University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences

2015 Programmatic Evaluation Plan

The purpose of this document is to establish and describe the programmatic evaluation plan for University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences to assess achievement of the mission, vision, values and goals (Appendix A) and for the purpose of continuous improvement pursuant to the mission. Programmatic evaluation consists of two interrelated processes to accomplish this objective: Organizational Effectiveness Assessment and Curriculum Assessment.

Organizational Effectiveness Assessment

Organizational Effectiveness is an ongoing and systematic collection, analysis and reporting of data to evaluate achievement of the School's mission and goals for the purpose of continuous improvement.

Organizational Effectiveness Assessment consists of two aspects:

1. Strategic planning and assessment – The School's mission is the basis for the School's strategic plan. The strategic plan is developed through a collaborative effort with input from faculty, staff, administration, students, alumni and external stakeholders. The strategic plan addresses initiatives, goals and key performance indicators linked to the School's mission to evaluate performance and enable mission achievement.

2. Assessment of the operational plan – The School has an operational plan which outlines core functions necessary to achieve the School's mission. These functions are overseen by the deans and administrative units within the School. Assessment of operational aspects of the School are at the discretion of the dean, the associate and assistant deans, department chairs, administrative units and School committees and are conducted in an ongoing basis or as part of strategic initiatives.

Curriculum Assessment

Assessment of curriculum is conducted to ensure student learning, curricular effectiveness and achievement of educational outcomes. Assessment of the curriculum uses a variety of direct and indirect measures to ensure achievement of the School's curricular mission and to support evidence-based changes to courses, curriculum and pedagogy.

Responsible Parties

Executive Committee – Responsible for providing direction and guidance on strategic and operational planning and assessment activities.

Faculty Committees – Each committee (within their charges) is responsible for ensuring the success of the School. As such, committees must set criteria and assess their performance.

Faculty – Lead assessment activities at the student, course, programmatic and School level to ensure student learning and effectiveness of the School.

Staff – Participate in assessment of operational and strategic components of the programmatic assessment plan. Responsible for recognizing and reporting opportunities to increase efficiency and effectiveness in job responsibilities and participating in relevant assessment activities.

Director of Assessment – Collaborates with faculty, administration and staff to provide assessment data and reports with the purpose of achieving expected outcomes and ensuring compliance with accrediting agencies for all assessment efforts. The Director identifies gaps in the programmatic evaluation plan and provides notification to stakeholders with recommendations to correct deficiencies. These efforts inform decision-making to increase efficiencies and effectiveness within the School.

Students/Alumni/External Stakeholders – As respondents and participants, these populations provide constructive assessment data and feedback and serve on committees when needed.

Programmatic Evaluation for Continuous Improvement

The purpose of programmatic evaluation is for continuous improvement at all levels within the School. The following pages of this document outline assessment strategies for Organizational Effectiveness Assessment and Curriculum Assessment. Included in the narrative is documentation of responsible individuals or groups, frequency at which assessment will occur, forms of assessment and data generated, requirements for reporting and communicating results and, finally, how data will be used to make appropriate changes and continue improvement within the School. Assessment is an ongoing endeavor and while this document serves as a guide to assessment activities within the School, it also is malleable and will itself be assessed, modified and redistributed as needed. The Programmatic Evaluation Plan will be assessed annually by the Director of Assessment. The assessment will include a review of outcomes from the previous year, the impact of assessment activities, and aims for the following year to be consolidated into a report. The report will be provided to the Executive Committee for their input and the revised plan distributed to faculty and stakeholders for transparency. The School's assessment calendar is in Appendix B.

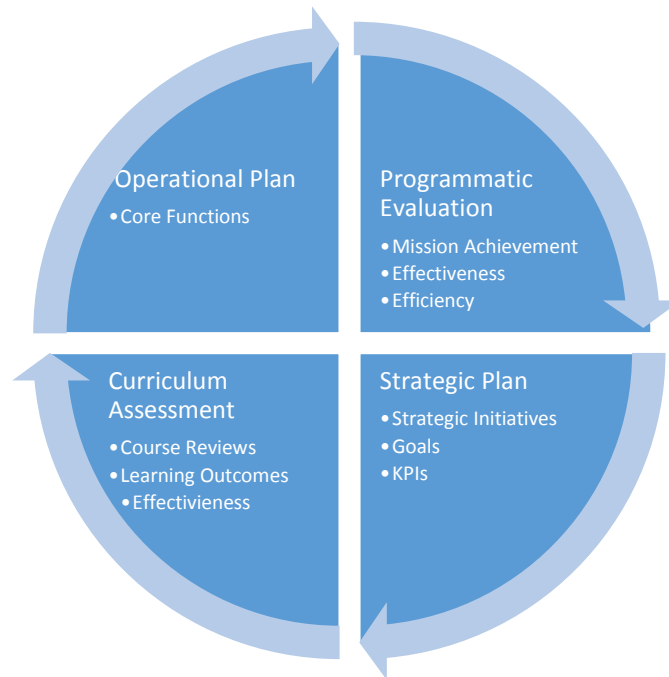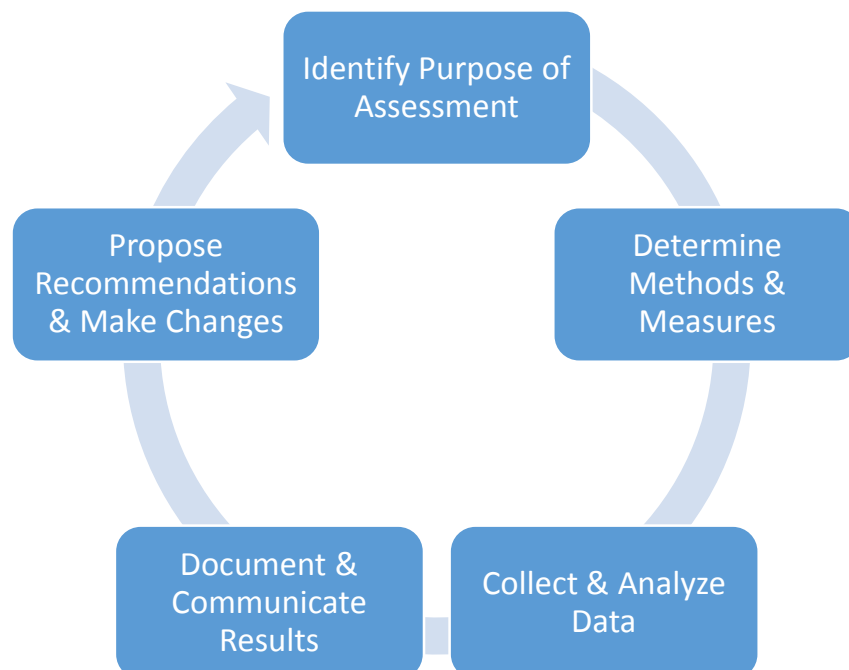Figure 1. Assessment functions within the School

Figure 2. General assessment process within the School

Strategic Planning and Assessment

For each initiative of the strategic plan, a strategic initiative group (SIG) of 3-6 faculty members and one administrator with particular interest or responsibilities in the area will be created. One member of the SIG will be selected by the group to serve as the liaison for the initiative. The liaison will work to ensure the SIG (i) maintains progress on achievement of the objectives and (ii) completes interim (June) and annual (November) reports detailing progress towards successful completion of the initiative through the associated objectives (goals) and key performance indicators. The report includes:

(i)   the original time-line for completion of the objective,

(ii)   actions that have been taken to complete the objective (including people involved and dates of any meetings or actions),

(iii)   whether the objective has been achieved or is on-track to be achieved according to the original time-line,

(iv)   if a delay is anticipated, a revised plan, together with recommended modification to the time-line and indications of unanticipated challenges that hindered objective achievement,

(v)   if the objective is deemed unachievable, a recommendation of how the objective should be modified or whether it should be removed from the strategic plan

(vi)   suggestions for other strategic plan ideas that emanated out of actions taken in working on achievement of the objective

The summer (June) review will be a formative assessment. The formative assessment will be conducted to assess progress and resources of initiatives and for the liaisons to offer their feedback. The Director of Assessment will update the dashboard, provide a memo to the Executive Committee detailing the progress of each initiative and facilitate a conversation regarding the assessment. The Executive Committee will review the status of each initiative and make changes if warranted. A status update will be provided to stakeholders.

The winter (November) review will be the summative assessment. Each liaison will provide to the Director of Assessment a brief narrative detailing the items above and any accompanying data. The Director of Assessment will review all reports, assemble them into a single document and provide a dashboard overview of the status of progress on all strategic plan initiatives. The Director of Assessment and the liaisons will present the outcomes to Executive Committee to facilitate a discussion of each initiative and answer any questions.
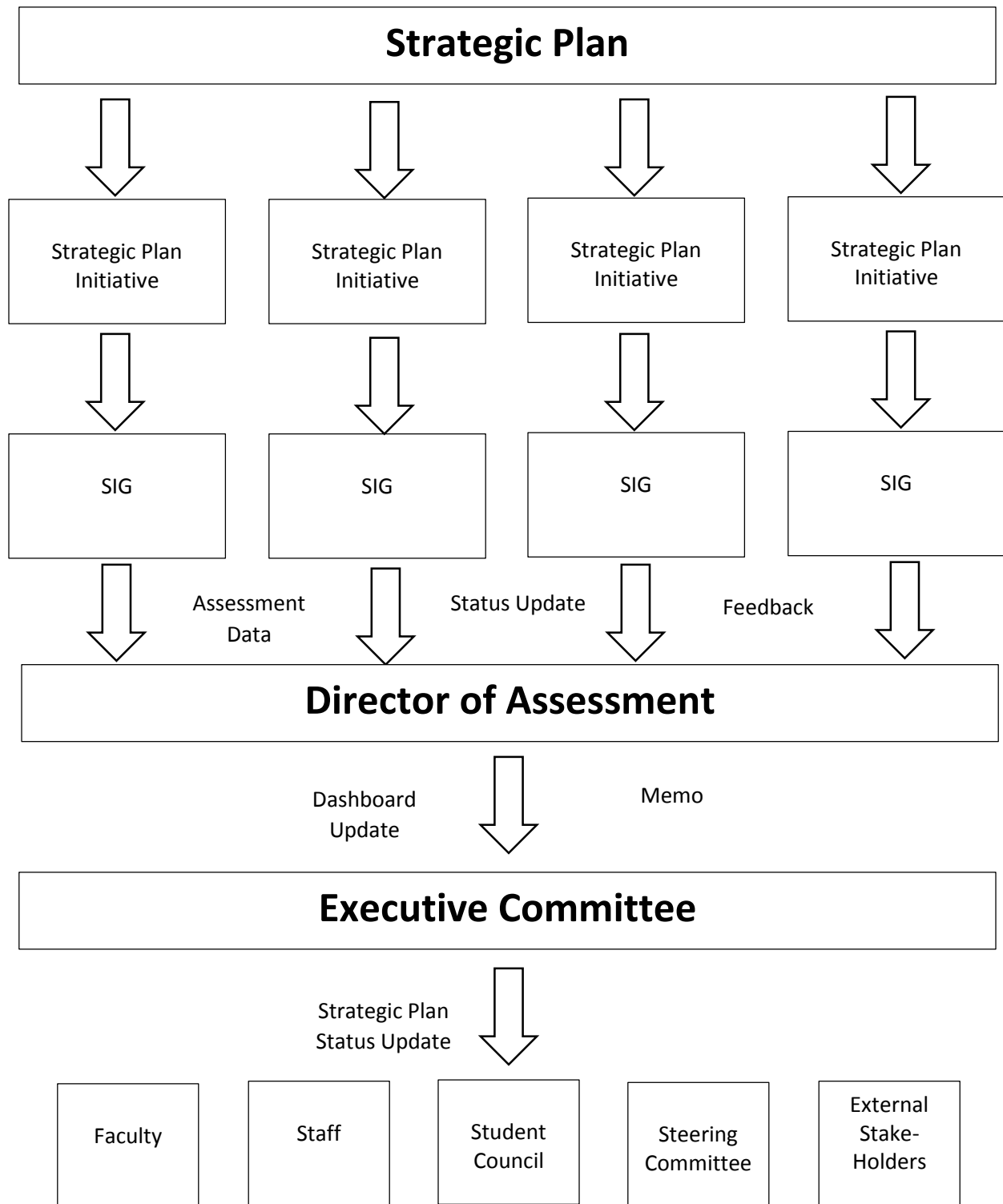
The overview and final report will be reviewed in December by the Executive Committee and the Executive Committee will develop a draft revised strategic plan (DRSP). The overview, final report and DRSP will be provided to the faculty, student council and an external stakeholder committee (formerly steering committee + other alumni/preceptor members + Provost) for comments and suggestions (including proposals for new objectives [these would be considered and included as existing objectives are achieved]). Based on feedback, a revised strategic plan will be developed by the Executive Committee and salient changes will be presented at the retreat held in January for the faculty, and selected students and external stakeholders. In addition, the revised strategic plan will be provided to the Provost to ensure support of the university administration and continued alignment with the

strategic plan of the university. A revised strategic plan will be finalized based on achievement of existing objectives, changes to existing objectives and/or inclusion of new objectives.
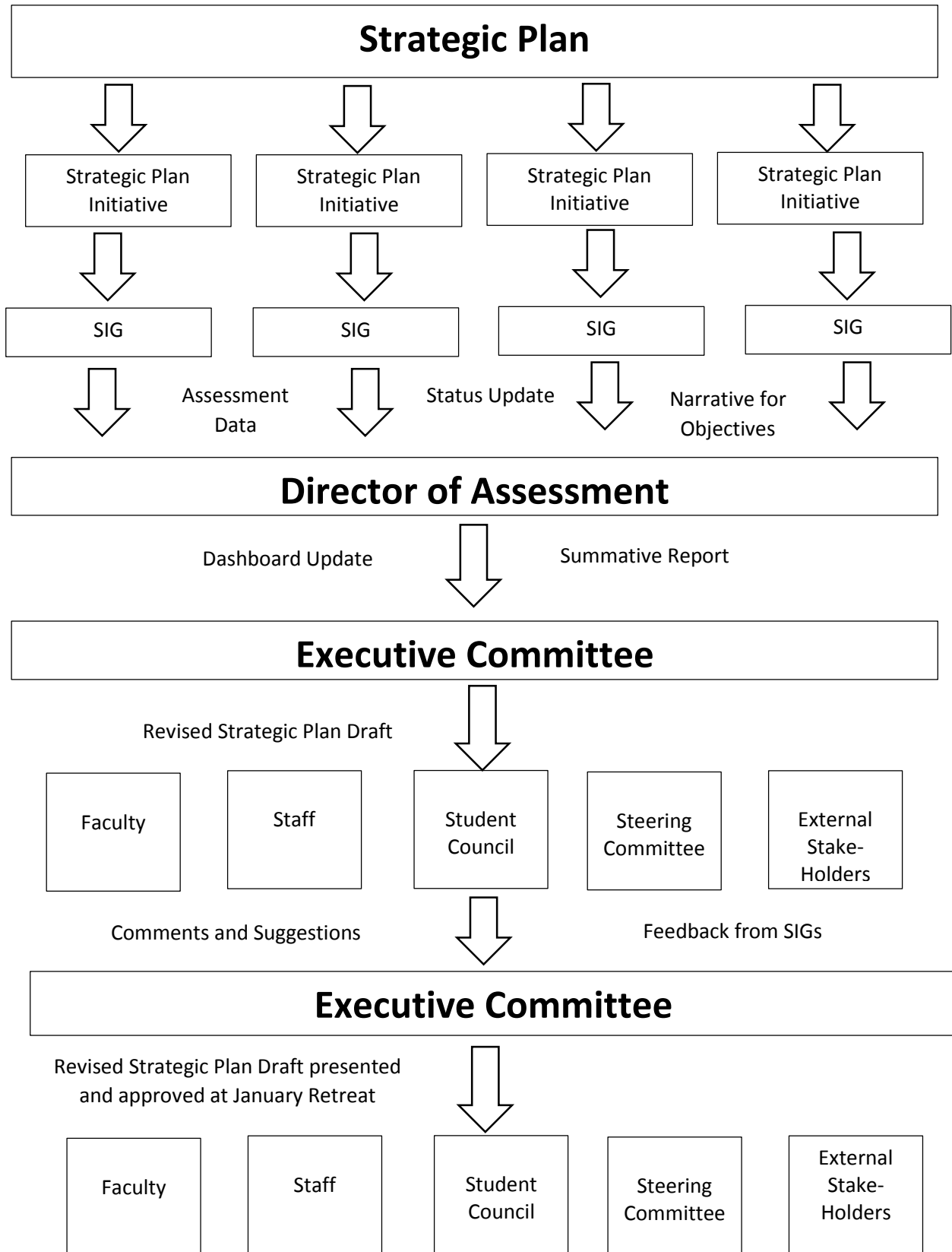
The objectives of the revised plan will be reviewed by the Executive Committee for assignment of responsible parties and development of time-lines. The Executive Committee may modify or re-prioritize objectives based on resource availability. The revised plan will then be evaluated by each initiative SIG (as appropriate); the SIGs will establish/modify time-lines and measureable outcomes (key performance indicators) in the revised plan. This information will be included in the revised strategic plan before it is circulated to the faculty, staff, Provost, students and external stakeholders and posted on the web site by the end of January, along with the previous strategic plan and its dashboard overview. Links to this information will also be provided to our stakeholders in newsletters. Illustrative outlines of the formative and summative review processes follow.

The School's assessment calendar in Appendix B provides the assessment activities, the month in which they occur, responsible parties, data sources and who will receive the information to make any necessary changes.

Summer Formative Assessment

Strategic Plan

Strategic Plan Initiative	Strategic Plan Initiative	Strategic Plan Initiative	Strategic Plan Initiative

SIG	SIG	SIG	SIG

Assessment Data   Status Update   Feedback

Director of Assessment

Dashboard Update   Memo

Executive Committee

Strategic Plan Status Update

Faculty	Staff	Student Council	Steering Committee	External Stake-Holders

Winter Summative Assessment

Strategic Plan

| Strategic Plan Initiative | Strategic Plan Initiative | Strategic Plan Initiative | Strategic Plan Initiative |

| SIG | SIG | SIG | SIG |

Assessment Data

Status Update

Narrative for Objectives

Director of Assessment

Dashboard Update

Summative Report

Executive Committee

Revised Strategic Plan Draft

| Faculty | Staff | Student Council | Steering Committee | External Stake-Holders |

Comments and Suggestions

Feedback from SIGs

Executive Committee

Revised Strategic Plan Draft presented and approved at January Retreat

| Faculty | Staff | Student Council | Steering Committee | External Stake-Holders |

Operational Plan Assessment

As part of ongoing strategic planning, items from the 2009 Strategic Plan were assessed and categorized as either strategic, operational or completed. Items determined to be fundamental to the School's core functions were categorized as operational (Appendix C). These items support the mission of the School and are ongoing endeavors that contribute to the School's success. Example operational items include, recruiting, admitting and enrolling the most qualified students, maintaining accreditation status, or proactively recruiting a diverse faculty and staff. While these items are not strategic initiatives, they are essential for the School to be successful in achieving all aspects of the School's mission including, education, research and other scholarly activities, service, and pharmacy practice. It is important to appreciate that many of the operational functions of the School support initiatives in the 2015 strategic plan. In such occurrences, assessment of the strategic plan may support assessment of operational activities, hence allowing for combined efforts. These opportunities will assist in continuing to improve efficiencies and effectiveness in the School's operations while supporting mission achievement and strategic plan fulfillment.

Executive Committee members are responsible for the administrative operations of the School. In many cases, operational activities will have assessment components as part of their requirements for completion. For example, operations such as assessing faculty productivity, ensuring compliance with accreditation standards, monitoring progression and graduation rates, and tracking space utilization are part of individual job functions and/or School operations that necessitate assessment. These operations have processes in place to collect, analyze, report, and use data in a systematic manner and are outlined in detail in the School's assessment calendar (Appendix B). Activities without built-in assessment processes will be reviewed on an as needed or as requested basis in collaboration with the Director of Assessment to provide greater data analytics for each unit.

The Executive Committee will select projects annually from the activities listed in Appendix C for assessment and/or on an as-needed basis when warranted by assessment data from surveys, feedback from stakeholders or changes to the external environment, e.g., accreditation, University policy, pharmacy education. For each project, members of the Executive Committee will be assigned to facilitate the assessment that falls under their purview. Each assigned Executive Committee member will work with the Director of Assessment to develop a project proposal that outlines methodology, analyses, reporting procedures and timelines to meet the objectives of the project. The Director of Assessment will track assessment and report assessment activities to the Executive Committee to ensure units are participating in the programmatic assessment process and not being overburdened with assessment initiatives.

The School's assessment calendar in Appendix B provides ongoing operational assessment activities, the frequency or date on which they occur, responsible parties, data sources and who will receive the information.

Assessment of Curriculum

Assessment of curriculum is conducted to ensure student learning, achievement of educational outcomes and curricular effectiveness. Assessment of the curriculum uses a variety of direct and indirect measures to ensure achievement of the School's curricular mission and to support evidence-based changes to courses, curriculum and pedagogy. The Distance Degrees and Programs (DDP) (which coordinates the North American Trained and International Trained PharmD programs) are integrated into the following assessments, but have separate consideration, where appropriate, due to program-specific courses, methodologies, and/or student considerations.

Assessment of the curriculum begins at the student level and aggregates to the programmatic level. The assessment process is dependent upon a wide array of participants for success, none more important than the faculty. Faculty continually work to improve curriculum and student learning and ensure the effectiveness of the curriculum through a multitude of teaching and assessment strategies. The formal assessment of curriculum function for the School is carried out by the Assessment Committee.

Working closely with the Curriculum Committee and the Director of the Assessment, the Assessment Committee gathers and reviews data to ensure the School's curricular mission is being met. The Assessment Committee will also ensure that the results of the assessments are communicated to the appropriate faculty, staff, administrators, preceptors, students and other stakeholders. Recommendations may be made to the appropriate stakeholders regarding monitoring and/or action that could be taken as a result of these assessments.

As part of this process, the Assessment Committee will conduct and review assessments related to all components of the curriculum. These assessments shall include formative, summative and standardized measures. North American Pharmacist Licensure Examination (NAPLEX), Pharmacy Curriculum Outcomes Assessment (PCOA), Multistate Pharmacy Jurisprudence Examination (MPJE), and The California Critical Thinking Skills Test (CCTST) results are used to assess programmatic outcomes (Appendix D – AC Policy for Evaluation of Standardized Assessments). Graduation rates, post-graduate training placements and job placements will also be reviewed and discussed on an annual basis by the AC. The aggregation of these various data will be used to assess the effectiveness of the program and make changes where necessary.

There are three assessment milestones regarding curriculum assessment. The first is the review of instruction and courses. Mid-course focus groups are conducted with students, course directors, department chairs, and the Associate Dean for Professional Education to gather formative course feedback. Summative course reviews occur each semester and are conducted by the Assessment Committee. The Assessment Committee reviews grades and end-of-course surveys. Results of the assessment process are provided to course directors and the Curriculum Committee for their review and to make appropriate modifications to courses or curriculum that are documented in course renewals and approved by the Curriculum Committee (Appendix E - AC Policy for Course Evaluation).

The second milestone is the review of the programmatic ability based outcomes (ABOs). This review occurs every two years. The review includes assuring the appropriateness of the ABOs, mapping ABOs to courses, documenting and reviewing assessment methodology (e.g., quizzes, written (multiple choice, short-answer, essay) exams, in-class activities, verbal evaluations, skill-based evaluations, objective structured clinical evaluations, portfolios, written reflections, verbal and written presentations, and skill

demonstration in real-world practice settings) and assessing ABO performance to predetermined standards. The Curriculum Committee and course directors review the results of the assessment and makes appropriate modifications.

The third milestone is a comprehensive review of the programmatic objectives, the relevance of the ABO's to health-care education and professions, and effectiveness of the curriculum. The programmatic review occurs every four years. This review is the culmination of the assessment efforts of the first two milestones. The evaluation process utilizes assessment data, national trends in pharmacy education and input from advisory panels and faculty to ensure the curriculum is effective and professionally relevant. Results are communicated to all faculty and changes are made where necessary.

In addition to the School's measures of learning, the Assessment Committee will use standardized data from AACP surveys (e.g., graduating student, faculty, alumni, preceptor) to assess performance compared to peer institutions and national averages. The Assessment committee reviews the results of the surveys, examining the results of the current survey, trends over time, and items that identify areas of emphasis. The results of this analysis are then distributed to the appropriate stakeholders (e.g., an administrator, unit, or committee that oversees the corresponding functional area). In addition to reviewing the School's individual results, the committee reviews the national and peer data to identify areas where the School may be perceived as deviating from comparable institutions (Appendix F - AC Policy for Evaluation of AACP Surveys).

The School's assessment calendar in Appendix B provides the specific assessment activities, the frequency with which they occur, responsible parties, data sources and who will receive the information to make any necessary improvements.

Appendix A

University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences

Mission, Vision, Values and Goals

The School's mission, vision, values and goals set forth the objectives of the school.

Mission

We are committed to excellence and innovation in professional, graduate and post-graduate education; scholarship and research; patient-centered care; public health advocacy; and societal leadership and engagement.

Vision

Together, our innovation, discoveries and engagement with our communities improve the health and well-being of society.

Values

In fulfilling our mission, the faculty, staff, and students of the University of Colorado Skaggs School of Pharmacy & Pharmaceutical Sciences are committed to the following values as an institution and in our actions as individuals:

- accountability
- collaboration
- diversity & inclusiveness
- entrepreneurism
- integrity

- professionalism
- respect
- leadership
- discovery & innovation
- social responsibility

Goals

To achieve its vision and mission, the school is committed to:

- recruiting, developing and retaining innovative and productive faculty and staff members who contribute to the advancement of pharmacy education, research, scholarship and practice.

- **providing expanded and innovative educational opportunities** that develop outstanding entry-level pharmacy practitioners who are motivated to advance pharmacy practice and the profession and to prepare scientists who are motivated to contribute to health and well-being through scientific research and scholarly pursuits.

- **advancing the practice of pharmacy** through development of innovations in pharmacy practice and delivery of superior patient care, including serving as active members of collaborative healthcare care teams committed to patient care and well-being.

- **improving health through research and scholarship** by being the innovators and leaders in research that promotes basic discovery, translation to clinical practice, medication evaluation

and optimization of medication use. Through communication of research findings, foster enhanced knowledge in professional, graduate and post-graduate learners

- **providing leadership and service to our communities** by actively engaging with its many communities and local, national and global communities that would derive substantial benefit from the school's collective knowledge and expertise.

- **achieving excellence through continuous quality improvement.**

- **develop innovative strategies** to identify and exploit opportunities that allow the school to make major advances in its mission areas.

Appendix B – Programmatic Evaluation Calendar

Activity	Timeframe	Responsible Party	Data Source	Delivered to	Outcome
Programmatic Evaluation Plan					
PEP Assessment					
• Assess PEP	May - Annually	Director of Assessment	Outcomes from previous year's plan	Associate Dean of Academic Affairs	Report summarizing previous year's evaluation activity and assessment of the PEP
• Draft/revise PEP	June - Annually	Director of Assessment	PEP Report/Next year's goals/Executive committee input	Executive Committee; Assessment Committee	Updated PEP for the following year
• Approve PEP	July - Annually	Executive Committee/Assessment Committee	Dir of Assessment	Dir of Assessment; Stakeholders	Finalized PEP and update delivered to faculty
Strategic Planning & Assessment					
Formative Assessment	June - Annually	Dir of Assessment & SIGs	Assessment Data and status update	Executive Committee	Interim memo and dashboard update
Summative Assessment	November - Annually	Dir of Assessment & SIGs	Assessment data, status update and SIG narrative focused on objectives	Executive Committee	Summative report and dashboard update
• Revise Strategic Plan	January - Annually	Executive Committee	Summative report, SIGs, Dir of Assessment; feedback from faculty, staff, students, steering committee, external stakeholders	Faculty	Updated Strategic Plan for faculty approval (at Faculty Retreat)
• Approve Strategic Plan	February – Annually	Executive Committee	Result of faculty vote at retreat	Faculty, staff, students, steering committee, external stakeholders	Updated Strategic Plan document, updated website

Activity	Timeframe	Responsible Party	Data Source	Delivered to	Outcome
Curriculum Assessment					
Review instruments	August – Annually	Assessment Committee	Surveys; Focus group protocols	Assessment Committee	Modifications made to instruments, creation or removal of instruments
Course Reviews					
• Focus groups	April – Annually November – Annually	Associate Dean for Professional Education; Course Directors; Chairs	Students	Course directors, chairs, Assoc Dean Professional Education	Reflection in the course renewal by Course Director

Activity	Timeframe	Responsible Party	Data Source	Delivered to	Outcome
Curriculum Assessment (cont.)					
• Course/Course Director Evaluations Administered	May – Annually December – Annually	Program Education Coordinator/Dir of Assessment	End-of-course surveys - quantitative responses and trends from qualitative data; grades	Assessment Committee	Quantitative and qualitative data and an abstract tying themes and numbers.
• Review Course Evaluations	February – Annually for Fall courses June – Annually for Spring Courses	Assessment Committee	Director of Assessment Abstract	Course directors, Curriculum committee	Evaluation form from AC reviewer
• Curriculum Committee Review and Renewal	May – Annually September – Annually	Curriculum Committee & Course Directors	Assessment committee Evaluation	Renewal form and updated syllabus back to Curriculum committee	Changes to courses
AACP Surveys					
• Preceptor	November – Biennially	Director of Assessment	Survey data	Assessment Committee; Stakeholders	Evaluation & recommendations sent to stakeholders with a reply required of actions taken
• Alumni	November – Biennially	Director of Assessment	Survey data	Assessment Committee; Stakeholders	Evaluation & recommendations sent to stakeholders with a reply required of actions taken
• Faculty	July – Biennially	Director of Assessment	Survey data	Assessment Committee; Stakeholders	Evaluation & recommendations sent to stakeholders with a reply required of actions taken
• Graduating Student	July – Annually	Director of Assessment	Survey data	Assessment Committee; Stakeholders	Evaluation & recommendations sent to stakeholders with a reply required of actions taken
o Benchmarking	Occurs when results are available	Assessment Committee	Survey data; Evaluation report	Stakeholders	Will be sent to executive committee & stakeholders for response as required
o National and Peer Comparison	Occurs when results are available	Assessment Committee	Survey data; Evaluation report	Stakeholders	Will be sent to executive committee & stakeholders for response as required
Curriculum Mapping, Outcomes, Effectiveness					
• Comprehensive review					
o ABO's Align to the Mission	August – Quadrennial	Assessment & Curriculum committees	Assessment data (all data since previous review)	Faculty	Suggested changes or updates
o Appropriateness of ABO's to profession	October – Quadrennial	Assessment & Curriculum committees	Assessment data (all data since previous review)	Faculty	Suggested changes or updates
• ABO's Assessment	March – Biennially	Assessment Committee	ABO Outcomes; Exit Survey	Assessment committee	ABO report
o ABO Mapping to courses	March – Biennially	Director of Assessment	Syllabi	Assessment committee	ABO report

Activity	Timeframe	Responsible Party	Data Source	Delivered to	Outcome
Curriculum Assessment (cont.)					
o Ensure ABO's are assessed throughout curriculum (Review Breadth and Depth)	July – Biennially	Assessment Committee	ABO report from course syllabi	Curriculum committee; course directors	Curriculum committee & course directors addresses issues in course reviews
o Review ABO Assessment Tools	July – Biennially	Assessment Committee	Course directors and AC members	Assessment committee	Assessment committee presents any suggestions for review to course directors and curriculum committee
o Compare ABO data to benchmarks	July – Biennially	Director of Assessment	ABO report	Assessment committee	ABO report presented to faculty and curriculum committee
Standardized Assessment					
• NAPLEX Results	July – Annually	Director of Assessment	Test results	Assessment committee	Review trends and area scores
• PCOA	June – Annually	Director of Assessment	Test results	Assessment committee	Review trends and area scores
• MPJE	July – Annually	Director of Assessment	Test results	Assessment committee	Review trends and area scores
• CCTST	May – Annually	Director of Assessment	Test results	Assessment committee	Comparison of P1 and P3 scores for improvement and differences in revised curriculum
o Benchmarking	Occurs when results are available	Assessment Committee	Test results	Stakeholders	Will be sent to executive committee & stakeholders for response as required
o Peer Comparison	Occurs when results are available	Assessment Committee	Test results	Stakeholders	Will be sent to executive committee & stakeholders for response as required
ITPD/NTPD					
• Pathway comparability					Discussion of any differences in outcomes between programs
o ABO's Assessment	February – Biennially	Director of DDP	DDP ABO report	Assessment committee	Discussion of any differences in outcomes between programs; Assessment committee reviews and provides any feedback to DDP and curriculum committee
o Course Reviews (see above)	February – Annually for Fall courses June – Annually for Spring Courses	Same process as above for course review			Discussion of any differences between programs; Assessment committee reviews and provides any feedback to DDP and curriculum committee

Activity	Timeframe	Responsible Party	Data Source	Delivered to	Outcome
Operational Plan Assessment					
Effectiveness of operational units	As needed or requested basis	Operational functions of the School will be assessed on an as needed or requested basis in collaboration with the Director of Assessment to provide greater data analytics for each unit.			
Student Affairs					
Assessment of Admissions Criteria	Ongoing committee work	Admissions Committee	Admissions data; academic performance of students	Admissions Committee; Student Affairs	Review trends to assure effective admission procedures and qualifications.
• Student Services	July – Annually	Director of Assessment	AACP Surveys; Exit survey	Associate Dean of Student Services	Tracking and review for continuous improvement
• Student & Cohort Tracking (Retention Rates; Progression; Graduation Rates)	Annually	Student Services	Student tracking system	Associate Dean of Student Services	Posted on the website and reported to executive committee
Academic Affairs					
• Assessment of Accreditation Compliance	July – Biennially	Faculty and Committees	Review of 2016 Standards	Faculty	Modification as appropriate to areas of concern
Experiential Education					
• Experiential Education	July – Annually	Dir of Assessment	AACP Surveys; Exit survey	Director of Experiential Education	Tracking and review of data for continuous improvement
• Preceptor feedback	November – Biennially	Dir of Assessment	AACP Surveys	Director of Experiential Education	Review trends and area scores; request response as required
• Review Practice Sites/preceptors	Ongoing	Dir of Experiential Education	Experiential Site surveys and reviews	Experiential Education Committee	Tracking and review of data for continuous improvement
Organizational Effectiveness					
• Stress/workload/morale - faculty, staff, students	Literature review in progress with completion by Aug; TBD for survey	Dir of Assessment	Literature review for valid measures	Assessment committee	Measure delivered and administered; request response as required
• Faculty (workload; resources)	July – Biennially	Dir of Assessment	AACP Surveys	Executive Committee	Review trends and area scores
• Organizational Culture; Leadership Effectiveness; Governance; Effectiveness of the Organizational Structure	AACP surveys follow the schedule outlined in Curriculum Assessment; Graduating student and program surveys annually in May; administration survey annually	Dir of Assessment	AACP Surveys; internal graduating student surveys; program surveys; administration survey	Assessment committee; Executive Committee; Departments	Review trends and area scores; request response as required
Dept of Pharmaceutical Sciences					
• Faculty effectiveness and productivity	Annually	Individual Faculty	SPAR	Dept Chair	Basis of performance review
Dept of Clinical Pharmacy					
• Faculty effectiveness and productivity	Annually	Individual Faculty	SPAR	Dept Chair	Basis of performance review

Appendix C

Operational Activity	Position Responsible
School Structure, Support, and Governance	
1.1. Review annually the school's administrative and organizational structure to assure it best serves the current and future needs of the school, its academic departments and units	Dean and Department Chairs
1.2. Review and revise annually policies and procedures of the school, its departments, offices and units, including charges to committees, to enhance faculty and staff productivity, facilitate the flow of information and ideas, support shared governance, increase efficiency and promote equitable and respectful treatment of all individuals.	Associate Dean for Academic Affairs
1.3. Assure all School of Pharmacy policies and procedures are aligned with policies and procedures of the Anschutz Medical Campus (AMC), the University of Colorado Denver, the University of Colorado System and the Board of Regents.	Associate Dean for Academic Affairs
1.4. Establish policies and procedures that enable the school to respond effectively to emergency and crisis situations.	Associate Dean for Academic Affairs
1.5. Assess the staffing structure and allocate support staff resources to meet the needs of each of the school's units.	Human Resources
1.6. Review and revise the school's information technology services to ensure that they support the current and anticipated needs of the faculty, staff and student body.	Associate Dean for Academic Affairs
1.7. Provide professional development opportunities for staff members to acquire skills that promote self-improvement and enhance the school's mission.	Human Resources
1.8. Assess and improve, as needed, staff evaluation procedures to assure consistency, reliability and quality of the process.	Human Resources

Strategic Planning	
2.1. Develop and implement strategic plans in all units that are aligned with the school strategic plan	Associate Dean for Academic Affairs
2.2. Assess, revise and report progress on the school and unit strategic initiatives annually and conduct comprehensive revision of all strategic plans at five year intervals.	Associate Dean for Academic Affairs
2.3. Support the vision and goals of the University of Colorado Denver.	Associate Dean for Academic Affairs

Communication and Public Awareness	
3.1. Increase the public and professional profile of the school.	Director of Communications
3.2. Plan and implement specific communication strategies to enhance student, alumni, public and professional awareness of the school, its mission, goals and accomplishments.	Director of Communications
3.3. Assess continuously effectiveness of communicating school activities to internal and external communities and implement improvements.	Director of Communications
3.4. Construct and maintain an attractive, effective, informative and user-friendly website.	Director of Communications
3.5. Develop and implement a system to update the school website on a timely basis and maintain continuous quality control of the website.	Director of Communications
3.6. Integrate the school website into the school's education, research and service missions.	Director of Communications

Accreditation and University Program Review	
4.1. Maintain accreditation status.	Associate Dean for Academic Affairs
4.2. Prepare for and complete the university program review to coincide with ACPE accreditation.	Associate Dean for Academic Affairs

Faculty Affairs	
5.1. Assess and provide, as necessary, administrative support for faculty governance.	Associate Dean for Academic Affairs
5.2. Enhance communication between administration and faculty regarding decision-making processes.	Associate Dean for Academic Affairs
5.3. Increase engagement of school faculty governance in campus and university faculty governance.	Associate Dean for Academic Affairs

Diversity	
6.1. Assess and revise the diversity plan annually to assure it meets needs of the school, the university and the community	Associate Dean for Academic Affairs
6.2. Develop and administer and review diversity climate survey to faculty, staff, students and alumni.	Associate Dean for Academic Affairs
6.3. Revise diversity plan and modify the diversity program based on diversity climate survey results.	Associate Dean for Academic Affairs
6.4. Monitor diversity content in professional and graduate curricula.	Associate Dean for Academic Affairs
6.5. Assess pedagogy as it relates to diversity.	Associate Dean for Professional Education
6.6. Enhance ability of professional program students to communicate with patients and other health care providers who exhibit limited English language proficiency.	Associate Dean for Professional Education
6.7. Provide training for professional program students on effective communication with patients who have physical, sensory or verbal impairments.	Associate Dean for Professional Education
6.8. Assure pharmacy practice experiences provide opportunities for all students to serve diverse patient populations.	Associate Dean for Professional Education
6.9. Develop outcomes that evaluate student competency to deliver health care to diverse populations.	Associate Dean for Professional Education
6.10. Promote introduction of multidisciplinary diversity course and experiential offerings.	Associate Dean for Professional Education
6.11. Proactively recruit a diverse faculty and staff.	Dean and Department Chairs
6.12. Foster an inclusive climate to promote retention of a diverse faculty and staff.	Associate Dean for Academic Affairs
6.13. Seek internal and external funds to support ongoing, e.g., Summer Enrichment Institute, and innovative student and trainee diversity efforts.	Dean and Associate Dean for Finance, Budget & Administration
6.14. Develop mechanisms that enhance the potential for successful applications by underrepresented students, e.g., through outreach and recruitment programs.	Associate Dean for Student and Professional Affairs

Diversity (continued)	
6.15. Develop strategies to specifically introduce more Spanish-speaking students into the profession of pharmacy to meet the needs of the practice community.	Associate Dean for Student and Professional Affairs
6.16. Foster an inclusive climate to promote success of students from diverse backgrounds.	Associate Dean for Student and Professional Affairs
6.17. Collaborate with the University of Colorado Denver Office of Diversity and Inclusion to establish training programs that educate and assess knowledge of diversity issues.	Associate Dean for Student and Professional Affairs
6.18. Provide diversity education programs.	Associate Dean for Student and Professional Affairs

Student Recruitment, Admissions, and Enrollment	
7.1. Develop and implement specific pharmacy recruitment strategies and educational programs, such as development of magnet programs that target populations from middle, high school and college level students in Colorado.	Associate Dean for Student and Professional Affairs
7.2. Collaborate with other University of Colorado Denver schools to host health professions recruiting events for prospective students and high school and college career advisors.	Associate Dean for Student and Professional Affairs
7.3. Develop a guaranteed admissions policy.	Associate Dean for Student and Professional Affairs
7.4. Establish a pre-pharmacy pipeline program at the downtown campus of the University of Colorado Denver.	Associate Dean for Student and Professional Affairs
7.5. Evaluate data from admissions records, PCAT scores and pre-pharmacy and pharmacy academic performance to better focus recruitment and admissions strategies.	Associate Dean for Student and Professional Affairs
7.6. Assess and revise, as necessary, admissions criteria for the first professional and non-traditional PharmD degree programs to assure selection of highly qualified and motivated students.	Associate Dean for Student and Professional Affairs
7.7. Assess and revise, as necessary, applicant screening procedures, including the interview process, to assure equitable and reliable assessment of each applicant's ability to succeed in the professional program.	Associate Dean for Student and Professional Affairs
7.8. Monitor the marketplace for pharmacist demand and adjust enrollments accordingly within the capabilities of the school.	Dean

Faculty Recruitment, Development, and Retention	
8.1. Bolster resources to facilitate successful recruitment of qualified candidates.	Dean and Department Chairs
8.2. Engage in proactive recruitment efforts for faculty members that advance the education, research and clinical service mission areas of the school.	Dean and Department Chairs
8.3. Increase use of adjoint faculty members to meet educational needs of the school.	Department Chairs (DOCP)
8.4. Evaluate the impact school policies have on recruitment and retention of qualified candidates.	Department Chairs (DOCP & DOPS)

Faculty Recruitment, Development, and Retention (continued)	
8.5. Engage faculty members in continuous professional development to improve their teaching, research or clinical skills.	Department Chairs (DOCP & DOPS)
8.6. Educate non-pharmacist faculty members about contemporary issues related to the profession and practice of pharmacy and pharmacist faculty members about contemporary issues related to pharmaceutical sciences.	Department Chairs (DOCP & DOPS)
8.7. Develop and implement a formal mentoring program that assists junior faculty members establish successful teaching, research and clinical service endeavors.	Associate Dean of Research
8.8. Optimize differential workloads to maximize individual faculty member expertise and promote professional growth and development.	Department Chairs (DOCP & DOPS)
8.9. Successfully nominate one or more faculty members for selected membership in AAAS or IOM.	Dean and Department Chairs
8.10. Develop an exit survey for departing faculty members to identify causes subverting faculty retention.	Department Chairs (DOCP & DOPS) and Human Resources
8.11. Support and provide resources through the academic departments and associate deans' offices for faculty participation in academic management courses, seminars, symposia, retreats and mentoring programs designed to enhance leadership and team-building skills.	Dean and Department Chairs
8.12. Recruit and retain faculty members whose expertise will advance the school's educational programs and who are committed to enhancing the educational mission of the school, knowledgeable about the profession of pharmacy and dedicated to its continuous advancement.	Dean and Department Chairs
8.13. Recruit and retain clinical faculty members who have the requisite knowledge and experience to establish pharmacist-delivered patient-centered care programs and provide exemplary patient care in targeted in-patient and outpatient settings.	Department Chairs (DOCP)

Finances, Revenue Generation, and Development	
9.1. Collaborate with AMC deans and University of Colorado Denver central administration to develop new revenue streams to assist in the financing of the health professions schools.	Dean and Associate Dean for Finance, Budget & Administration
9.2. Assure the school's operations budget meets the needs of the school in all mission areas.	Dean and Associate Dean for Finance, Budget & Administration
9.2.1. Maximize allocation of state funds	Dean and Associate Dean for Finance, Budget & Administration
9.2.2. Adjust enrollment plans and tuition and fee rate structures	Dean and Associate Dean for Finance, Budget & Administration
9.2.3. Responsible use of endowment and other funds	Dean and Associate Dean for Finance, Budget & Administration

Finances, Revenue Generation, and Development (continued)	
9.3. Develop new enterprises and entrepreneurial activities in research, education and clinical care by encouraging entrepreneurial activities by faculty and staff members.	Dean and Associate Dean for Finance, Budget & Administration
9.4. Establish a development strategic plan to increase contributions to support and enhance school programs.	Dean and Associate Dean for Finance, Budget & Administration
9.5. Continue to build the school's plant fund to meet the school's commitment to the construction of the new pharmacy building on the AMC	Dean and Associate Dean for Finance, Budget & Administration
9.6. Build the school's endowment to support education, research and clinical missions of the school.	Dean and Associate Dean for Finance, Budget & Administration

Expand Educational Offerings	
10.1. Establish continuing professional development programs that offer opportunities for practitioners to enhance their capabilities for providing patient-centered pharmacy care services and that foster life-long learning. - CPE	Associate Dean for Professional Education
10.2. Conduct a needs assessment and, if warranted, establish a Bachelor of Pharmaceutical Sciences degree as part of the professional program. - CPE	Associate Dean for Professional Education
10.3. Develop opportunities for establishing international education programs. - CPE	Associate Dean for Professional Education
10.4. Provide programs to enable pharmacy practitioners in Colorado and beyond to acquire the knowledge and skills needed to implement pharmacist delivered patient care programs in their local practice sites. - CPE	Associate Dean for Professional Education
10.5. Provide pharmacy practitioners with an array of continuing education opportunities ranging from select lectures and tutorials through academically rigorous certificate and non-traditional degree programs. - CPE	Associate Dean for Professional Education
10.6. Develop continuing education opportunities for Colorado practitioners using various delivery modalities, including on-line. - CPE	Associate Dean for Professional Education

Distance Degree Programs	
11.1. Align the NTPD program with the first professional PharmD degree program to the extent possible as it relates to curriculum content and delivery, assessment and continuous quality improvement. - DDP	Associate Dean for Professional Education
11.2. Determine lifespan of the NTPD program using data on application rates, enrollments, student learning and graduation rates. - DDP	Associate Dean for Professional Education

Research and Graduate Studies - Assessment, Development, and Improvement	
12.1. Establish and implement a continuous assessment plan to annually monitor the graduate curriculum to assure that it prepares the students for successful research careers in industry, academia or government.	Associate Dean of Research
12.2. Develop collaborative graduate programs with the Graduate School of the University of Colorado Denver.	Associate Dean of Research
12.3. Identify and recruit outstanding students for graduate programs.	Associate Dean of Research

Research and Graduate Studies - Assessment, Development, and Improvement (continued)	
12.4. Develop financial resources to support students. Sustain outstanding graduate programs by maintaining and expanding financial resources for student support.	Associate Dean of Research
12.5. Promote more independence and critical thinking by graduate students.	Associate Dean of Research
12.6. Provide opportunities for graduate students to engage in interdisciplinary research.	Associate Dean of Research
12.7. Continue to develop and maintain contact with alumni of the graduate program.	Associate Dean of Research

Enhance Research Programs	
13.1. Strengthen focused research and training programs, e.g., molecular toxicology, pharmaceutical biotechnology and pediatric neurology.	Associate Dean of Research
13.2. Identify sources to fund state-of-the-art equipment needed to support and enhance research endeavors.	Associate Dean of Research
13.3. Host or sponsor research events, e.g. the Skaggs Symposium in 2012.	Associate Dean of Research
13.4. Participate in research events on AMC.	Associate Dean of Research
13.5. Increase and diversify funding sources to support research and scholarship endeavors.	Associate Dean of Research
13.6. Develop further interdisciplinary research and scholarship programs in all areas.	Associate Dean of Research
13.7. Strengthen the school's research capabilities and productivity by recruitment and retention of faculty members with exceptional potential or proven records of research productivity in accordance with departmental strategic plans	Associate Dean of Research
13.8. Develop clinical, translational and pharmaceutical outcomes research as recognized areas of strength.	Associate Dean of Research
13.9. Enhance faculty research productivity through promotion of collaborative efforts, incentives and provision of appropriate infrastructure.	Associate Dean of Research

Professional Services Plan	
14.1. Review and revise PSP revenue and disbursement policies to assure fair treatment of all PSP members.	Associate Dean for Administration and Operations
14.2. Determine effect of the PSP on faculty external activities.	Associate Dean for Administration and Operations
14.3. Incorporate new reimbursable pharmacy services into the PSP.	Associate Dean for Administration and Operations
14.4. Document financial sustainability of the PSP.	Associate Dean for Administration and Operations

Institutional Involvement	
15.1. Establish a stronger presence on University of Colorado Denver and AMC committees.	Associate Dean for Administration and Operations
15.2. Actively participate on institutional committees	Associate Dean for Administration and Operations

Utilize AMC Facilities	
16.1. Work collaboratively with University of Colorado Denver AMC administration to ensure adequate research support facilities, including vivarium and clinical research facilities.	Associate Dean for Professional Education
16.2. Develop policies and procedures, independently and collaboratively with other AMC schools that facilitate use of AMC education facilities.	Associate Dean for Professional Education
16.3. Promote familiarization of external community (e.g., preceptors, supporters, State Board) with AMC facilities.	Associate Dean for Administration and Operations

Transfer of Knowledge	
17.1. Serve as state, national and international leaders in fields of expertise.	Department Chairs (DOCP & DOPS)
17.2. Promote faculty consulting services in areas of faculty expertise, e.g., MTM services.	Department Chairs (DOCP & DOPS)
17.3. Encourage and support activities that lead to technology development, transfer and licensing.	Department Chairs (DOCP & DOPS)
17.4. Support and promote activities consistent with the Colorado Clinical Translational Sciences Institute (CCTSI).	Associate Dean of Research
17.5. Conduct a market analysis and, if warranted, develop a drug manufacturing facility to support the needs of campus faculty and private companies and provide educational opportunities for professional and graduate students.	Associate Dean of Research

Residencies and Fellowships	
18.1. Identify and recruit outstanding residents and fellows.	Department Chairs (DOCP)
18.2. Increase involvement of residents and fellows in professional and graduate education programs.	Department Chairs (DOCP)
18.3. Maintain and, where possible, expand ASHP certification of residencies	Department Chairs (DOCP)

Increase Support for Student Financial Aid	
19.1. Independently and in collaboration with the campus' financial aid office, identify additional sources of student financial aid (scholarships, grants and loan funds) from foundations and government agencies.	Associate Dean for Student and Professional Affairs
19.2. Identify and cultivate potential donors with a special interest in student financial aid.	Development Office
19.3. Establish a tradition of gift support among alumni, especially among those who were the recipients of financial aid as students.	Development Office
19.4. Develop strategies for mitigating any negative effects changing prerequisites (e.g., number of credit hours) have on student accessibility to financial aid resources	Associate Dean for Student and Professional Affairs

Assessment Committee
Evaluation of Standardized Assessments

ACTIVITY: Standardized Assessment	Effective: June 2015

Overview

The Assessment Committee (AC) is responsible for evaluating the results from Standardized Assessments including the North American Pharmacist Licensure Examination (NAPLEX), Pharmacy Curriculum Outcomes Assessment (PCOA), Multistate Pharmacy Jurisprudence Examination (MPJE), and The California Critical Thinking Skills Test (CCTST). These assessments provide data for individual, class, School, peer, and national analyses and comparisons. The NAPLEX and MPJE are administered through standardized timeframes and analyzed by the school when available. The PCOA is administered in the P3 year to all students in April and analyzed by the school in June. The CCTST is administered in September of the P1 year and March of the P3 year. Comparative data are analyzed in May.

Role of the AC

Gathering Data

The AC will receive standard reports from the Director of Assessment detailing within school trends as well as comparison data to peer institutions and national data for the given calendar year, where available.

Evaluating Data

The AC will then evaluate the data based on within class, School, peer institution, and national trends. The AC will establish benchmarks based on the data and use these for future assessment and evaluation.

Reporting of Findings

The AC will generate a report and dashboard highlighting any data warranting further discussion. These reports will be forwarded to the appropriate stakeholders including the executive committee, curriculum committee, distance degrees and programs committee, course directors and/or any other appropriate individuals. These data will be used to help stakeholders create or adjust policies and or modify curriculum, where appropriate, to address specific issues identified within the AC report.

Stakeholders/Action Items

The data will be presented to the curriculum committee, course directors, and faculty for review. When requested by the AC, stakeholders will provide a response to issues identified based on the evaluation of the results.

Assessment Committee
Course Evaluation Policy

ACTIVITY: Course Review	Effective: April 2015

Overview
The Assessment Committee (AC) reviews all courses during the P1-P3 year using a standardized assessment tool (p3). The course evaluation tool was developed by the AC in 2010 and implemented in 2011 and is reviewed annually. This tool assesses several major domains including, learning strategies, course content, self-directed learning, IPPE and skill-based activities, course evaluations and assessments, integration of content and the helpfulness of the course director. These questions are scored using a 5 point Likert scale. Distance Degree Program courses are reviewed using a similar tool (p4) and processes with slight modifications to address unique curricular and student issues.

The Advanced IPPE and APPE rotations are evaluated using a different evaluation tools (p5). These data are placed into a report and presented to the AC twice yearly by the Director and Assistant Directors of the Office of Experiential Programs. These data are acted upon by the Experiential Education Committee after each rotation and actions taken are included in the report provided to the AC. The AC will provide recommendations back to the Experiential office with concerns with the evaluation tools/process and data.

Role of the AC
The Assessment Committee reviews course evaluations in June (for Spring courses) and February (for Fall courses). Each AC member is selected to independently review 2-3 courses each semester using the AC course evaluation form (p6). Each course is reviewed using course grades and course evaluation data. The committee has set standards for evaluation questions (scores less ≤ 3.5), overall average grades (≤ 3.00), and individual final grades (any occurrences of D or F). Scores outside of these standards are flagged for further discussion with the AC.

Gathering Data
The Director of Assessment compiles course feedback data once students have completed the course evaluation assessment in CoursEval®. The data is sent to the AC chair who distributes the data to the reviewing AC member.

Evaluating Data
Completed course evaluation forms are distributed to the committee and each member presents their evaluations to the AC. Any flagged items are discussed at this time. Flagged individual final grades trigger a review of evaluation scores within the course to determine if there are components of the course's evaluations where students performed poorly. The AC then reviews semester-over-semester trends in course evaluation scores (>0.3) and overall average grades (>0.5) to determine if significant changes or trends have occurred. Based upon the number and seriousness of the flagged items, further discussion with course directors can be requested at a future committee meeting to gather their input and feedback regarding the evaluations.

For each new course conducted within the curriculum, the AC requests each course director to be in attendance during the AC's review of their course. For subsequent years the course directors are only required to attend a review if courses do not perform to the predefined thresholds.

Reporting of AC Findings

The AC provides a summary of the course data and any recommendations back to both the course director(s) and to the Chair of the Curriculum Committee (CC).

Stakeholders/Action Items

Each year course directors must submit a course renewal form to the CC (p7). On the course renewal form each course director needs to comment on the AC findings from the previous year and should address any changes that will occur in their upcoming course as a result of AC recommendations. This course renewal form is housed with the Curriculum and Assessment Committees for quality improvement purposes and documentation of outcomes associated with the course assessment and curriculum intervention.

Assessment Committee
Evaluation of AACP Surveys

ACTIVITY: AACP Surveys	Effective: May 2015

Overview
The Assessment Committee (AC) is responsible for evaluating AACP surveys including, the graduating student survey (annually), preceptor survey (biennially), faculty survey (biennially), and alumni survey (biennially). Each survey is used to assess the School's performance, provide a comparison to peer and national data, and set benchmarks.

Role of the AC

Gathering Data
The AC will receive standard reports through from the Director of Assessment. The Director of Assessment will pull the data from AAMS detailing within school trends as well as comparison data to peer institutions and national data for the given calendar year.

Evaluating Data
The AC will use standardized data from AACP surveys to assess the performance of the School, and comparatively against peer institution and national averages. The Assessment committee reviews the results of the surveys, examining the results of the current survey, trends over time, and items that identify areas of emphasis. This allows the AC to delineate areas of strength as well as opportunities for improvement within the School. The AC will establish benchmarks based on the data and use these for future assessment and evaluation of School performance and improvement.

Reporting of AC Findings
The AC will generate a report and dashboard highlighting any questions warranting further discussion. These reports will be forwarded to the appropriate stakeholders including the executive committee, Office of Experiential Programs, Distance Degrees and Programs office, Office of Student Services, Director of Alumni Relations, curriculum committee and/or any other appropriate individuals. These data will be used to help stakeholders create or adjust policies designed to address specific issues identified within the AC report. Data will also be used to shape future strategic planning initiatives at the discretion of the executive committee.

Stakeholders/Action Items
The AC provides the data and topics for consideration to appropriate stakeholders. When requested by the AC, the stakeholder will be required to provide actions for correction, a timeline for implementation, and a person responsible.