses to the AACP survey questions were consistent with or higher in areas involving adequate precepting, and satisfaction with the percentage of time spent in teaching, research, service and clinical service. Some concerns were evident regarding the adequacy of staff support, sufficiency of faculty and sufficiency of resources. The issue regarding sufficiency of faculty is addressed in focus questions 2 and 5 above. For staff support, in 2013, the national percentage strongly agreeing or agreeing that schools of pharmacy faculty overall receive adequate support staff resources was 73%, slightly higher than the USC School Pharmacy faculty response. Actually, the School's staffing has increased significantly from the period of 2008-2014, by 15%. Most of these increases have been in areas of new programmatic growth, and/or to accommodate new University or federal regulatory

requirements (e.g., research grant submission and compliance, budgetary/financial compliance, support for new MS programs, information technology, and the dictate from the provost’s office to reduce staffing University-wide by 10-15%). In addition, qualifications of many newly hired staff include specialized or more advanced credentials, thus enhancing the professionalism and competency of the staff overall in support of the School’s academic mission. Because of the availability of new technology, staffing traditionally used for more basic tasks such as photocopying and word processing has been shifted to provide more advanced support in important new areas.

Regarding the perception of the adequacy of resources, the national average indicated that 76.4% of faculty agreed or strongly agreed that their program’s resources could accommodate present student enrollment. In 2013, the percentage of USC faculty who agreed with this assessment was 72.7%, but in 2014, it was only 55%. We attribute this lack of faculty assurance relative to the national average as due to two principal challenges. First, we have increased our Pharm D student enrollment to 200 students in the current year, following a state-of-the-art remodeling of our large classrooms. However a burden remains in identification of smaller rooms for breakout groups used frequently throughout the curriculum. Second is the increasing challenge of placing these additional students in IPPE/APPE sites in Southern California due to the development of new and competing programs in the Los Angeles metropolitan area. The faculty are aware of these challenges. The School is working with other units on the Health Sciences Campus to more creatively utilize classroom space to ease these constraints. The School is working aggressively to identify new partners in additional experiential sites including those chosen to highlight new practice arenas enabled by SB493 enhancing California pharmacy provider status, to alleviate placement concerns. The School is positioned to continue in this leadership role in the Los Angeles basin relative to our new competitors in the area.

4. College or School's Final Self-Evaluation

<input type="checkbox"/> Compliant	<input checked="" type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant with monitoring as we believe we can improve upon our faculty mentoring and are working on a systemized approach to improve in this area.

University of Southern California / School of Pharmacy

25. Faculty and Staff - Qualitative Factors

The college or school must have qualified faculty and staff who, individually and collectively, are committed to its mission and goals and respect their colleagues and students. Faculty must possess the required professional and academic expertise, have contemporary knowledge and abilities in current educational philosophy and techniques, and be committed to the advancement of the profession and the pursuit of research and other scholarly activities. Faculty whose responsibilities include the practice of pharmacy must satisfy all professional licensure requirements that apply to their practice. The college or school must foster the development of its faculty and staff, commensurate with their responsibilities in the program.

2. College or School's Self-Assessment

The college or school has qualified <u>faculty</u> who, individually and collectively, are committed to its mission and goals and respect their colleagues and students.	Satisfactory
The college or school has qualified <u>staff</u> who, individually and collectively, are committed to its mission and goals and respect their colleagues and students.	Satisfactory
Faculty possess the required professional and academic expertise, have contemporary knowledge and abilities in current educational philosophy and techniques, and are committed to the advancement of the profession and the pursuit of research and other scholarly activities.	Satisfactory
Faculty generate and disseminate knowledge through scholarship. Scholarship by faculty members, including the scholarship of teaching, is evident and demonstrated by productive research and other scholarly activities.	Satisfactory
Faculty whose responsibilities include the practice of pharmacy satisfy all professional licensure requirements that apply to their practice.	Satisfactory
Pharmacy practice faculty possess additional professional training (residency, fellowship, or equivalent experience)	Satisfactory
Pharmacy practice faculty either have or are working toward additional credentials (for example, specialty certification) relevant to their practice and teaching responsibilities.	Satisfactory
The college or school ensures that policies and procedures for faculty recruitment, promotion, tenure (if applicable), remuneration and retention are established and applied in a consistent manner.	Satisfactory
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.	Satisfactory
Faculty, regardless of their discipline, have or are developing a conceptual understanding of current and proposed future pharmacy practice in a variety of settings.	Satisfactory
Faculty members have the capability and continued commitment to be effective teachers. Effective teaching requires knowledge of the discipline, effective	Satisfactory

communication skills, and an understanding of pedagogy, including construction and delivery of the curriculum, and a commitment to learning outcomes assessment.	
The college or school provides, or is affiliated with institutions that provide, postgraduate education and training, including accredited residency and fellowship programs.	Satisfactory
The college or school fosters an environment that encourages contributions by the faculty to the development and transmission of knowledge.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> 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
<input checked="" type="checkbox"/> 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
<input checked="" type="checkbox"/> 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
<input checked="" type="checkbox"/> 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
<input checked="" type="checkbox"/> A description of the college or school's policy or expectations regarding research productivity for faculty, including timeline for new faculty
<input checked="" type="checkbox"/> Evidence that faculty are generating and disseminating knowledge through productive research and scholarship, including the scholarship of teaching
<input checked="" type="checkbox"/> A description, if applicable, of 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
<input checked="" type="checkbox"/> How the college or school provides, or is affiliated with institutions that provide, postgraduate education and training, including accredited residencies and fellowship programs
<input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements
<input checked="" type="checkbox"/> Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

(School comments begin here)

1. 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.

The hiring process for all new faculty and administrators requires submission of CVs, scholarly work products and references. The Office of Human Resources conducts background checks and contacts

individuals who can confirm specific information. Candidates are interviewed by members of the faculty and administration, and faculty/administrators from other University units where appropriate. Applications for staff positions are handled in a similar manner with emphasis on the candidate's resume, work history, experience, references and background check.

2. 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.

The biomedical and pharmaceutical sciences faculty is largely part of the Department of Pharmacology and Pharmaceutical Sciences, while the social/behavioral/administrative and clinical sciences faculty is largely part of the Department of Clinical Pharmacy and Pharmaceutical Economics & Policy. Each department maintains faculty equipped to contribute to teaching and research. New hires balance the needs of teaching and research. Each new position is evaluated by the faculty, department chair and vice dean for Research and Graduate Affairs to determine research fit and alignment with teaching needs. While the School's full-time faculty is responsible for the subject matter taught in the curriculum, some areas of expertise require participation of other USC faculty or outside faculty, who teach on annual contracts.

3. 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.

The School hosts a biennial research retreat that all faculty are encouraged to attend. The School's Office of Research and Graduate Affairs hosts a quarterly translational research seminar featuring a prominent international scientist, and special events such as workshops in areas of research that cross disciplinary boundaries. A recent all-day symposium focused on good research practice featuring speakers from the NIH, DOD and industry. Multiple workshops and brown-bag sessions ensure that faculty members have opportunities to share scientific questions across disciplines. Research activity from compliance or substantive-impact perspectives is frequently discussed at monthly Pharmacy Faculty Council meetings.

4. 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.

The School's biennial faculty retreat focuses on diverse aspects of the curriculum as they relate to pharmacy practice, experiential requirements and changes in the profession. Roundtable sessions and symposia are held throughout the year, with topics such as California Senate Bill 493 and diverse practice models. Aspects of pharmacy practice are discussed at monthly Pharmacy Faculty Council meetings. Faculty members work together in many components of the curriculum, stimulating appreciation of the diverse specialties that contribute to the School. For example, therapeutics modules are co-coordinated by clinical and basic science faculty to integrate scientific disciplinary knowledge with practical aspects of disease mechanism and treatment.

5. A description of the college or school's policy or expectations regarding research productivity for faculty, including timeline for new faculty.

For tenure-track and tenured faculty, expectations for research productivity are commensurate with those defined by the University for securing tenure and promotion to full professor. A successful candidate for tenure at the junior faculty stage will have secured several funding sources, published in high-impact journals and received endorsement of colleagues at peer institutions. Given expectations for significant research output, junior faculty are assigned minimal teaching in the first year and a gradual increase to a full load in year four, with tenure decisions made at the end of year six. Some non-tenure-track faculty on the clinical track are highly productive researchers, accruing grants and publishing papers. Increased emphasis on scholarship for our clinical faculty has resulted in some deferment of teaching responsibilities so that practice and research activities can be established. The timetable for evaluation of junior clinical faculty members for promotion and retention is eight years. Faculty on the research track are expected to be 95% dedicated to research with commensurate funding and productivity, and to provide salary support from research sources. Junior research-track faculty have three years to demonstrate their ability to secure external funding.

6. Evidence that faculty are generating and disseminating knowledge through productive research and scholarship, including the scholarship of teaching

The School's researchers published 937 papers in 2008–2013, supported by \$65.4 million in awards. Faculty members are active in invention and entrepreneurship, holding 63 patents and accruing 49 licensing agreements with outside vendors. The School's faculty continues to create provisional patents at a rate of ~10/year. Faculty members have published articles on teaching methodology (Romero et al. *Am J Pharm Ed*, 2010, 74, Article 66; Sutch et al. *J Chem Ed*, 2012, 89, 45–51), and have been invited to speak on teaching methodology at national and international conferences. Several have been recipients of University funding to examine course continuity and teaching with technology.

7. A description, if applicable, of 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

The School does not have a formal distance-learning program but uses distance-learning modalities as part of several hybrid MS programs through the International Center for Regulatory Sciences and the Schaeffer Center. Full-time faculty leading these efforts are skilled in state-of-the-art educational methodologies and these programs are considered national models of hybrid distance learning. Each program has dedicated staff and IT specialists.

8. How the college or school provides, or is affiliated with institutions that provide, postgraduate education and training, including accredited residencies and fellowship programs

The School provides postgraduate educational opportunities in clinical practice, research and education. The accredited pharmacy residency program is one of the largest in the nation, hosting 45 residents in 2014–15 from 18 different schools of pharmacy. The School works closely with Allergan to administer a one-year fellowship for PharmDs and PhDs interested in industry research positions, with 11 fellows hosted in 2014–15. The School has nine postdoctoral fellows and six research associates (senior postdoctoral fellows) employed in research positions with faculty mentors across all fields. Multiple opportunities exist for postgraduate presentations and networking.

9. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The guidelines have aided the School in establishing policies and procedures for faculty recruitment, promotion, tenure and retention; adjusting faculty composition to ensure fulfillment of educational and research needs defined in the mission statement; ways to evaluate the effectiveness of faculty and appropriate employment of meaningful educational technology and techniques; providing and supporting scholarship in teaching; and providing postgraduate education and training and an accredited residency and fellowship program. The School’s administration is devoted to continuously improving effectiveness and efficiency to ensure fulfillment of its education and research missions.

10. Interpretation of the data from the applicable AACCP standardized survey questions, especially notable differences from national or peer group norms.

Compared to national results, the School’s faculty responses showed lower agreement regarding effectiveness of faculty recruitment efforts, guidance on career development and funding to support faculty development. These results are surprising since the School invests significant resources in faculty infrastructure, development, seed funding and matching funds for external peer-reviewed grants.

All faculty have access to travel funds to present at national and international meetings, funding that has grown steadily each year for a decade. Faculty are regularly informed about these opportunities through e-newsletters and at faculty meetings. Issues regarding the identification and proactive recruitment of new faculty and resource limitations are discussed in Standard 24. Strategies to address faculty mentoring and advisement and preceptor professional development are discussed in Standard 26.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. Survey information suggests that the School needs to devote more effort to active faculty development and more rapid recruitment to replace faculty who have retired or departed.

University of Southern California / School of Pharmacy

26. Faculty and Staff Continuing Professional Development and Performance Review	
The college or school must have an effective continuing professional development program for full-time, part-time, and voluntary faculty and staff consistent with their responsibilities. The college or school must review the performance of faculty and staff on a regular basis. Criteria for performance review must be commensurate with the responsibilities of the faculty and staff in the professional degree program.	

2. College or School's Self-Assessment

The college or school fosters the development of its faculty and has an effective continuing professional and career development program for full-time, part-time, and voluntary faculty consistent with their responsibilities.	Needs Improvement
The college or school fosters the development of its staff and has an effective continuing professional and career development program for full-time and part-time staff consistent with their responsibilities.	Satisfactory
Faculty and staff are assisted in goal setting by their administrative reporting authority	Satisfactory
The college or school reviews the performance of faculty and staff on a regular basis.	Satisfactory
Criteria for performance review are commensurate with the responsibilities of the faculty and staff in the professional degree program.	Satisfactory
The college or school has or provides support for programs and activities for faculty and preceptor continuing professional development as educators, researchers, scholars, and practitioners commensurate with their responsibilities in the program.	Needs Improvement
Faculty receive adequate guidance and support on career development.	Needs Improvement
Faculty are able to attend one or more scientific or professional association meetings per year.	Satisfactory
Faculty development programs are available to enhance a faculty member's academic skills and abilities.	Satisfactory
The performance criteria for faculty are clear.	Needs Improvement
Expectations on faculty for teaching, scholarship and service are appropriate and commensurate with academic and professional development.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions	
<input checked="" type="checkbox"/>	A description of the performance review process for full-time, part-time and voluntary faculty (including preceptors) and staff
<input checked="" type="checkbox"/>	A description of the relationship between faculty, preceptor, and staff continuing professional development activities and their performance review
<input checked="" type="checkbox"/>	A description of faculty development programs and opportunities offered or supported by the college or school
<input checked="" type="checkbox"/>	A description of staff development programs and opportunities offered or supported by the college or school

- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

(School comments begin here)

1. A description of the performance review process for full-time, part-time and voluntary faculty (including preceptors) and staff.

Evaluation of faculty performance is based on:

- peer review by two groups of pharmacy faculty, one from each department, who review annual performance profiles consisting of the percentage effort and substance dedicated to teaching, research and scholarly activity, service and administrative activities. Part-time faculty on the University payroll are reviewed in the same manner. Another, School-wide committee comprised of faculty from both departments normalizes peer-evaluation rankings;
- student evaluations of teaching and course organization;
- publications in peer-reviewed journals, books or chapters in their disciplines;
- invited presentations to pharmacy-related organizations and associations or scientific research conferences;
- funded grants for basic or clinical research, new clinical pharmacy services or new teaching methodologies; and
- review of goals for the previous year, and whether or not they were met.

Evaluation of preceptors is based on:

- student evaluations of the site and preceptor; and
- site visits by the director of Experiential Programs to assess the quality of the site and preceptors, and ensure the goals and objectives stated in the syllabus are being met.

Evaluation of staff is based on:

- review by the assigned faculty member or administrator and the associate dean for Administrative Affairs to determine how well they are serving the needs of administrators, faculty, preceptors, students and others to carry out the goals and objectives of the School's teaching, research and service programs.

2. A description of the relationship between faculty, preceptor, and staff continuing professional development activities and their performance review.

The University and the School provide abundant mentoring programs to enhance faculty teaching, research, service, and behavioral, motivational and attitude concerns. The programs are designed to: improve teaching skills; build grant-writing skills; recognize requirements and acquire necessary abilities

for promotion; provide mentoring for junior faculty; improve understanding of what is required to move into administration or other positions of service; and enable faculty members to understand their rights, duties and responsibilities. Faculty members' attendance at mentoring sessions and adherence to the guidelines above determine, in part, how they are evaluated in their annual review.

Preceptors receive mentoring to ensure that they understand what is expected of them and the students at their site. Through mentoring, preceptors are informed of the importance of following the course syllabus, reporting performance or behavior issues, and carefully evaluating student performance.

Staff members are required to attend mentoring sessions, arranged by the associate dean for Administrative Affairs, to improve skills and understanding of the importance of accomplishing assigned tasks.

3. A description of faculty development programs and opportunities offered or supported by the college or school.

To promote faculty and preceptor development, the School:

- supports faculty toward successful awarding of promotion and tenure. Department chairs and senior faculty mentor junior faculty in teaching, research, scholarly pursuits and service. Each pre-tenure junior faculty member meets regularly with the vice dean for Research Affairs and attends a formal mentoring committee meeting twice a year co-chaired by the vice dean for Research Affairs and the department chair that includes senior University faculty in the relevant scientific discipline;
- supports the development/enhancement of skills needed to teach diverse learners. The School's administration and faculty have invested in methodologies and technologies for teaching, and support faculty and staff in understanding and using these methodologies and technologies;
- assists faculty as productive scholars throughout their careers. All faculty members are expected to contribute to scientific and professional publications and/or submit research grants. The Office of Research and Graduate Affairs provides support for grant preparation, including seminars on patents, scientific writing and information technology, and, working with USC Stevens Center for Innovation, matches faculty with companies and venture capital groups as appropriate;
- fosters camaraderie among faculty by hosting research and curriculum retreats;
- fosters the achievement of new credentials. Most clinical faculty members have been trained in residencies and fellowships, and approximately 60% have attained specialty board certification. Over the last five years, clinical and basic science faculty members have also received state, national and international awards for research, teaching and developing new models in delivering patient care;
- provides orientation and ongoing training to faculty and teaching assistants to enhance proficiency in the use of educational technology, including Blackboard, live-streaming, video-capturing, the "clicker system" and ExamSoft;
- requires orientation for first-time preceptors at the beginning of every academic year for training in policy and procedures;
- encourages attendance at and contributions to relevant professional meetings, and provides funding to help support travel, registration and accommodations;

- encourages and provides release time for faculty to join and actively participate in professional organizations and continuing education programs;
- encourages continuing professional development by providing instruction in teaching methodologies and technologies, creating effective exam questions, grant writing, self-improvement and professional improvement;
- provides opportunities for faculty-to-faculty mentoring. Department chairs as well as appointed senior faculty oversee junior faculty members' progress and ensure they are optimizing their chances for promotion and becoming outstanding researchers, educators and leaders; and
- ensures that faculty, staff and students understand ACPE's accreditation standards/guidelines in order to ensure compliance. The School's ACPE Accreditation Standards are available on the School's [website](#), and faculty and staff are encouraged to review the standards and provide feedback where necessary.

4. A description of staff development programs and opportunities offered or supported by the college or school.

To promote staff development, the School:

- supports the acquisition or enhancement of skills needed to master methodologies and technologies used to support the School's programs;
- provides quarterly staff professional development "lunch and learn" sessions on topics such as campus safety, university operations, and health and wellness;
 - Provides opportunities for staff to pursue advanced degrees through time release and/or support; and
- ensures staff members understand ACPE's accreditation standards/guidelines and are given opportunities to provide feedback.

5. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The School's faculty, preceptor and staff development programs were designed based on ACPE guidelines and the experience and insights of administrators and faculty. These programs are evaluated periodically and improvements are made to ensure compliance with guidelines.

6. Any other notable achievements, innovations or quality improvements.

The School routinely assesses the mentoring programs described above. The quality of events, such as our biennial research retreat, is assessed through follow-up surveys.

7. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

In 2013 and 2014, faculty responses relative to the national average revealed concerns about the effectiveness, clarity and consistency of annual review, criteria for performance and alignment with actual responsibilities, and mentoring. We attribute this difference to some lack of consistency in the review process due to the untimely loss of the Clinical Pharmacy and Pharmaceutical Economics &

Policy chair and appointment of an interim chair, and a transition in leadership in Pharmacology and Pharmaceutical Sciences. The dean and executive vice dean are working with the department chairs to develop more transparent processes for faculty evaluation; ensure that timely student-teaching evaluations are completed for inclusion in merit evaluations; and ensure the chairs are sufficiently prepared for their faculty mentoring responsibilities. As discussed in question 3, the School and University offer multiple programs to aid in faculty development, so these issues may relate to lack of understanding or individual encouragement to pursue specific opportunities, which will be addressed with individual mentoring.

Several preceptor responses were also low for such items as: knowing how to utilize policies from the School that deal with harassment/discrimination; unclear criteria for evaluating performance; and having an effective continuing education program for preceptors that is consistent with their responsibilities. The department chairs and director of Experiential Programs are addressing these issues by exploring ways to enhance communication with preceptors, such as providing more information about professional development in the annual preceptor breakfast.

4. College or School's Final Self-Evaluation

<input type="checkbox"/> Compliant	<input checked="" type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant with monitoring. The School is actively pursuing ways to improve on the performance review process for both faculty and staff and will more actively provide opportunities for preceptor communication and professional development.

University of Southern California / School of Pharmacy

27. Physical Facilities

The college or school must have adequate and appropriate physical facilities to achieve its mission and goals. The physical facilities must facilitate interaction among administration, faculty, and students. The physical facilities must meet legal standards and be safe, well maintained, and adequately equipped.

2. College or School's Self-Assessment

The college or school has adequate and appropriate physical facilities to achieve its mission and goals.	Satisfactory
The physical facilities facilitate interaction among administration, faculty, and students.	Satisfactory
The physical facilities meet legal standards and are safe, well maintained, and adequately equipped.	Satisfactory
Physical facilities provide a safe and comfortable environment for teaching and learning.	Satisfactory
For colleges and schools that use animals in their professional course work or research, proper and adequate animal facilities are maintained in accordance with acceptable standards for animal facilities.	Satisfactory
Animal use conforms to Institutional Animal Care and Use Committee (or equivalent) requirements. Accreditation of the laboratory animal care and use program is encouraged.	Satisfactory
Space within colleges and schools dedicated for human investigation comply with state and federal statutes and regulations.	Satisfactory
All human investigations performed by college or school faculty, whether performed at the college or school or elsewhere, are approved by the appropriate Institutional Review Board(s) and meet state and federal research standards.	Satisfactory
Students, faculty, preceptors, instructors, and teaching assistants have access to appropriate resources to ensure equivalent program outcomes across all program pathways, including access to technical, design, and production services to support the college or school's various program initiatives.	Satisfactory
Commensurate with the numbers of students, faculty and staff, and the activities and services provided, branch or distance campuses have or have access to physical facilities of comparable quality and functionality as those of the main campus.	Satisfactory
Faculty have office space of adequate size and with an appropriate level of privacy.	Satisfactory
Faculty have adequate laboratory resources and space for their research and scholarship needs.	Satisfactory
Computer resources are adequate.	Satisfactory
Laboratories and simulated environments (e.g. model pharmacy) are adequate.	Satisfactory
Facilities encourage interprofessional interactions (e.g., simulation laboratories)	Satisfactory
Access to quiet and collaborative study areas is adequate.	Satisfactory
Common space for relaxation, professional organization activities and events, and/or socialization is adequate.	Needs Improvement

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> A description of physical facilities, including available square footage for all areas outlined by research facilities, lecture halls, offices, laboratories, etc.
<input checked="" type="checkbox"/> A description of the equipment for the facilities for educational activities, including simulation areas
<input checked="" type="checkbox"/> A description of the equipment for the facilities for research activities
<input checked="" type="checkbox"/> A description of facility resources available for student organizations
<input checked="" type="checkbox"/> A description of facilities available for student studying, including computer and printing capabilities
<input checked="" type="checkbox"/> How the facilities encourage and support interprofessional interactions
<input checked="" type="checkbox"/> How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
<input checked="" type="checkbox"/> Any other notable achievements, innovations or quality improvements
<input checked="" type="checkbox"/> Interpretation of the data from the applicable AACCP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. A description of physical facilities, including available square footage for all areas outlined by research facilities, lecture halls, offices, laboratories, etc.

HEALTH SCIENCES CAMPUS:

The School of Pharmacy occupies the John Stauffer Pharmaceutical Sciences Center, with a total gross area of 88,234 square feet and a net area of 51,239 square feet, which breaks down as follows, in net square feet:

Research: 25,112.00

Teaching: 9,247.45

Departmental/School administration: 7,582.80

Faculty offices: 4,195.50

Student administration and services: 21,946.75 (including a new student lounge added in November 2014)

Other administrative services: 3,082

In addition, the School utilizes 19,866 square feet of the Center for Health Professions, including, in net square feet:

Administration: 7,252

Instruction: 9,514

Multipurpose faculty office space: 1,859

Other general use: 1,241

The School also utilizes 4,357 square feet for the Medical Plaza Pharmacy and Transplant Pharmacy, located in Healthcare Consultation Center I.

UNIVERSITY PARK CAMPUS:

The School utilizes 4,238 square feet in the Dr. Verna and Peter Dauterive Hall, where the Schaeffer Center for Health Policy & Economics is housed.

The School utilizes 1,546 square feet in the Student Union Building for the USC Pharmacy, and 1,438 square feet for the Health Center Pharmacy, immediately adjacent to the new Engemann Student Health Center.

2. A description of the equipment for the facilities for educational activities, including simulation areas.

See *Appendices 27.5.1, 27.5.2, 27.5.3 and 27.5.4.*

3. A description of the equipment for the facilities for research activities

See *Appendix 27.5.1.*

4. A description of facility resources available for student organizations.

The School recently allocated 568 net square feet for a new student lounge in the basement of the Pharmaceutical Sciences Center. Space is also provided, as needed, for student events and meetings.

5. A description of facilities available for student studying, including computer and printing capabilities.

The third floor of the Pharmaceutical Sciences Center includes a 1,641-net-square-foot computer lab, which includes two computer-equipped classrooms. Students also use small classrooms in the Pharmaceutical Sciences Center and Center for Health Professions as study spaces when not used for classroom activities.

6. How the facilities encourage and support interprofessional interactions.

The School of Pharmacy is located on the USC Health Sciences Campus in close proximity to the Keck School of Medicine of USC and its nursing programs, the USC Division of Biokinesiology and Physical Therapy, the USC Chan Division of Occupational Science and Occupational Therapy, and the Ostrow School of Dentistry. The School and these other healthcare disciplines have been meeting over the last three years to develop meaningful interprofessional education (IPE) programs. A number of IPE sessions have been held on the Health Sciences Campus for case discussions that cover issues related to each of the disciplines. Students are invited to the sessions for opportunities to review, discuss and solve patient care issues; the most recent program involved more than 700 students. The IPE Committee, composed of physicians, pharmacists, nurses, physical therapists, occupational therapists and dentists, meets regularly at the USC Doheny Library to plan programs. In addition, groups of faculty and students from the various disciplines participate in numerous health fairs in Los Angeles and Orange counties throughout the year.

Shared student space in a central quad promotes social interaction among students enrolled in the health professions. The Health Sciences Campus has also constructed a new building (Soto Building) that houses a gym, providing modern exercise facilities and classes as well as spaces for student individual/group study.

7. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

In 1974, when the new pharmacy school was built, approximately 51,000 square feet were made available for offices, labs and classrooms. Today, the School occupies more than 72,000 square feet. Over the last several years, the School has negotiated for this additional 21,000 square feet with support from University administration. This additional space does not include the three School-run campus pharmacies. In addition, existing space has been renovated to increase the size of two major classrooms, provide a state-of-the-art student compounding laboratory, provide more laboratory and office space, supply recreational space for students, and house advanced research and technological equipment to better support research and education programs.

8. Any other notable achievements, innovations or quality improvements.

Beyond the significant classroom and compounding laboratory renovations in 2013 and 2014, the School has made the following significant additional facilities improvements: developed a Medication Therapy Management Center in a dedicated and newly remodeled suite in the Center for Health Professions in 2013; developed a second dedicated and newly remodeled suite for School advancement staff in the Center for Health Professions (thus freeing space for integrated student experiential, support and admissions staff in the Pharmaceutical Sciences Center); developed additional expansive and remodeled faculty offices in the Center for Health Professions; remodeled and expanded a new suite for the International Center for Regulatory Sciences in the Center for Health Professions; and expanded to occupy a major section of Dauterive Hall on the University Park Campus to house School faculty within the Schaeffer Center for Health Policy and Economics. The School has remodeled several shared core facility laboratories on the third, fourth and fifth floors of the Pharmaceutical Sciences Center and equipped them with advanced instrumentation for shared research use. Finally, the School has leased space on USC's satellite campus in Alhambra for the closed-door specialty pharmacy and has established a third ambulatory pharmacy on the University Park Campus.

9. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

The 2013 and 2014 USC graduating student survey responses, although still fairly high in the total percentage of those who strongly agreed or agreed, fell below national graduating student responses in three areas: 1) classrooms are conducive to learning (this issue was addressed in summer 2013 by increasing seating in the two major lecture halls); 2) laboratories and other non-classroom environments are conducive to learning (in late 2013, a new, enlarged laboratory was created in the Center for Health Professions to accommodate as compounding and simulation exercises, and additional, small breakout rooms were added to accommodate 15–20 students each); and 3) common spaces for relaxation in the School met my needs. Regarding the first two issues, student responses in 2014 were increased relative to 2013, showing recognition of the School's response in these areas. This last area is a continuing challenge for all on the Health Sciences Campus. While the Pharmaceutical Sciences Center lobby and the outdoor garden are gathering areas for students, the School's leadership is working with USC administration to improve the quality of shared student relaxation and social space on the

Health Sciences Campus. Space for a new student lounge has been recently made available in the Pharmaceutical Sciences Center.

The 2013 and 2014 faculty survey responses fell below national faculty responses in the strongly agree and agree category in the following areas: 1) adequacy of laboratory space; 2) sufficiency of physical facilities to fill responsibilities; and 3) accommodation of students with present resources. Although the School has dramatically expanded administrative and office space (see question 8, above), laboratory space remains a challenge. Our primary building, the Pharmaceutical Sciences Center, is more than 40 years old and cannot be flexibly adapted to ideal space configurations. We are working to address this challenge by: creating more core laboratories for housing centralized equipment; remodeling existing space for new faculty according to best practices; and reallocating space from investigators with less objective need and identifying potential shared faculty space with the Keck School of Medicine to expand our research laboratory footprint beyond one building. The first two issues likely relate to faculty perceptions about the adequacy of small-group breakout rooms and small classrooms to accommodate educational needs, already detailed in Standard 24. These areas are being actively investigated through collaboration with other schools and programs on the Health Sciences Campus.

4. College or School's Final Self-Evaluation

<input type="checkbox"/> Compliant	<input checked="" type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant with monitoring. Over the last several years, students have provided feedback to the School about inadequate seating in the two major classrooms, lack of student laboratory facilities and lack of a student lounge. Over the last year, the two large classrooms have been renovated to provide additional, wider seating, each equipped with power outlets; major renovation and rebuilding of student laboratory facilities was undertaken and the School now has a state-of-the-art compounding laboratory; space for a new student lounge has been recently allocated in the Pharmaceutical Sciences Center building. A new building on campus now provides additional study space and a Health Sciences Campus gym. While these improvements are substantial and important, space remains a challenge and we are working with the University to identify opportunities to address this issue.

University of Southern California / School of Pharmacy

28. Practice Facilities
To support the introductory and advanced pharmacy practice experiences (required and elective) and to advance collaboratively the patient care services of pharmacy practice experience sites (where applicable), the college or school must establish and implement criteria for the selection of an adequate number and mix of practice facilities and secure written agreements with the practice facilities.

2. College or School's Self-Assessment

The college or school collaboratively advances the patient-care services of its practice sites.	Satisfactory
The college or school establishes and implements criteria for the selection of an adequate number and mix of practice facilities.	Satisfactory
The college or school establishes and implements criteria to secure written agreements with the practice facilities.	Satisfactory
Before assigning students to a practice site, the college or school screens potential sites and preceptors to ensure that the educational experience would afford students the opportunity to achieve the required competencies.	Satisfactory
At a minimum, for all sites for required pharmacy practice experiences and for frequently used sites for elective pharmacy practice experiences, a written affiliation agreement between the site and the college or school is secured before students are placed.	Satisfactory
The college or school identifies a diverse mixture of sites for required and elective pharmacy practice experiences.	Satisfactory
The college or school has sites that provide students with positive experiences in interprofessional team-based care.	Satisfactory
The academic environment at practice sites is favorable for faculty service and teaching.	Satisfactory
There is adequate oversight of practice sites and efficient management and coordination of pharmacy practice experiences.	Satisfactory
The college or school periodically assesses the quality of sites and preceptors in light of curricular needs and identifies additional sites when needed. The college or school discontinues relationships that do not meet preset quality criteria.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions
<input checked="" type="checkbox"/> Capacity assessment (surplus or shortage) of the required and elective introductory pharmacy practice experiences (IPPEs) and advanced pharmacy practice experiences (APPEs) sites and preceptors for present and, if applicable, proposed future student enrollment
<input checked="" type="checkbox"/> Strategies for the ongoing quantitative and qualitative development of sites and preceptors and formalization of affiliation agreements
<input checked="" type="checkbox"/> How the college or school is collaborating with practice sites to advance patient care services

- How the college or school assesses the quality of sites and preceptors in light of curricular needs and discontinues relationships that do not meet preset quality criteria
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. Capacity assessment (surplus or shortage) of the required and elective introductory pharmacy practice experiences (IPPEs) and advanced pharmacy practice experiences (APPEs) sites and preceptors for present and, if applicable, proposed future student enrollment.

Capacity charts for IPPEs and APPEs are in **Appendices 28.2.1 and 28.3.1**. The School has an adequate supply of APPE/IPPE sites. An increase in pharmacy schools, a decrease in hospital sites to accommodate students and increases in the complexity of placements are areas of concern. Future changes in enrollment numbers must consider the availability of experiential programs.

A surplus of IPPEs exists in community pharmacy practice. IPPEs in hospital pharmacy practice are adequate; however we have a significant need for increased sites in part due to the reorganization of the P2 IPPE program. In 2014, LAC+USC Medical Center discontinued the parenteral therapy/sterile compounding IPPE, which every student previously completed during P2. Each rotation provided nearly 90 hours and served as the “anchor” hospital IPPE. To compensate for this loss and improve overall hospital experience, we changed the P2 IPPE program to include both a hospital and community experience. The revised program, PHRD 561 Pharmacy Practice and Experience III, replaced PHRD 561 Parenteral Therapy Externship. IPPE scheduling is now an eight-hour, one-day-per-week experience for P1-P3.

The Office of Professional Experience Programs (PEP) is working to increase the number of IPPE practice sites. Despite an initial shortage, we have placed all P1s and P2s in both hospital and community IPPEs for 2014-15. P1s will complete 80 hours split between hospital and community practice and an additional 40 hours in health screening and practical training. P2s will complete 80 hours split between hospital and community sites, and an additional 32 hours in sterile-compounding training, health fair screening, patient counseling and self-care practicums. PEP has also recruited sites for P3s to complete 32 hours of IPPE in an ambulatory care setting in addition to participation in health fair screenings and elective courses. For future years, the IPPE structure and schedule will be modified as part of the new curriculum, which may include additional scheduling changes to maximize efficient use of practice sites and ensure students have experiences that are meaningful, progressive in complexity, and in a number that meets or exceeds accreditation standards.

2. Strategies for the ongoing quantitative and qualitative development of sites and preceptors and formalization of affiliation agreements.

The PEP office maintains relationships with established sites through frequent communication and collaboration. Recruitment strategies for new sites include direct contact with new sites in the region, networking at local, state and national conferences, and reaching out to sites that previously accepted students. All preceptors have the opportunity to become adjunct faculty, and are sent the Preceptor

Letter, a monthly publication from the Pharmacist's Letter featuring preceptor training and tools. Each site has a designated coordinator who serves as liaison between the School and site and works directly with the PEP office to establish site availability, maintain affiliation agreements, coordinate the onboarding processes and assist with student evaluations/grades.

New preceptors and experiential sites are reviewed by the PEP faculty through site visits or discussion with preceptors. If the preceptor/site fits our program needs and is willing to follow our mandates, they receive number of important items. For APPEs, example syllabi with required elements for each course are included in packets for potential new preceptors/sites. All new preceptors/sites must provide a complete syllabus and affiliation documents prior to being assigned students. Syllabi are reviewed and assessed by the director of Experiential Programs. For IPPEs, a standard syllabus is provided to preceptors, including all expectations of students and required assignments.

The School utilizes a standard affiliation agreement for all IPPE and APPE sites (see **Appendix 28.1.1**). The agreement outlines the School's, University's and experiential site's rights, responsibilities, commitments and expectations. The agreement also characterizes the expectations for termination by either side, including provisions for sufficient advance notice to permit development of alternative sites. Experiential site issues such as student healthcare benefits and malpractice coverage are also outlined in the agreement.

3. How the college or school is collaborating with practice sites to advance patient care services.

The School has been highly effective in collaborating with practice sites to provide patient care services. Faculty innovations in clinical practice and collaboration with practice sites have made a significant impact on IPPE and APPE programs, including an increase in the number of sites, as well as providing students a breadth and depth of experiences. In 2012, faculty received a \$12 million Center for Medicare and Medicaid Innovation grant to provide clinical pharmacy services to underserved communities in East Los Angeles, allowing for the addition of 13 ambulatory care sites and the expansion of the P3

IPPE program. The USC Medication Management Center, established in 2013, is a highly innovative faculty practice that has become a significant learning site for APPE students. The School continues to collaborate closely with the three University-owned hospitals. In the last three years, two additional ambulatory care faculty members have been hired to provide clinical services at Keck Hospital and serve as preceptors, and the School is considering adding more such positions to benefit practice sites and the School.

4. How the college or school assesses the quality of sites and preceptors in light of curricular needs and discontinues relationships that do not meet preset quality criteria.

The directors of the Experiential and IPPE Programs carefully review student evaluations of IPPEs and APPEs to ensure experiences are in line with objectives and competencies expected. Experiential sites with deficiencies are contacted by PEP faculty to determine whether the preceptor can make necessary improvements for subsequent rotations. If not, those preceptors and sites are discontinued. The need to remove sites or preceptors is infrequent.

5. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The School carefully selects IPPE and APPE preceptors based on meetings with potential preceptors and evaluations from students at experiential sites. The School's affiliation agreement and syllabi

thoroughly describe the expectations for the preceptor, site and students. With the exception of hospital sites for IPPEs, the availability of experiential sites is sufficient. Students gain exposure to a wide variety of practice settings, patient demographics and medical/drug-management problems. Collaboration between School faculty and practice sites is extremely productive, providing advancement of patient care at the practice sites as well as learning opportunities for students.

6. Any other notable achievements, innovations or quality improvements.

The School recently appointed a director of IPPE Programs, a full-time faculty member with 30% administrative time dedicated to IPPE programming. The School is planning to add one additional faculty and one staff member to PEP to further strengthen the School's experiential programming and allow for increased learning sites, as well as to help maintain and improve relationships with practice sites.

7. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

USC pharmacy students scored the School lower than the national responses on one item: Sites available for IPPEs were of high quality (22.7% disagreed or strongly disagreed vs. 15% national). A director of IPPE Programs is now in place to strengthen the IPPE sites and preceptors. The School will continue to monitor the quality of IPPE sites closely. Preceptors responded lower than the national average regarding support from PEP (13.9% disagreed or strongly disagreed vs. 8.5% national). A new support position will help increase PEP support. Some preceptors might not have recognized that the PEP office was the same as the Office of Experiential Education (referred to in the survey), which may have influenced response. A change in the office name is currently being considered. In addition, preceptors may not understand the full range of program support available; for example, 19% of preceptors disagreed that they had access to library services, but all preceptors have access to Norris Medical Library. To better communicate this, the pharmacy librarian has attended the annual preceptor meeting for the past two years. The response rate for the preceptor survey was low, perhaps due to timing of survey release, email spam-blocking and "survey fatigue," especially for those who teach at multiple schools. Another survey of preceptors, possibly using postal mail or a more user-friendly process, will be conducted in spring 2015.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant without required monitoring. Student responses were generally favorable (90th percentile) except for the lower agreeable response (78%) regarding the quality of IPPE sites. Faculty gave low favorable responses regarding resources needed to accommodate students at clinical sites (72.7%). These issues are being addressed with the addition of experiential faculty/staff to further expand site recruitment/development, and scheduling and curricular changes to enhance experiential programming. Preceptor responses showed concern for: 1) knowing how to utilize harassment and discrimination policies (66.7% favorable); and 2) receiving support from PEP (61.4% favorable). A new

position is being added to support preceptors. Information on harassment/discrimination is now provided at every preceptor meeting. Preceptors also will complete harassment prevention training.

University of Southern California / School of Pharmacy

29. Library and Educational Resources

The college or school must ensure access for all faculty, preceptors, and students to a library and other educational resources that are sufficient to support the professional degree program and to provide for research and other scholarly activities in accordance with its mission and goals. The college or school must fully incorporate and use these resources in the teaching and learning processes.

2. College or School's Self-Assessment

The college or school ensures access for all faculty, preceptors, and students to a library and other educational resources that are sufficient to support the professional degree program and to provide for research and other scholarly activities in accordance with its mission and goals.	Satisfactory
The college or school fully incorporates and uses library and other educational resources in the teaching and learning process.	Satisfactory

3. College or School's Comments on the Standard

Focused Questions

- The relationship that exists between the college or school and their primary library, including the level of responsiveness of the Director and staff to faculty, student, staff needs, and any formal mechanisms (e.g., committee assignments) that promote dialog between the college or school and the library.
- A description of how the college or school identifies materials for the library collection that are appropriate to its programs and curriculum and assesses how well the collection meets the needs of the faculty and students
- A description of computer technology available to faculty and students
- A description of courses/activities throughout the curriculum in which students learn about the available educational resources
- A description of library orientation and support for faculty and preceptors
- A description of how remote access technologies and mechanisms that promote use of library information from off-campus sites by faculty, students, and preceptors compare with on-campus library resources
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements
- Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

(School comments begin here)

1. The relationship that exists between the college or school and their primary library, including the level of responsiveness of the Director and staff to faculty, student, staff needs, and any formal mechanisms (e.g., committee assignments) that promote dialog between the college or school and the library.

The USC Norris Medical Library, located close to the School on the Health Sciences Campus, is the primary library resource for the School's faculty, adjunct faculty and students. Its collection contains 70,036 print and electronic books, 3,044 subscriptions to print and electronic journals, and 407 databases. The library spans 38,923 square feet on three floors, seating 488 people.

The Norris Library is staffed by 43.69 FTE, including 14.75 professionals with master's degrees and one bioinformatics specialist with a PhD. The library is part of the USC Health Sciences Libraries, whose director reports to the dean of the USC Libraries.

A librarian serves as the liaison between the Norris Library and the School of Pharmacy and maintains a collegial working relationship with faculty, staff and students. The librarian provides curriculum-integrated instruction on the selection and use of information resources. To stay aware of curricular changes and advise faculty on information resources pertinent to courses, the librarian is a member of the School's Curriculum Committee and Inter-Module Coordinating Council, and attends Pharmacy Faculty Assembly meetings.

The liaison librarian meets annually with representatives from the Associated Students of the School of Pharmacy to gather student feedback. Requests for additions to the collection, new library services and educational offerings are shared at these meetings and can also be submitted via an online form. Requests are evaluated and responded to by either the library director, associate director for Collection Resources or liaison librarian. Library staff seeks faculty input when new information resources are considered for purchase.

All USC faculty, staff and students also have access to the print and electronic resources of the 14 libraries located on the University Park Campus. Libraries in USC-affiliated healthcare facilities near the Health Sciences Campus are also open to School of Pharmacy students, staff and faculty.

2. A description of how the college or school identifies materials for the library collection that are appropriate to its programs and curriculum and assesses how well the collection meets the needs of the faculty and students.

The Norris Library collects pharmacy and pharmaceutical-related books and journals at the Research Level (as defined by the standards of the Association of Research Libraries), including purchase of most available English-language books, research journals and reference tools. Collection support is adequate for in-depth research and use in student coursework. The collection of multimedia materials and educational software reflects specific recommendations by faculty members.

Selection decisions are made by the associate director for Collection Resources, with input from the liaison librarian. This includes, but is not limited to, a review of all new English-language biomedical publications as reported by Rittenhouse Book Distributors. As noted above, student and faculty feedback is routinely requested and standard publication lists are checked to ensure relevant titles are added as they become available.

The collection is assessed using multiple modalities. Usage statistics for online materials and circulation statistics for print materials are examined to determine areas of interest and needs for additional materials, and holdings are compared with libraries supporting similar programs. Surveys conducted by the School address how well course content is supported by available information resources, and the liaison librarian surveys students on the effectiveness of the library collection for specific subject areas. Results are shared with the associate director for Collection Resources.

3. A description of computer technology available to faculty and students.

The Norris Library maintains 83 computers for USC users (including two computer classrooms), and five computers for public use. Approximately 50 applications are available on all computers, including Microsoft Office, standard productivity software, educational software, statistics software and other utilities. Three multimedia stations provide scanners, digitizing equipment and specialized graphics-editing software. Printers, including one color printer, are available on each floor. Wireless access is available throughout the building.

4. A description of courses/activities throughout the curriculum in which students learn about the available educational resources.

The liaison librarian works closely with faculty to design the instructional content that librarians provide, and helps faculty select and integrate information resources into classes where librarians do not provide instruction. Students are encouraged to contact the liaison librarian for in-depth instruction. The librarian also provides classes on demand to any PharmD course, usually focused on a specific topic, such as searching a specialized database, utilizing citation management software or using advanced search techniques.

The liaison librarian teaches students effective use of library resources throughout the program using a scaffold model that introduces information resources at the point of need. Subject guides focusing on each year of the program provide access to required readings and additional materials needed to master course content.

In Year 1, the liaison librarian provides a one-hour orientation on available information resources. In the 501 course, the librarian provides a lecture on databases, books and journals available for finding chemical and pharmaceutical information. In the 509 course, the librarian provides a lecture on drug monograph content and the various drug references available (e.g., Facts & Comparisons eAnswers).

In Year 2, the librarian provides information pertaining to the concept of evidence-based practice and types of information used to support it in the 508 course. The 552 course presents information resources pertaining to drug targeting and delivery and how to find information on clinical trials.

In Year 3, the librarian works with pharmacy residents to co-write case studies focusing on disease states and corresponding drug therapy, and to teach third-year students how to enter USC-licensed resources while away from campus on fourth-year APPE rotations.

5. A description of library orientation and support for faculty and preceptors.

New faculty members and preceptors receive a handout about information resources, contact information for the liaison librarian and information on how to obtain a USC e-resources account from the library. The librarian presents at the annual preceptor day. All faculty and preceptors can contact the library and/or liaison librarian, and may make appointments with librarians to go over specific information needs in more depth.

6. A description of how remote access technologies and mechanisms that promote use of library information from off-campus sites by faculty, students, and preceptors compare with on-campus library resources.

The library has made a pronounced shift toward licensing electronic materials because: 1) electronic materials are updated more frequently than print materials, which supports timely, accurate pharmacy practice and education; 2) access to materials can be provided to patrons both on and off campus; and 3) patrons prefer electronic materials. While historical and older resources (pre-1995) are generally less available online, the majority of current journal holdings are available electronically, as are nearly all required course textbooks and major reference works, databases and point-of-care products, including drug and clinical information. Full-text electronic resources can be accessed both on and off campus, with a USC ID needed for off-campus users.

7. How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard.

The Norris Library has adopted the AACP standards as a model for library services for the School of Pharmacy. When questions arise about the role of the liaison librarian or library, standards are consulted for guidance. A library representative serves on the Self-Study Committee.

8. Any other notable achievements, innovations or quality improvements.

9. Interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms.

Responses to three of the five survey questions were in the 90th percentile range and were higher than the national responses: questions 82 and 83 on the student survey (on-campus access to educational resources and access to library and other educational resources) and question 25 on the faculty survey (access to library and other educational resources). Two responses were below average: question 28 on the faculty survey (program’s resources can accommodate present student enrollment), which does not concern library services specifically and therefore is difficult for librarians to ameliorate; and question 41 on the preceptor survey (access to library and educational resources). Librarians have added additional outreach and presentations to preceptors to inform them of library resources.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and requires no monitoring.

University of Southern California / School of Pharmacy

30. Financial Resources

The college or school must have the financial resources necessary to accomplish its mission and goals. The college or school must ensure that student enrollment is commensurate with its resources.

2. College or School's Self-Assessment

The college or school has the financial resources necessary to accomplish its mission and goals.	Satisfactory
The college or school ensures that student enrollment is commensurate with its resources. Enrollment is planned and managed in line with resource capabilities, including tuition and professional fees.	Satisfactory
Tuition for pharmacy students is not increased to support unrelated educational programs.	Satisfactory
The college or school has input into the development of and operates with a budget that is planned, developed, and managed in accordance with sound and accepted business practices.	Satisfactory
Financial resources are deployed <u>efficiently</u> and <u>effectively</u> to:	Satisfactory
support all aspects of the mission, goals, and strategic plan	Satisfactory
ensure stability in the delivery of the program	Satisfactory
allow effective faculty, administrator, and staff recruitment, retention, remuneration, and development	Satisfactory
maintain and improve physical facilities, equipment, and other educational and research resources	Satisfactory
enable innovation in education, interprofessional activities, research and other scholarly activities, and practice	Satisfactory
measure, record, analyze, document, and distribute assessment and evaluation activities	Satisfactory
ensure an adequate quantity and quality of practice sites and preceptors to support the curriculum	Satisfactory
The dean reports to ACPE, in a timely manner, any budget cuts or other financial factors that could negatively affect the quality of the professional degree program or other aspects of the mission of the college or school.	Satisfactory
Business plans, including revenue and expense pro forma for the time period over which the change will occur and beyond, are developed to provide for substantive changes in programmatic scope or student numbers.	Satisfactory
The college or school ensures that funds are sufficient to maintain equivalent facilities (commensurate with services and activities) across all program pathways.	Satisfactory

3. College or School's Comments on the Standard**Focused Questions**

- How the college or school and university develop annual budgets (including how the college or school has input into the process) and an assessment of the adequacy of financial resources to efficiently and effectively deliver the program and support all aspects of the mission and goals.
- An analysis of federal and state government support (if applicable), tuition, grant funding, and private giving
- A description of how enrollment is planned and managed in line with resource capabilities, including tuition and professional fees
- A description of how the resource requirements of the college or school's strategic plan have been or will be addressed in current and future budgets
- How business plans were developed to provide for substantive changes in the scope of the program or student numbers, if applicable
- An assessment of faculty generated external funding support in terms of its contribution to total program revenue
- How the college or school is applying the guidelines for this standard in order to comply with the intent and expectation of the standard
- Any other notable achievements, innovations or quality improvements

(School comments begin here)

1. How the School and University develop annual budgets, and an assessment of the adequacy of financial resources to efficiently and effectively deliver the program and support all aspects of the mission and goals.

USC operates under a decentralized budget system called Revenue Center Management. This approach vests financial-management responsibility and authority directly with the deans of each school. All schools in the University are responsible for developing realistic revenue and expenditure budgets for future years and managing fiscal performance to meet their proposed bottom-line projections. The School of Pharmacy has never had a budget deficit since the inception of Revenue Center Management in 1982. Under these circumstances, we have been able to efficiently and effectively deliver the School's program and support all aspects of our mission and goals.

2. An analysis of federal and state government support, tuition, grant funding, and private giving.

Since the University is a private institution, government support is not provided in the same manner as to public universities. Our operating budget is derived from tuition generated through our many educational programs including the PharmD and MS programs, indirect costs generated through faculty research activity, sales and services at our three retail pharmacies, and advancement activity (gifts and endowment). The University provides select assistance with special initiatives such as capital construction and transformative faculty recruitment. Available funds in 2014–2015 are more than adequate to support the School, with the following anticipated yields: 1) operating budget = \$53,212,553; 2) research contracts and grants = \$14,296,233; 3) Los Angeles County+USC Medical Center contract = \$659,956; 4) Norris Cancer Hospital/Keck Hospital = \$2,222,073; 5) gifts = \$12,333,194; and endowment principal = \$17,223,113, providing a total of \$99,947,122.

3. A description of how enrollment is planned and managed in line with resource capabilities, including tuition and professional fees.

About 67% of the School's operating budget is generated by tuition income from the PharmD program. Because of the School's diversified sources of income, such as overhead on contracts and grants, gifts, endowment and tuition funding from the Regulatory Science Program and the School's three retail pharmacies, the School has flourished as one of the few positive revenue units for the University. The School's enrollment has increased in incremental amounts each year; we now accept 200 first-year students into the PharmD program annually, which historically has resulted in a stable class of between 190-192. This steady but incremental growth was assisted by a \$1.5 million renovation of our two largest classrooms in 2013. With a commitment to maintain the quality of the classroom environment, sustain a low faculty-to-student ratio, allow admission only of students who are capable of success in our program and ensure we are able to place graduates with potential employers, the School is successfully balancing class size with available resources.

4. A description of how the resource requirements of the School's Strategic Plan have been or will be addressed in current and future budgets.

Fulfilling the goals of the School's Strategic Plan requires resources. Resource-intensive goals include enhancing the campus environment to foster high performance; fully preparing the next generation of leaders; and promoting synergistic collaborations to enhance research and practice. The School has made major improvements in facilities over the past five years, including expansion of the Center for Health Professions, renovation and development of shared translational laboratory facilities, major classroom renovations and construction of the compounding laboratory. The School has added talented faculty in areas of strategic priority, including community and ambulatory health, chemical biology, immunology and health economics. The School has increased the budget for faculty research and scholarship concomitant with creation of a centralized Office of Research Affairs, which supports the entire spectrum of research activity. Resources for each of these goals is being derived from the development of new revenue streams as well as reallocation of funds freed by administrative restructuring for more efficiency. The School anticipates generation of additional revenue to support the mission through expansion of existing professional and science MS programs and the new Master of Healthcare Decision Analysis, as well as significant support from research grants to the USC Schaeffer Center and an estimated \$20 million in new financial contributions through 2019 for patient care provided by the new closed-door specialty pharmacy slated to open in 2015.

5. How Business Plans were developed to provide for substantive changes in the scope of the program or student numbers.

The School's business plan is tightly coordinated with the Strategic Plan. The business plan anticipates resources needed for the Strategic Plan by projection of changes over a multi-year window and identification of potential new revenue streams. Without compromising the quality of the PharmD educational experience, the School increased enrollment from 185 students in 2010 to 200 students in 2014, thus increasing tuition revenue by \$700,000. This number represents a stable enrollment for the School in the present environment. This new revenue has provided the School with an opportunity to bring in additional faculty, and has helped support existing and new programs.

6. An assessment of faculty-generated external funding support in terms of its contribution to total program revenue.

The School of Pharmacy is part of a Research I university and thus has a significant external funding portfolio consisting of a complement of federal grants, as well as funding from pharmaceutical and biotechnology companies, managed-care organizations and foundations. The total NIH funding received

by the School over the past five years totals \$43,334,576. This funding supports materials and supplies, research staff and graduate students for the sponsored research. Additionally, about 25% of active research faculty members' salaries are paid from research grants. Overhead recovery from sponsored projects to cover expenses associated with facilities, support services and other related items comprised 6% of the total School revenue over the past fiscal year.

7. How the School is applying the guidelines for this Standard in order to comply with the intent and expectation of the Standard.

The School as a private institution has been in existence for more than 110 years, has gained an outstanding reputation during this time and has been fortunate to have strong financial support from many alumni. The School has always been mindful of the need to ensure financial stability. While tuition from the Pharm D program has been important, other MS programs such as regulatory science, pharmacoconomics and policy, pharmaceutical sciences, and the newly established healthcare decision analysis provide new revenue sources as well as add to the School's reputation for educational excellence. In addition, the three School-run community pharmacies are an important revenue source. The School is in the process of adding new faculty and staff, and gaining new space and renovating existing space, including classrooms, student labs and student lounge areas to achieve curricular and research goals and provide an outstanding environment for students, faculty and staff.

8. Any other notable achievements, innovations or quality improvements.

Several renovation projects have been recently completed, such as the increase in capacity of the School's two major classrooms (PSC108 and PSC112), and construction of a new compounding lab and a new student lounge. More office space and remodeled laboratory space has been made available within the School, as shared research space and as individual space for newly recruited faculty. New technological systems for both learning and security are being implemented. The formation of the Schaeffer Center for Health Policy and Economics necessitated investment in temporary space in the Gateway Center on the University Park Campus, and additional investment to relocate and occupy space in Dauterive Hall, the Schaeffer Center's permanent home. In addition to providing high-quality accommodations for this preeminent center, this space provides a footprint for faculty on the University Park Campus that we plan to capitalize on with the possible growth of new undergraduate offerings to better serve pre-pharmacy students.

4. College or School's Final Self-Evaluation

<input checked="" type="checkbox"/> Compliant	<input type="checkbox"/> Compliant with Monitoring	<input type="checkbox"/> Partially Compliant	<input type="checkbox"/> Non-Compliant
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5. Recommended Monitoring

(School comments begin here)

The School is compliant and does not require monitoring. The finances of the School of Pharmacy are in good order and the School has been historically in a good economic position.