Consolidated Assessment Plan Grid AY2015-2016 Assessment Activities by ALL Committees for AY2015-2016

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Assessment Dashboard

Date Updated	Result requiring action	Action	Timeline for implementing Action	Expected time for change	Reassess cycle	Progress	Resources	Responsibility
1/28/16	Patient Care Process (Std 10.8)	Update Care plan & rubric throughout curriculum	Ongoing	Summer 2016	2016-2017	On track	Practice/ Experiential	Curriculum/ Experiential Committee
3/16/16	Student meeting attendance	Add supplemental question to 2015-2016 student survey	Done	April 2016	2015-2016	Completed	N/A	Assessment Committee
1/28/16	Alumni survey response rate	Social media network linkage to alumni	??		2015-2016	Unknown		
1/28/16	Faculty survey Q2, Q6, Q10, Q35	Completed action from 2014-2015	Done	Verify improvements 2016 faculty survey	2015-2016	Completed	N/A	N/A
5/31/16	Obtaining Faculty Data – research, service, faculty development & involvement	Meet with department chairs to create data tracking	Create data sheet by Summer 2016	Summer 2016	2016-2017	Not started *pending faculty e- portfolio	Unknown	Assessment Committee Chair
3/16/16	Obtaining student research data	Add questions to student survey	Done	April 2016	2015-2016	Completed	N/A	Assessment Committee
9/27/16	Part 3 Exam Results	Focus Group to identify opportunities to improve results	Done	2017-2018	2017-2018	Complete	Faculty and Students	Assessment Committee
9/28/16	PCOA Results	Following	Ongoing	April 2017	2016-2017	On track	N/A	Assessment

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		assessment of						Committee
		results, PCOA						
		has been						
		incorporated						
		in PMD 812						
9/28/16	Alumni and	Curriculum	Ongoing	April 2017	2016-2017	On track	N/A	Assessment
	Preceptor	improvements		_				Committee
	Survey Results	to improve						
	-	knowledge						
		and skills						

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Assessment committee will be responsible for reviewing all data.

Director of As	Director of Assessment & Institutional Initiatives								
QUESTION TO ASSESS	Assess cycle & Group(s) to Provide Data	ACPE Standard & Strategic	Outcome Measure	TARGET	OBSERVATION	ACTION			
		Initiative							
NABPLEX & NYS Pharmacy Licensure Have DYCSoP graduates achieved a licensure pass rate at or above the National or State average?	Annual Dean	16.3 & 6.2.4	Percentage of graduating students passing board examinations NAPLEX MPJE NYS Part 3 exam	>state and national pass rate on 1st attempt	Part 3 Exam 100	NAPLEX and MPJE A focus group will be conducted through the executive council in order to identify factors contributing to performance Part 3 Exam: A focus group was scheduled consisting of 2 faculty facilitators and five students. Results of the focus group was forwarded to Executive Council for further action to improve student performance			

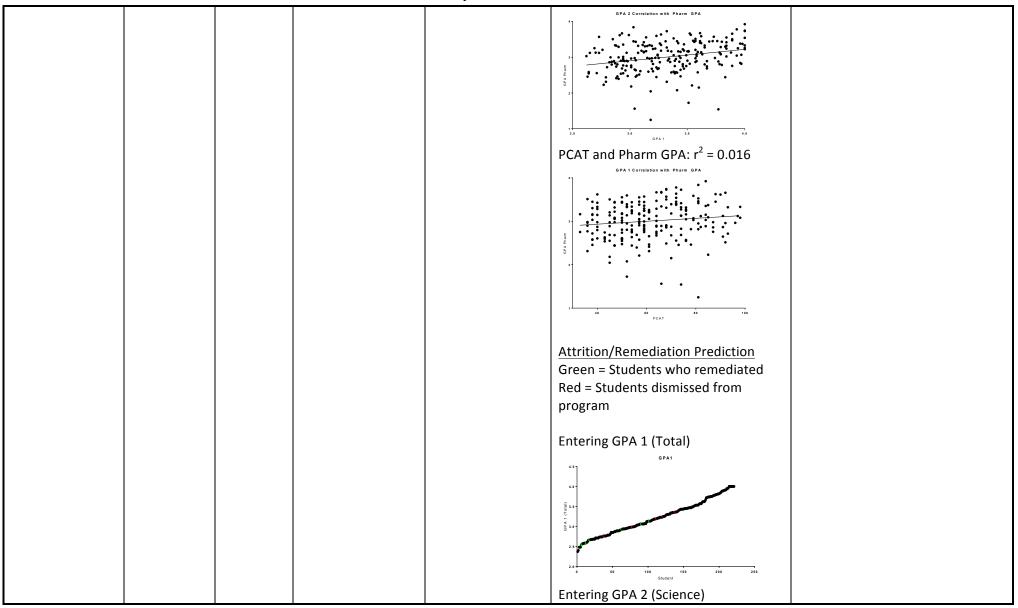
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	ı	l	T	Titles by Title Committees for Title 2010
				MPJE Pass Rates (2 nd Trimester) DYCSOP State National DYC: 77.26% State: 82.07% National: 83.77%
Student Achievement How many of our students are capable of successfully completing the planned curriculum in the designated time frame?	Annual Academic Performance & Office of Student Affairs	16.3, 17 & 5.3, 6.2.4	Percentage of students completing the PharmD program in 4 academic years Progressing to next year in program Number of Student on Probation – Total Number of students remediating at least one course at the end of the academic year (total)	 ≥95% completion rate Completing in 4 years (Class of 2016): 65/72 = 90% completion ≥95% of 206/214 progressed to next year of 206/214 progressed to nex
Student Achievement	Annual Academic	17.2 &	Percentage of students: • with program	• ≥75% of students with QPA of Students with QPA of QPA of 3.0 or higher Students will have a 3.0 or higher? • 161/282 (57%) students with QPA of goal – Do we expect that 75% of our students will have a 3.0 or higher?

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How many of our students are high performing?	Performance & Office of Student Affairs	6.2.5	QPA \geq 3.0 • on the Dean's list (QPA \geq 3.5)	higher • ≥10% of students on Dean's list	• 38/282 (13%) students on Dean's list	
Diversity How diverse are DYCSoP enrollees?	Annual Admissions Committee & Office of Student Affairs	16	At least 15% of enrollees will be non-Caucasian. At least 15% of enrollees will be international students	>15% of enrollees will be non- Caucasian in each class >5% of enrollees will be international students	 P1 Class: 14/72 (19%) students are non-Caucasian P2 Class: 23/76 (30%) students are non-Caucasian P3 Class: 12/74 (16%) students are non-Caucasian P4 Class: Data no available via PharmCAS *Some students did not report ethnicity International Students P1 Class: 9/72 (13%) students are non-US Citizens, 8/72 (11%) Canadians P2 Class: 5/76 (7%) students are non-US Citizens, 4/76 (5%) Canadians P3 Class: 3/74 (4%) students are non-US Citizens, 2/74 (3%) Canadians P4 Class: Data no available via PharmCAS 	No Action Required
Admission Criteria as a Predictor of Student Success How well do our admissions criteria predict academic performance?	Annual Office of Student Affairs/ Admissions Committee	16	Correlation of admission criteria to academic performance in program (cognitive & noncognitive)	$r^2 \ge 0.80$	GPA entrance and program correlation GPA1 and Pharm GPA: r ² = 0.064 GPA1 CORRELATION WITH PHARM GPA GPA2 (Science) and Pharm GPA: r ² = 0.073	No correlation was found. Data was forwarded to Executive Council and discussion will be had with the Admissions Committee in attempt to identify more accurate predictors of academic performance for the 2016-2017AY

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Internal Student survey	Annual Director of Assessment	25 &	Ratios for each question on the internal student	Ratios for each item will be >2	PCAT Score PCAT Score *See AY2015-2016 Current Student Survey-Executive Report Tier 1 Concerns Ratio (Agree/Disagree)	Tier 1 Concerns Q7: Memo sent to curriculum to discuss discussions in class (last year was 0.6) with suggestion to notify
		6.3	survey		Q7 How often did you contribute to class discussion:0.8 Q8 How often did you discuss ideas from readings or class with faculty outside of class:0.5 Q59 Open house or school fair influenced selection of DYCSoP:0.79 Tier 2 Concerns Q3 How often do you work on teambased active learning outside of class:1.3 Q9 How often do you receive prompt feedback from faculty on academic performance: 1.7 Q10 How often do you receive instructive feedback from faculty on academic performance: 1.4	faculty about student involvement Q8: Reword question to obtain useable information: "Met with faculty or tutor if struggling with topics" Q59: Memo sent to Admissions (down from last year: 1.1) but no action recommended Tier 2 Concerns Q3: no concern or action necessary Q9: improved from last year (0.9); continue to track Q10: improved from last year (0.7); continue to track -also add to survey question "when requested"

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C	Annual 2	Ratios for each	Ratios for each item	areas on campus: 1.9 Q47 Available common space for relaxation/socialization: 1.3 Q60 Personal visit influenced choice of DYCSoP: 1.5 Q62 Website influenced choice of DYCSoP: 1.2 Q63 PharmCAS influenced choice of DYCSoP: 1.2 Q56 Satisfied with Experiential Education Office's placement process as a whole for APPE's: 1.0 Common Comments: 1.Faculty doing great/positive office hours (62) Examsoft (8) 2.Faculty being condescending/rude/little care (25) 3.Favoritism with fraternities/students (5) 4.Finding faculty/office hours (2) 5.Accusations of faculty being unprofessional (2) 6.Faculty problems with materials/mistakes (5) 7.Fraternities having access to old exams (2) 8.Last minute changes in schedules (2)	decision making" Q46: Improved from last year (0.6); send memo to executive council Q47: Improved from last year (0.8); send memo to executive council Q60: Decreased from last year (2.1); include in memo to admissions Q62: Decreased from last year (2.0); include in memo to admissions Q63: Increased from last year (1.7); include in memo to admissions Q56: Pass memo to experiential office, however it was noted that new management is in place from the time survey was administered *Next survey should include a question about whether discussion with Alumni influenced decision Comment actions: The summary comments were presented at the October faculty meeting to notify faculty and staff about comments Comments specific to Experiential were sent to Mike MacEvoy Comments specific to staff and improvements were sent to Executive Council Data compared to previous year:
Survey	Director of	question on the graduating student	will be >2 or at/above the average	Survey-Executive Report	Q25: Not available Q34: 2.42 (2015) Improved

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	Accecement		CHTMAN	national categorical	Tier 1 Concerns Ratio (Agree/Disagree)	Q48: 1.0 (2015) Improved
	Assessment	6.3	survey	rating	None identified (Agree/Disagree)	Q48: 1.0 (2015) Improved Q68: 3.6 (2015) Improved but should
		0.3		Tatilig	None identified	be improved more now with Seminar
					Tier 2 Concerns	Series
					Q25 Recognize/address cultural	Q73: 3.8 (2015) Declined
					disparaties in Access to and delivery of	Q74: 11 (2015) Greatly declined
					care:3.0 (Peer = ∞)	Q78: 5 (2015) Declined
					Q34 IPPE valuable for APPE prep: 4.7	Q78. 3 (2013) Decimed
					(Peer = 5.8)	Memo was sent to Experiential with
					Q48 Access to guidance and career	the Tier 2 concerns associated with
					planning: 3.3 (Peer = 7.3)	IPPE as well as any comments
					Q68 Aware of opportunities to participate	associated with IPPE
					in research with faculty:4.7 (Peer = 8.9)	
					Q73 Study areas met needs:2.4 (Peer =	Memo was sent to the Curriculum
					10.2)	Committee about Q25 and career
					Q74 Common spaces and places of	planning/guidance as well as the
					relaxation met needs:1.8 (Peer = 8.9)	comments about self-care and
					Q78 I would choose to study pharmacy	expanding PK/intro to pharmacology
					again:3.3 (Peer = 11.3)	
					*note was made in executive summary	Memo was sent to the Executive
					that we are performing overall better than	council about guidance/career
					peers	planning as well as space requests
					Common comments of concern:	
					"Advanced self-care would be beneficial"	
					"expand teaching of pharmacokinetics	
					and intro to pharmacology"	
					Increase career planning	
					Research opportunities were minimal	
					Study areas need to be improved	
					College resources and support should be	
					improved	
Graduate	Annual	15	Percentage of	100% of graduating	Self-reported in May for DYC graduation	No Action Required
Employment			graduating students	students will have	Graduating Student Employment: 90%	1
	Director of	&	who have been	been offered or	(n=60)	
How many of our	Assessment		accepted into	accepted a		
students are		3.1, 5.3,	residency or	pharmacy job	Graduating Students with:	
continuing their		2.4.5	fellowship programs		Pharmacy Job: 75% (n = 45)	

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pharmacy skills				% of our students	Non-Pharmacy Job: 5% (n = 3)	
after graduation?				who applied and	Residency/Fellowship: 10%	
				obtained a residency	Unknown: 10% (n = 6)	
				or fellowship will be		
				at/or above the	Residency/Fellowship:	
				national average	DYC = 13/20 (65%) Matched	
					*National = 68%	
				% of our students		
				who applied and	2 nd Year Residency/Fellowship:	
				obtained a 2 nd year	DYC = 5 (unknown how many students	
				residency or	applied for PGY2)	
				fellowship will be	*National = 75%	
				at/or above the		
				national average	*ASHP Statistics	
Alumni Survey	Annual	25.2	Ratios for each	Ratios for each item	*See AY2015-2016 Alumni Survey-	**Increased record of contact alumni
			question on the	will be >3 or	Executive Report	through facebook page and linked-in
	Director of	&	alumni survey	at/above the average	······································	were lead to increased feedback
	Assessment			national categorical	Tier 1 Concerns Ratio (Agree/Disagree)	,
		6.3		rating	None identified	Comparison to last year was not made
				B		due to only having two replies last
					Tier 2 Concerns	year
					Q15: The current Dean encourages	, ,
					alumni to stay involved: 3.0 (Peer = 6.3)	Actions:
					Q32: As a student I could assess health	Memo was sent to Executive Council
					needs of a given patient population: 3.3	and the Curriculum Committee to
					(Peer = 20.4)	mention no major concerns were
					Q38: As a student I could identify cultural	raised, however after discussion and
					disparities in health care: 3.3 (Peer =	taking into account the preceptor
					11.7)	survey, we suggest that Evidence-
					Q39: As a student I could recognize and	based practice be observed in the
					address cultural disparities in access to	curriculum to determine if any
					and delivery of health care: 3.3 (Peer =	improvements could be made as well
					11.7)	as incorporate additional use of SOAP
					Q14: The current Dean is providing	Notes
					leadership in pharmacy: 3.5 (Peer = 9.4)	110103
					Q21: I was academically prepared to	
					enter my APPE: 5.5 (Peer = 11.9)	
					Q22: The curriculum prepared me to	
					enter my first Pharmacy job: 5.5 (Peer =	
					9.1)	

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Faculty Survey	Annual	25.2	Ratios for each	Ratios for each item	Q24: Elective didactic courses permitted exploration of and/or advanced study in areas of professional interest: 5.5 (Peer = 7.3) Q27: Apply knowledge from the clinical sciences to the provision of patient care: 5.5 (Peer = 23.3) Q30: Optimize the safety and efficacy of medication use systems to manage patient Healthcare needs: 5.5 (Peer = 26.7) Q33: Provide patient-centered care base don evidence-based best practices: 5.5 (Peer = 63.0) *Comments aimed to provide suggestions about the program included: Curriculum/Program being too relaxed and students not prepared (3 students)	Data compared to previous wear-
Faculty Survey	Director of Assessment	& 6.3	Ratios for each question on the faculty survey	Ratios for each item will be >3 or at/above the average national categorical rating	*See AY2016-2016 Faculty Survey- Executive Report Tier 1 Concerns Ratio (Agree/Disagree) None identified Tier 2 Concerns Q14: performance criteria are explicit and clear: 3.8 (Peer = 6.8) Q16: Criteria for my performance assessment are consistent with my responsibilities 2.8 (Peer = 3.8) Q17: I receive formal feedback on performance on regular basis 4.7 (Peer = 6.0) Q20: I receive guidance on career development 2.2 (Peer = 2.7) Q27: The school has resources to effectively address research/scholarship needs. 2.2 (Peer = 1.8)*	Data compared to previous year: Q14: 1.7 (2015) improved Q16: 2.25 (2015) improved Q17: 3.5 (2015) improved Q20: 2 (2015) improved Q27: 4.5 (2015) declined Q42: 4.7 (2015) declined Memo was sent to Executive council with the Tier 2 concerns along with the comments made that indicates the faculty are aware of the limitations that the college has put on the School or Pharmacy but that it impacts development

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					Q42: In my opinion, the proportion of my time spent on research is too little 2.0 (Peer = ∞) *note was made in executive summary that we are performing overall better than peers	
Teaching Effectiveness How effective are our faculty at teaching?	Annual Department Chairs	10.1, 25.4 & 5.2	Aggregate data from student satisfaction surveys	Aggregate school of pharmacy student satisfaction survey results will be at or above the college aggregate for questions 6 through 16	Fall 2015 Student Satisfaction Survey Level of Content: 3.2 (DYC),3.31(SoP) Organization:4.26 (DYC), 4.41(SoP) Class Presentation: 4.31 (DYC), 4.44(SoP) Achievement of Objectives: 4.37 (DYC), 4.5(SoP) Intellectual Stimulation: 4.36 (DYC), 4.45(SoP) Personal Charac.: 4.42 (DYC), 4.49(SoP) Clarity: 4.34 (DYC), 4.41(SoP) Relevancy of Evaluation: 4.5 (DYC), 4.57(SoP) Fairness: 4.67 (DYC), 4.8(SoP) Availability: 4.59 (DYC), 4.75(SoP) Teaching Ability: 4.22 (DYC), 4.26(SoP) Spring 2016 Student Satisfaction Survey Level of Content: 3.24 (DYC),3.28(SoP) Organization: 4.26 (DYC),4.35(SoP) Class Presentation: 4.3 (DYC),4.34(SoP) Achievement of Objectives: 4.35 (DYC),4.42(SoP) Intellectual Stimulation: 4.35 (DYC),4.35(SoP) Personal Charac.: 4.41 (DYC),4.40(SoP)* Clarity: 4.33 (DYC),4.37(SoP) Relevancy of Evaluation: 4.52(DYC),4.56(SoP) Fairness: 4.63 (DYC),4.69(SoP) Availability: 4.57 (DYC),4.73(SoP) Teaching Ability: 4.22 (DYC),4.18(SoP)*	No Action Required

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Preceptor Survey	Annual	25.2	Ratios for each	Ratios for each item	*See AY2015-2016 Preceptor Survey-	Data compared to previous year:
			question on the	will be >3 or	Executive Report	Q10: Data not available
	Director of	&	preceptor survey	at/above the average		Q11: 1.8 (2015) Improved
	Assessment			national categorical	Tier 1 Concerns Ratio (Agree/Disagree)	Q12: 1.8 (2015); Improved
		6.3		rating	None identified	Q13: 1.8 (2015); Improved
						Q41: 1.5 (2015); Improved
					Tier 2 Concerns	Q15: 0.6 (2015): Improved
					Q10: I receive the results from students	Q36: Data not available
					eval of my rotation: 3.2 (Peer = 4.7)	Q38: 2.7 (2015); Improved, highest to
					Q11: I know how to utilize the process to	date
					manage academic misconduct: 3.4 (Peer	Q43: 5.2 (2015); remained steady but
					= 8.7)	has improved since 2013
					Q12: I know how to utilize the process to	Q14: 2.3 (2015); Improved, highest
					manage professional misconduct: 3.6	since 2013 (22.0)
					(Peer = 12.6)	Q25: Data not available
					Q13: I know how to utilize the school's	Q20: Data not available
					policies dealing with harassment and	
					discrimination: 3.6 (Peer = 8.3)	Actions:
					Q41: The college/school has an effective	Data was sent to Experiential
					continuing professional development	Department with no major concerns.
					program for me that is consistent with my	
					preceptor responsibilities: 3.8 (Peer =	Memo was sent to Executive Council
					12.8)	and the Curriculum Committee to
					Q15: The criteria for evaluating my	mention incorporate additional use of
					performance as a preceptor are clear: 3.9	SOAP Notes and to consider offering
					(Peer = 8.1)	CE
					Q36: Students develop new ideas and	
					approaches to practice: 4.9 (Peer = 17.7)	*Incorporation of CE is currently
					Q38: I have ongoing contact with the	under development at DYCSoP
					Office of Experiential Education: 5.0	
					(Peer = 11.8)	
					Q43: The college/school provides me	
					with Access to library and educational	
					resources: 5.2 (Peer = 11.7)	
					Q14: I am aware of the mechanism to	
					provide feedback to the school: 7.4 (Peer	
					= 21.9)	
					Q25: Students can assess the health needs	
					of a given patient population: 9.3 (Peer =	
					65.6)	

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					Q20: Students can apply knowledge from the clinical sciences to the provision of patient care: 9.5 (Peer = 30.0) *Comments aimed to provide suggestions	
					about the program included:	
					Request for student evaluations of rotation (2)	
					Haven't required disciplinary action or educational resources which explains why specific tools have not been observed (2)	
					Students appear to have a lack of confidence	
					Request for free CE programs to	
					preceptors (3)	
					-one request for CE about tools offered	
					by the school	
					Students seem ill prepared to create SOAP notes/care plans	
Scholarships	Annual	23	# of students who	# students per class	2015-2016 Scholarships	Memo sent to Executive Council
			have received	annually receive an	61 total students received internal and/or	notifying the decreased numbers
Does DYCSoP have	Office of		internal and/or	internal and/or	external scholarships	although noting that the assessment
adequate scholarship funds	Student		external scholarship	external scholarship	*down 29% from last year's 86 total	committee is unsure if the number of
juitus	Affairs			will be at or above	student recipients	students applying for scholarships has
				previous years number of awards	2015 2016 AV total scholarships awarded	decreased
			Amount of	number of awards	2015-2016 AY total scholarships awarded \$388,263	Next year the committee will attempt
			scholarship funds	Amount of	*down 17.9% from last year's	to differentiate between academic and
			awarded annually	scholarship funds	awarded \$472,844	financial assistance
				awarded will be at	,	
				or above previous		
				year's award Annual		
				Office of Student		
				Affairs amount		

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Student Achievement Is our early assurance program providing us with students who are higher achievers?	Annual Office of Student Affairs	16	QPAs for early assurance students vs. students admitted through PharmCas	Average QPA at the end of the P1 and P2 years for early assurance students will be equal to or higher than average QPA for students admitted through PharmCas	Class of 2016 Early Assurance Average QPA: 3.31 Pharm Cas Average QPA: 3.07 Class of 2017 Early Assurance Average QPA: 3.39 Pharm Cas Average QPA: 3.02 Class of 2018 Early Assurance Average QPA: 3.35 Pharm Cas Average QPA: 2.92 Class of 2019 Early Assurance Average QPA: 2.87** Pharm Cas Average QPA: 3.05	Data was forwarded to Executive Council noting that a drop was observed in the Class of 2019. No action was recommended however data will continue to be tracked.
Mission/Vision Are students and faculty familiar with the mission/vision?	Annual	6 & 5.1	AACP student survey, graduating student survey supplemental questions AACP faculty survey supplemental question	100% of students will be familiar with the mission/vision 100% of students will be familiar with the mission/vision	95% of graduating students are familiar with the mission/vision 89% of the current students are familiar with the mission/vision Supplemental question was not added to the Faculty survey and therefore we were unable to obtain the data	The supplemental question "Are you familiar with the Mission/Vision of the School?" will be added to the faculty survey

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Assessment Co	ommittee In	itiatives				
QUESTION TO ASSESS	Assess cycle & Group(s) to Provide Data	ACPE Standard & Strategic Initiative	Outcome Measure	TARGET	OBSERVATION	ACTION
Student Progression Is there a correlation between curricular markers and APPE performance?	Annual Office of Student Affairs	17, 25.8	OSCEs CLP Peer evaluations IPPE preceptor comments APPE performance	Positive correlation between students OSCE grades, students with CLP peer evals, IPPE preceptor comments and APPE performance	No correlation between Fall OSCE (r2=0.0109) overall and APPE overall nor Spring OSCE and APPE (r2=0.0001) Table Table	Archive 2015-2016 as moving to EO for global assessment and no correlation.
Interprofessional Education Are our graduates able to actively participate and engage as a healthcare team member by demonstrating mutual respect, understanding, and	Annual IPEC representative	3, 11 & 3.1, 4.1, 4.3	Individuals make every effort to understand the capabilities and contributions of other health professions Individuals need to cooperate with other health care	Ratio of student survey results will be greater than 3.	N=56 Ratio 3.7 (effort to understand) Ratio 6.6 (cooperate) Ratio 7.3 (share) Ratio 3.9 (depend)	Continue monitoring. Recommend to have IPE committee obtain data and create more robust assessment of IPE to meet ACPE Standards 3 and 11.

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values to meet patient care needs?			professionals Individuals are willing to share information with other health care professionals Individuals must depend upon the work of people in other health professions			
Assessment Portfolio Are our students successfully documenting evidence for education outcomes through their e- portfolios?	Annual Portfolio ad hoc committee	10, 24 & 1.1, 1.4	Successful completion of the e-portfolio course	100% of students passed the e-portfolio course.	100% of student passed the e-portfolio course	Monitor e-portfolio process -P1 and P2's will need to complete the course for 2016-2017 -monitor and assure assessment is possible with new e-portfolio platform during development
Research Collaborations Has DYCSoP developed any collaborations with community research and/or practice partners?	Annual Research Committee	9.3 & 2.1, 2.4, 3.1, 4.1	The SOP will have developed and maintained: Collaborative research and grant awards with community partners including universities and hospitals Interdisciplinary research and grant awards Service based research and grant awards	# of research collaborations # of grants awarded # of grants resubmitted At least 2.5% growth rate every year	17 faculty had external collaborations 0 grants awarded 2 grants resubmitted	*Data compared to last year (2015-2016) 15 research collaborations 7 grants in preparation or submitted 6 of grants resubmitted 2 of grants awarded *Growth rate declined for all subjects measured with the exception of collaborations

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Research Progress	Annual	18.1, 19.2	Research project,	Faculty	Faculty:	*Data compared to last year (2014-
11			publications, posters,	# of research	6 faculty with active projects	2015)
How are we	Research	&	presentations for	projects	17 articles, book chapters, newsletters	
advancing the pharmacy	Committee		students and faculty	# of publications	published	Faculty
profession?		2.1, 2.3,		# of posters	39 Posters presented by faculty	26 faculty with active research
projession:		2.4, 3.1, 6.3		presented	26 presentations by faculty at conferences	projects
				# of professional	and other professional settings	14 journal articles published
				presentations		1 book publication
					Students:	10 professional presentations
				Students (P1-P4)	23 students actively involved in projects	(prepared/submitted/accepted)
				# of research	5 students involved in publications	
				projects	22 students involved in poster	Students
				# of publications	presentations	16 involved in research projects
				# of posters	29 students involved in professional	5 students in publications
				presented	presentations	8 students on posters presented
				# of professional	presentations	o suadino en pesoes presenteu
				presentations		*Growth of 2.5% not reached in active
				presentations		projects
				At least 2.5%		projects
				growth rate every		
				year		
Experiential work	Every 2 years	13	Annual internal	Ratios for each	Current Student Survey	Only item that did not meet the goal
processes	Every 2 years	13	student survey	item will be >3	Q56b: Satisfied with Experiential Ed	was the satisfaction with APPE
processes	EE		(P1-P3s)	that the work	Office IPPE placement process: Ratio =	placement. The experiential office has
Are work processes	Committee		• AACP	processes are	5.3	undergone a transition of new
efficient and	Committee			efficient and	Q56c: Satisfied with Experiential Ed	management which is expected to
timely?			graduating		Office APPE placement process: Ratio =	increase satisfaction. Monitoring will
ilmety:			student survey	timely	1.0	continue.
			(P4s)	Ratios for	Q56e: Satisfied with Communication	continue.
			AACP preceptor	related items on		
			survey (faculty	the graduating	received from Experiential Ed Office:	
			and non-faculty	and preceptor	Ratio = 5.7	
			preceptors)	survey item will	Conduction Ct. Lord Co	
				be >3 or	Graduating Student Survey	
				at/above the	Q34: My IPPE were valuable in preparing	
				average	for APPE; 82% Agree, Ratio =4.7	
				national	Q35: My IPPE permitted involvement	
				categorical	with direct patient care responsibilities in	
				rating	community and institutional settings;	
					88% Agree, Ratio = 7.5	
					Q36: My IPPE were of high quality;	

Assessment Activities by ALL Committees for AY2015-2016

				10100 × J 1122 C 01111		
Potation Quality	Annual	12	A A CD	Potios for each	82.3% Agree, Ratio = 4.7 Q44: My APPE were of high quality; 100% Agree, Ratio = ω Preceptor Survey Q38: Have ongoing contact with the Office of Experiential Ed; 83% Agree, Ratio = 5 Q39: I receive needed support from the Office of Experiential Ed; 98%, Ratio = 41	No Action Paguired
Rotation Quality Assurance How well does the quality assurance process identify high-performing and poorperforming sites?	EE Committee	13 & 1.1	 AACP graduating student survey (P4) Student's rotation assessment Site visit data 	 Ratios for each item will be >3 or at/above the average national categorical rating ≥80% of our rotation assessment scores (given be the students) will be satisfactory or better ≥80% of our sites visit scores will be satisfactory or better 	Graduating Student Survey Q36: My IPPE were of high quality; 82.3% Agree, Ratio = 4.7 Q44: My APPE were of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of high quality; 100% Agree, Ratio = ω State of the state of th	No Action Required

Assessment Activities by ALL Committees for AY2015-2016

	1	r	11000000111011011011	10100 25 1122 001111	mittees 101 A 1 2013-2010	
					Average Scores 6 4 2 0 Illaws on June 19 June	
IPPE/APPE student performance How well are students meeting the learning objectives for IPPE and APPE?	Annual EE Committee	12, 13 & I.I	Review of IPPE and APPE Evaluations	95% of students will meet the minimum standards of performance on IPPE and APPEs	Experiential Pass Rate by Class: P1 - 69/70 (98.6%) P2 - 67/68 (98.5%) P3 - 73/73 (100%) P4 - 70/71 (98.6%)	No Action Required
Curricular Assessment Does the current curriculum demonstrate improvements in course integration, development, organization and delivery?	Annual Curriculum Committee	10,12 & 1.1	Course review forms	25% of courses were completed using the course review sheet	The Curriculum Committee has reviewed 25% of the courses using the course review sheet	No Action Required
Software Needs Do DYCSoP faculty have any hardware or software needs?		23 & 1.1, 6.3.3	The faculty development committee will prepare an inventory of hardware and software "needs."	100% of faculty will be satisfied with hardware & software "needs"	2016 Faculty Survey Results Q28: The college or school has resources to effectively address instructional technology needs"; 79.2% of faculty (n = 24) agreeing -approximately the same as last year (Ratio of 3.5 in 2015 and 3.8 in 2016) Technology training provided in 2015-	A survey of faculty identified that training on software programs including ExamSoft, Moodle and eporfolios were requested. Examsoft training and e-portfolio training was scheduled for July 2016 Faculty Development Day while training for moodle was delayed until

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					2016 AY: ExitTix (Augusts 2015) Microsoft Access (July 2015)	the new official DYC electronic platform was introduced
PCOA How well are students performing on the PCOA exam?	Annual	1, 24	Percentage of students within 2 standard deviations of the national average.	All students will be within 2 standard deviations of the PCOA national average.	*PCOA report did not allow for determination of deviations from national average (reported as percentile and "sample scaled score") 2016 Test Takers: 70 Number of students <50 percentile (Overall): 44 (63%) Number of students <50 percentile (Biomed Sci): 35 (50%) Number of students <50 percentile (Pharm Sci): 38 (54%) Number of students <50 percentile (SAS): 38 (54%) Number of students <50 percentile (SAS): 38 (54%)	Memo, including the data, was sent to the Curriculum Committee outlining that no correlation of student performance and outcome on the PCOA were found. It was also suggested that the PCOA be included as part of the curriculum in order to determine if a better correlation can be found should students take the PCOA more seriously with academic consequences.
Co-curriculum Does the school of pharmacy have a process to capture co-curricular activities?	Once	12.3	Process report	The school of pharmacy will have a process to capture and assess co-curricular activities for the class of 2020	2016-2017 Class of 2020 Students will maintain a paper portfolio with related evidence which they will share with their faculty advisor. Current plan is to incorporate e-porfolio into PharmAcademic	No Action required
Graduating student mission fulfillment Do P4 students continue in leadership positions and participate in	Annual	6 & 6.3	Supplemental question on the graduating student survey	20% of P4 students will hold leadership positions 75% of P4 students will participate in at least one service	60% of P4 students (n = 20) hold leadership positions or serve in other ways within pharmacy related rganizations/fraternities *No data available to identify the number of students participating in service	*Need to add a supplemental question to the Graduating Student Survey to identify the number of students involved in service activities outside of the curriculum

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se	ervice events?		activity above what	activities outside of the curriculum	
			is required in the		
			curriculum		

Assessment Activities by ALL Committees for AY2015-2016

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Educational C	Dutcomes As					
QUESTION TO ASSESS (Students, Alumni, Faculty, Preceptor, Administration)	Assess cycle & Group(s) to Provide Data	ACPE Standard & Strategic Initiative	Outcome Measure	TARGET	OBSERVATION (Pending data, Pending Review, Completed, Archive)	ACTION
Educational Outcom	nes and Compet	encies v1 (Leg	gacy system)			
SLO: Scientific Foundation Do students comprehend scientific methods and understand important scientific principles in depth in order to be able to identify and solve problems related to drug therapies?	Once as changing to v2	1.1	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: a. Scientific concepts b. Scientific methods Care plans	>75% on each outcome measure for P2 (class of 2018), P3 (class of 2017), and P4 (class of 2016) years	P2s - Class of 2018 68.95% P3s - Class of 2017 85.42% P4s - Class of 2016 83.75% P2s-Class of 2018 Educational Outcomes (version 1) from Fall 2015 & Spring 2016 'Focused' OSCEs (Year Average) P3s-Class of 2017 Educational Outcomes (version 1) from Fall 2015 & Spring 2016 'Focused' OSCEs (Year Average) P4s- Class of 2016 Educational Outcomes (version 1) from APPE 'Ambulatory Rotation' Rubrics	Will be phased out with the legacy system and will be monitored with the educational outcomes v2. There is not enough data to drill down further as results are based on single data points from the OSCE or APPE rubric.
SLO: Evidence-Based Practice and Critical Thinking Are students able to make decisions about drug therapy based on best evidence from practice or the literature, and do they possess a set of critical thinking	Once as changing to v2	1.1	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: a. Decision-making b. Critical inquiry c. Use of literature d. Data-driven decisions	>75% on each outcome measure for P2 (class of 2018), P3 (class of 2017), and P4 (class of 2016) years	P2s - Class of 2018 88.52% P3s - Class of 2017 63.96% P4s - Class of 2016 83.25% P2s-Class of 2018 Educational Outcomes (version 1) from Fall 2015 & Spring 2016 'Focused' OSCEs (Year Average) P3s-Class of 2017 Educational Outcomes (version 1) from Fall 2015 & Spring 2016	Will be phased out with the legacy system and will be monitored with the educational outcomes v2. There is not enough data to drill down further as results are based on single data points from the OSCE or APPE rubric.

Assessment Activities by ALL Committees for AY2015-2016

skills that enable them to best serve the interests of their patients and communities? SLO: Patient- Centered Care and Medication Use	Once as changing to v2	1.1	Scores on exams, quizzes and skills rubrics that measure	>75% on each outcome measure for P2 (class of	'Focused' OSCEs (Year Average) P4s- Class of 2016 Educational Outcomes (version 1) from APPE 'Ambulatory Rotation' Rubrics P2s - Class of 2018 63.36% P3s - Class of 2017	Will be phased out with the legacy system and will be monitored with the educational outcomes v2. There is not
Management Are students prepared to take responsibility for the outcomes of drug therapy by acquiring the knowledge, skills and attitudes necessary for entry level practice?			abilities in the following areas: a. Care plan evaluation b. Care plan design c. Medication preparation & dispensing Disease management	2018), P3 (class of 2017), and P4 (class of 2016) years	65.66% P4s - Class of 2016 85.50% P2s-Class of 2018 Educational Outcomes (version 1) from Fall 2015 & Spring 2016 'Focused' OSCEs (Year Average) P3s-Class of 2017 Educational Outcomes (version 1) from Fall 2015 & Spring 2016 'Focused' OSCEs (Year Average) P4s- Class of 2016 Educational Outcomes (version 1) from APPE 'Ambulatory Rotation' Rubrics	enough data to drill down further as results are based on single data points from the OSCE or APPE rubric.
Educational Outcon	nes and Compete	encies v2 (Alig	ned with CAPE 2103)			
1.1 Learner	Annual	24 & 6.1	Average score from Examsoft across all classes during the academic year.	>75% average for P1 (class of 2019)	72.81% P1s-Class of 2019 Educational Outcomes (version 2) from Examsoft Longitudinal Report	**If don't hit target will drill down by subcategories **As of June 22 nd , not all data was entered into Examsoft. Have new report created with all data and update accordingly. For future, have report split into results from Rubrics vs results from Exams.
2.1 Caregiver	Annual	24 &	Average score from Examsoft across all classes during the academic year.	>75% average for P1 (class of 2019)	87.29%	No Action required

Assessment Activities by ALL Committees for AY2015-2016

		6.1				
2.2 Manager	Annual	24	Average score from Examsoft across all	>75% average for P1 (class of	97.82%	No Action required
		&	classes during the academic year.	2019)		
		6.1				
2.3 Promoter	Annual	24	Average score from Examsoft across all	>75% average for P1 (class of	79.10%	No Action required
		&	classes during the academic year.	2019)		
2.4 D : 1		6.1		. 750/	02.740/	N A
2.4 Provider	Annual	24	Average score from Examsoft across all	>75% average for P1 (class of	93.74%	No Action required
		&	classes during the	2019)		
			academic year.	2017)		
		6.1				
3.1 Problem Solver	Annual	24	Average score from	>75% average	92.43%	No Action required
			Examsoft across all	for P1 (class of		
		&	classes during the	2019)		
			academic year.			
		6.1				
3.2 Educator	Annual	24	Average score from	>75% average	88.39%	No Action required
		&	Examsoft across all classes during the	for P1 (class of 2019)		
		α	academic year.	2019)		
		6.1	academic year.			
3.3 Patient	Annual	24	Average score from	>75% average	87.14%	No Action required
Advocacy			Examsoft across all	for P1 (class of		•
•		&	classes during the	2019)		
			academic year.			
		6.1				
3.4 Collaborator	Annual	24	Average score from	>75% average	87.57%	No Action required
		0	Examsoft across all	for P1 (class of		
		&	classes during the academic year.	2019)		
		6.1				
3.5 Includer	Annual	24	Average score from	>75% average	81.77%	No Action required
		_	Examsoft across all	for P1 (class of		
		&	classes during the	2019)		

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			academic year.			
		6.1	academic year.			
3.6 Communicator	Annual	& 6.1	Average score from Examsoft across all classes during the academic year.	>75% average for P1 (class of 2019)	87.63%	No Action required
4.1 Self-aware	Annual	& 6.1	Average score from Examsoft across all classes during the academic year.	>75% average for P1 (class of 2019)	94.69%	No Action required
4.2 Leader	Annual	24 & 6.1	Student survey results on student commitment to: • leadership	≥30% of students will actively participate in professional organizations	Not Assessed via examsoft	No Action required
4.3 Innovator	Annual	24 & 6.1	Average score from Examsoft across all classes during the academic year.	>75% average for P1 (class of 2019)	96.05%	No Action required
4.4 Professional	Annual Director of Assessment	24 & 6.1	Student survey results on student commitment to: • life-long learning • altruism integrity	≥65% of students will be members of more than one pharmacy organization ≥90% of students will participate in volunteer activities (not associated with experiential education requirements) 0 violations of the professional code of conduct (didactic)	Examsoft 84.60%	No Action required

Assessment Activities by ALL Committees for AY2015-2016

		will be reported
	Percentage of graduating students who have attended a professional meeting	0 critical incidence (experiential) reports from EEO ≥ 30% of graduating students have attended at least one national or regional professional meeting 100% of graduating students have attended at least one local professional meeting

Assessment Activities by ALL Committees for AY2015-2016

Off-Cycle Ass	essment Qu	estions				
QUESTION TO ASSESS (Students, Alumni, Faculty, Preceptor, Administration)	Assess cycle & Group(s) to Provide Data	ACPE Standard & Strategic Initiative	Outcome Measure	TARGET	OBSERVATION (Pending data, Pending Review, Completed, Archive)	ACTION
Patient Care Process How effectively do DYCSoP faculty feel like our students can fulfill each component of the patient care process at the end of each professional year?	Assess 2016- 2017 cycle Faculty Survey from Curriculum Committee & Assessment Committee	10.8	Effectiveness of current student achievement of the Patient Care Process at the end of each year.	Faculty will rate students as being able to adequately fulfill all components of patient care process by end of P4 year.	2014-2015 results On a 5 point likert scale (5 being best), the faculty rating for students to be able to adequately fulfill the patient care process components are: • 4.1 for Collect • 3.6 for Assess • 3.7 for Plan • 3.1 for Implement • 3.6 for Follow-up **Current processes are in place to implement the PCP into the curriculum. The current Care Plan template and rubric have been updated and will piloted in PT3 and APPEs in the Spring of 2016.	
Faculty Development Does faculty have adequate financial support to promote their professional development?	Assess 2016- 2017 cycle Every two years		Percent faculty attendance at professional meetings Percent faculty holding membership in professional societies Percent requests approved for miscellaneous developmental resources	>80% of faculty will have attended at least one professional meeting 100% of faculty will hold membership in at least one professional society >90% of faculty will indicate agree/strongly agree on Q34 of annual faculty survey	2014-2015 results Per Annual report 82.6% (19/23) of faculty attended at least one professional meeting. Unable to obtain if faculty holds membership in a professional society. Q34 – 92.6% SA/A	

Assessment Activities by ALL Committees for AY2015-2016

Grop a : 1	T : 2012	La	750/	
SLO: Professional	Last 2013-	Scores on exams,	>75% on each	
Behavior and	2014	quizzes and skills	outcome measure	
Ethics		rubrics that measure	for P1, P2, P3 and	
To what extent do	Every three	abilities in the	P4 years	
our students	years	following areas:		
understand and		c. Patient		
		relationship		
accept		d. Rational and		
responsibility for		ethical decisions		
the care of their		e. Initiative and		
patients?		responsibility		
		Sensitivity, tolerance		
		and respect		
SLO:Communicati	Last 2013-	Scores on exams,	>75% on each	
on and	2014	quizzes and skills	outcome measure	
Collaboration	2014	rubrics that measure	for P1, P2, P3 and	
Collaboration	Every three	abilities in the	P4 years	
To what extent are	•	following areas:	1 + years	
our students able to	years	a		
convey information		e. Counseling skills f. Professional		
so that it is		communication		
received and		~		
understood?				
		h. Scientific		
Grophi rr 14	T . 2012	communication	770/	
SLO:Public Health	Last 2013-	Scores on exams,	>75% on each	
To what extent do	2014	quizzes and skills	outcome measure	
our students		rubrics that measure	for P1, P2, P3 and	
understand the	Every three	abilities in the	P4 years	
system in which	years	following areas:		
they practice and		d. Professional		
demonstrate		collaboration		
		e. Data-driven		
willingness to work		needs assessment		
to improve the		f. Wellness and		
health of		disease		
individuals and		prevention		
communities?		Disease prevention		

Assessment Activities by ALL Committees for AY2015-2016

Archived Que	stions & Outcomes					
QUESTION TO ASSESS (Students, Alumni, Faculty, Preceptor, Administration)	OUTCOME MEASURE	ACPE STAN- DARD	TARGET	ASSESS CYCLE	GROUP(S) to Provide Data	Observation & Action **denotes the action & changes made based on results (Pending data, Pending Review, Completed, Archive)
DYC Faculty Council Committees Do DYCSoP faculty participate in DYC governance?	DYCSoP faculty will have filled all of the DYC Faculty Council committee places allocated to the SOP and permitted by Faculty Council bylaws.		100% of the positions are filled by DYCSOP faculty	Every 2 years	Department Chairs	**Archived 2014-2015
Faculty Service Projects Have DYCSoP faculty/staff provided any service projects?	Faculty will participate in at least one service project annually		100% of faculty will be involved in a service project	Annual	Department Chairs	**Archived 2014-2015
Assessment Effectiveness How effective are the SOP Assessment Committee's assessment efforts?	Results/Actions from assessment girds		100% of assessment questions not meeting target have an action in place to make improvements	Annual	Assessment Committee	100% of the assessment questions have an action in place, which may include: • monitoring for one more year • sharing with appropriate group for a plan • or assessing further for more information **Using a dashboard to track this moving forward. Archive 2014-2015
Student Services Does the college provide adequate support services to its pharmacy students?	AACP student survey rating of our student services	19	≥75% of ratings are "agree" or higher for these categories	Last 2013- 2014 Every two years	Assessment Committee	**Archived 2014-2015 as will be assessed via the graduating student survey assessment
Do the IPPE experiences expose	Student evaluation of site Student survey responses	12.4	80% will indicate satisfactory exposure via survey	Last 2014- 2015	Director EE/ Asst Director	**Archived 2014-2015 as similar to question currently being assessed.

Assessment Activities by ALL Committees for AY2015-2016

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student's to contemporary practice models, ethics, expected behaviors, and direct patient care?	Student focus group			Every 2 years		
Course Materials Are students getting their course materials in a format and time that meets their learning needs?	% of students who agree on the minimum time handouts should be posted % of students who prefer electronic vs paper format		>75% of students should agree on a minimum time faculty should post handouts >75% of students should agree on the preferred electronic vs paper format	Once	Student survey	Students surveyed in Spring 2015 reported wanting handouts electronically 1 day (10.6%), 2 days (21.8%), 3 days (25.3%) and >3 days (42%) ahead of time. Students printing materials all the time (48.8%), often (22.4%), once in a while (21.2%), and never (7.6%). **Based on this information it was discussed to send a reminder out to faculty to please be mindful and post final student handouts at least 2 days before class. Students also requested that these should be final versions. **For printing, at this time there are college level changes on printing, will revisit this issue if becomes a concern again.
\$Drug Information Center Service Does the DYCSoP Drug Information Center provide service to the college or professional community? ‡Teaching	The Drug Information Center will be providing service to the college and the professional community. Student evaluations of:	3, 3.2	At least a 2.5% growth rate per year ≥75% of SOP faculty will	Every year	Director of DIC	Source Document: 1 - Service Plan Complete with Digital Signage 2 - A DI Database listing Formal and Informal DI Questions **Archive 2014-2015 as measured via leadership **MUST BE MONITORED BY LEADERSHIP
£ffectiveness &Assessment	overall effectiveness availability fairness clarity of presentation DYCSoP will have an	15	score at or above the college's "middle 60%" for these categories		Team Portfolio ad	*Archive 2014-2015 as no leadership determined are assessing teaching effectiveness through other methods
gAssessment	Di Csor will have an	13	10070	Every	Portiono ad	Portfolio ad hoc committee has implementation plan

Assessment Activities by ALL Committees for AY2015-2016

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Portfolio Do DYCSoP students have an assessment portfolio?	implementation plan for the assessment portfolio			year	hoc committee	for a portfolio for the P1 students and future students. Faculty and students are being trained Fall of 2015. **Assessment measures of the student portfolio will be designed for 2015-2016 Grid. Archived 2014-2015.
§Interprofessional Education Are our graduates prepared to interact with practitioners in other health care professions?	Percentage of graduating students who have successfully completed greater than one interprofessional education module	6,12	100% of students participate in > 1 IPE session.	Every year	IPEC representative (Butterfoss)	100% of students participate in 1 IPE session as it is required as part of the CLP course. **As this is required part of the curriculum will be changing outcome measure to better align with the 2016 standards. The current IPE survey data given before and after the required IPE session will be used to assess students on the themes of team dynamics, roles/responsibilities, and communication. Further consideration will be needed for assessment of IPE in experiential and other curricular aspects. **2015-2016 Measures will be – 1. Individuals make every effort to understand the capabilities and contributions of other health professions (2016 STD 11.1) 2. Individuals need to cooperate with other health care professionals (STD 11.2) 3. Individuals are willing to share information with other health care professionals (STDs 11.1, 11.2 and 11.3) 4. Individuals must depend upon the work of people in other health professions (STD 11.3 and 3.4) Archived 2014-2015 and modified with new measure
Personal Management and Leadership	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: f. Time management	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Every three years	Curriculum Committee, Course Coordinators	Class of 2018: 98.59% Class of 2017: 98.02% Class of 2016: 95.74% Class of 2015: 89.97%

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To what extent have our students learned to be productive members of their profession who contribute to the improvement of the health of their patients and communities?	g. Work teams					**All measures greater than 75%, however discussion that there is decreasing across P1-P4. As transition to CAPE outcomes, will monitor more cross-sectional, so we can track longitudinal per cohort.** Archived 2014-2015 cycle as this system will be phased out by 3 years.
Systems Management To what extent have our students learned to create and manage medication systems that provide the best possible outcomes for their patients?	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: i. Therapeutic outcomes j. Budgeting k. Resource management l. Distribution of medication m. Medication management	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Every three years	Curriculum Committee, Course Coordinators	Class of 2018: 95.20% Class of 2017: 82.82% Class of 2016: 83.00% Class of 2015: 91.96% **All measures greater than 75%. As transition to CAPE outcomes, will monitor more cross-sectional, so we can track longitudinal per cohort.** Archived 2014-2015 cycle as this system will be phased out by 3 years.
Service and Social Responsibility To what extent do our students understand that service to patients and communities differentiates a profession from an occupation?	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: g. Commitment to pharmacy h. Community involvement	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Every three years	Curriculum Committee, Course Coordinators	Class of 2018: 98.56% Class of 2017: 84.10% Class of 2016: 79.40% Class of 2015: 85.00% **All measures greater than 75%. As transition to CAPE outcomes, will monitor more cross-sectional, so we can track longitudinal per cohort.** Archived 2014-2015 cycle as this system will be phased out by 3 years.

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Lifelong Learning To what extent have our students learned to identify learning needs and resources to adapt to changes in health care and the profession?	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: a. Emerging issues b. Implement change c. Self-improvement d. Self-assessment	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Every three years	Curriculum Committee, Course Coordinators	Class of 2018: 93.12% Class of 2017: 87.96% Class of 2016: 91.11% Class of 2015: 81.97% **All measures greater than 75%. As transition to CAPE outcomes, will monitor more cross-sectional, so we can track longitudinal per cohort.** Archived 2014-2015 cycle as this system will be phased out by 3 years.
Are our students performing pharmaceutical calculations proficiently, or do we need to increase the amount of exposure to provide additional experience?	Scores for calculations exams in PMD 709 Scores on calculations section of Kaplan exam Pass rate for NYS Part III licensing examination	10, 15	All students will achieve a score of ≥70% on calculations exams All students will achieve a score of ≥50% on the calculations portion of the Kaplan exam ≥85% of students will pass the NYS Part III licensing examinations (of those taking it)	2012-2013 (once)	Curriculum Committee	The Curriculum and Assessment Committees reviewed the data from the Class of 2014. In this cohort, 89.5% of students achieved ≥70% accuracy on calculations exams; 26% of students achieved a score of ≥50% on the calculations portion of the Kaplan preparatory exam; and the pass rate for the 8 students taking the NYS Part III exam thus far is 87.5%. Upon questioning students about the Kaplan exam, they reported technical problems with the exam. The Committees agreed that the results of this exam were not a reliable measure of proficiency in calculations this year. Based on a review of the data, it was decided that no changes to the curriculum are merited at this time. However, the Assessment Committee and the Curriculum Committee will continue to review this data over the next few years with a larger cohort.
‡Admission Criteria as a Predictor of Student Success	Correlation of admission criteria to academic performance in program • aggregated Admission Screening Score to program QPA	17	$r^2 \ge 0.80$	Archive after 2013-2014	Admissions Committee & Office of Student Affairs	No correlations was found when correlating "overall candidate score vs P1 GPA", "Candidate Math and Science Prerequisite GPA vs P1 GPA", "Candidate Prerequisite GPA vd P1 GPA", "Candidate Science GPA vs P1 GPA", "Candidate Math GPA vs P1 GPA", "PCAT Score vs P1 GPA" **Archive as no correlation has been found, since

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§Leadership Team Members Development Plans Do leadership team members have development plans?	Each member of the leadership team will have met with the dean to develop mutually agreeable goals and a personalized development plan with specific and measureable goals related to leadership.	7	100%	Every year	Leadership Team	Dean met with leadership to create plans. 2014-2015 will complete DRIVE training. **Archive 2013-2104 as leadership team reported this as completed.
§Curriculum Is the DYCSoP curriculum for all years of the program fully in place/ implemented?	The curriculum for all years of the program will be fully in place and implemented.	15	100%	Every year	Curriculum Committee	Course syllabi completed. **Archive 2013-2014 as completed.
§Full Accreditation Has DYCSoP earned full ACPE accreditation?	The SOP will be fully prepared for the spring 2014 full accreditation visit by the ACPE.	15	100%	???	Leadership Team	Completion of self-study document with compliance ratings for all 30 standards. **Archive 2013-2014 as completed
§Programmatic Evaluation and Educational Assessment Plan §Does DYCSoP have a programmatic evaluation and educational assessment plan?	The faculty will have read, discussed, and approved a programmatic evaluation and educational assessment plan.	15	100%	Every two years	Assessment Committee	Development of plan; approval by the faculty at a faculty meeting on August 5, 2013 **Archive 2013-2014 as completed and the assessment committee functions off of the assessment girds or their plan.
§Fundraising Plan Does DYCSoP have a fundraising plan?	DYCSoP will have developed a fundraising plan.	30	100%	Every two years	Leadership Team	Funds are allocated at the college level. Unable to complete assessment. **Archive 2013-2014
§Student Recruiting Plan	DYCSoP will have in place a recruiting plan that specifies	17	100%	Every two years	Leadership Team	Recruiting plan created and implemented # early assurance students enrolled

Assessment Activities by ALL Committees for AY2015-2016

Does DYCSoP have a recruiting plan that addresses diversity?	the desired composition of students in the 2013 class.					Class of 2014: 0% Class of 2015: 4.4% Class of 2016: 17.3% Class of 2017: 33.7% # in-state and out-of-state students enrolled (Fill in measures developed by Admission Cmttee) **Archive 2013-2014 as recruiting plan in place
§Recruiting Fairs/ Visits How many college recruiting fairs has DYCSoP attended?	DYCSoP will have attended 35 or more college recruiting fairs/visits.	17	100%	Every year	Leadership Team	Attended 40+ recruiting fairs **Archive 2013-2014 as recruiting plan in place
§# Photocopies Has DYCSoP reduced its volume of photocopies?	Reduce number of photocopies by 20%.	30	100%	Every two years	Leadership Team	Unable to attain baseline data or number of copies. **Archive 2013-2014 as new copiers in place.
§Recycle Bins Is paper recycling a part of the DYCSoP culture?	Recycle bins will be in every office suite and common area and paper recycling will be part of the culture of the SOP.	3	100%	Every year	Leadership Team	Week of 01/12/15 to 01/016/15 there is a comingled recycling of paper, cans, aluminum, glass campus wide; will occur every on QTue and QThurs. Comingled means all recyclable material in one bin that an outside company takes and sorts through. Will be made known to all DYC faculty, staff and students through DL Manager **Archive as recycling plan in place at college level
§Faculty Directories Are faculty directories installed and up-to-date?	Faculty directories will be installed and updated.	5	100%	Every two years	Leadership Team	Received recent update 11/25/14 of all DYCSOP email addresses; also received in 11/14 update of directory with phone # and e-mails **Archive 2013-2014
§Departmental Research Plans Does each DYCSoP	Each department will have developed a research plan with clear goals and objectives.	3	100%	Every two years	Department Chairs	

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department have a research plan?						
§Database of Research Collaborations Does DYCSop have a database of research collaborations?	We will have created a database/list of research collaborations.	6	100%	Every year	Associate Dean of Research	Associate Dean of Research created database of research collaborations. **Archive 2013-2014 as completed, but continue to monitor growth of research collaborations.
§Drug Information Center Operational Does DYCSoP have an operational Drug Information Center?	The Drug Information Center will be operational	3	100%	Every year	Director of DIC	Furnishings ordered and in place **Archive 2013-2014
How clear and concise is the stated purpose of the Experiential Education Office?	Students, faculty, and preceptors will be able to create a list of tasks performed by the Office at a focus group meeting.	14	 70% will include 2 of these: Preceptor directed Authentic assignments Student-centered Reflective Progressive mastery of learning outcomes 	Every 3 yrs	Office of EE	Purpose needs to be a part of IPPE and APPE orientation; students do not understand the role of experiential office ** Archive 2013-2014 as orientation is now in place for p1-p3 students
How well does the office plan and execute programs and actions to address the future roles of pharmacists?	Faculty and preceptors will provide suggestions for future programs and actions at a focus group meeting.	14	Faculty and preceptors will generate two suggestions for the future	Annually	Office of EE	Each faculty preceptor was asked to provide 2 suggestions for the future to be taken into consideration by the Office of Experiential Education. Mike MacEvoy is working with PharmAcademic to improve communication; changes made in software to reduce number of e-mail messages **Archive 2013-2014 as completed and measure does not align with the question.
Is staffing adequate to meet the needs of students, faculty, preceptors, and other stakeholders	Review of benchmark data Unmet needs	14, 28	DYC will be staffed at a level that compares to 85% of comparable institutions Experiential education cmttee, Dir EE, Asst Dir EE will list unmet needs	Every 3 yrs	Office of EE	With the addition of two additional positions (4 total) DYC Experiential office staffing is comparable to other schools of pharmacy **Archive 2013-2014 as office is fully staffed

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§Measurement of Student's Independent Thinking Has DYCSoP measure student's independent thinking?	DYCSoP Assessment Committee will have developed a plan and outcomes for measuring independent thinking for our students.	15	100%	Every year	Assessment Committee	**Archive 2013-2014 as will become part of CAPE assessment
§Student Service Projects Have DYCSoP student organizations provided any service projects?	Student organizations will develop and complete at least one service project annually.	3,23	100%	Every year	Office of Student Affairs	Each organization has completed at least one service project as this is a requirement to be an SA approved DYC organization. 100/136 (74%) students survey in P1-P3 class volunteered **Archive 2013-2014 as all organizations must do a service project.
§Faculty Development Plans Do faculty have development plans?	Each faculty member will have met with their department chair to develop mutually agreeable goals and a personalized development plan that will provide a clear path to promotion.	26	100% of faculty have an individualized development plan that was created in collaboration with their chair	Every year	Department Chairs	Practice Dept Chair reported 100% **Archive 2013-2014 and as this is required annually.