



**COLLEGE of PHARMACY,
NATURAL & HEALTH SCIENCES**

Pharmacy Program Annual Report

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Annual Report Table of Contents

Admissions	1
Assessment	3
Co-Curricular	4
IPE	5
Curriculum	6
Faculty Governance	8
Professional Development	9
Strategic Plan Evaluation	10
Pre-NAPLEX and PCOA	26
Student Progression	27
AACP Faculty Survey	28
Stress Survey	29
AACP Preceptor Survey	34
APPE Site Evaluations	35
Student Affairs	46
Honor Council	48
Correlating Admissions Criteria with Success	49
Technology Update	50
Pharmacy Practice Department	51
Pharmaceutical Sciences Department	53
Student Organizations	56
Student Focus Groups	61
ITS	84
Pharmacogenomics	85

Admissions Committee

Chair: Tracy Brooks

Charge	Progress towards charge
(1) Serve as Self-Study Team 4 developing the self-study report for the standards outlined in the self-study plan (Standards 16-23)	Complete
(2) Complete evaluation of the effectiveness of our admission criteria to predict academic success in completing the degree.	Ongoing - - initial assessment completed
(3) Evaluate the 2014-2015 admission process, with a special emphasis on the admission application review process, and make recommendations for a change for the 2015-16 cycle	Complete
(4) Implement the 2015-2016 admissions process and make recommendations for students to be admitted into the 2016 Fall P1 Class	Completed. Fall 2016 P1 class set at the May 2, 2016 admissions meeting

<p>Strengths/Accomplishments of the committee in the 2015-2016 academic year</p>	<ul style="list-style-type: none"> • Implemented two additional rubrics that are now used for the On-Campus interview day. These rubrics provide a more formalized evaluation for the team activity and also for an evaluation of the candidate’s professionalism throughout the on-campus interview experience. Training for the evaluators was provided. These scores are shared, in addition to the interview score itself, when the admissions committee convenes after an interview Saturday when the candidate is considered for an invitation to our program. • OSA constructed a database (which included 11 indicators) for statistical analysis to determine which of these factors are predictive for increasing a student’s risk of “not a good performance” in the Manchester College of Pharmacy Program. Due to limited sample sizes, the admissions math GPA was the only significant variable ($p < 0.0001$) = the risk of “not good performance” decreased with higher admission math GPA. • Fall 2016 P1 class (as of 5-3-16): At that moment, Admissions Committee recommended to Dean Rospond (which she approved to move forward): inviting 6 students to the class from Interview Day #6, which will (assuming all deposit) equal a total of 80 admits. Currently the wait list is composed of a total of 43 students (committee hold individuals accumulated from all six interview days). • A Survey Monkey was sent to all Faculty and Admissions Committee Members 4-29-16 to gather feedback and input on the current admissions process. The results of the Survey Monkey will be shared with the faculty at the faculty meeting 5-20-16. The admissions committee (minus students) will meet, discuss, and vote on changes to the process for the 2016-17 cycle. Those changes will be announced at the June Faculty meeting
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<p>Challenges the committee faced in the 2015-2016 academic year</p>	<ul style="list-style-type: none"> • Charge #3 was impossible -- because by the time the Chair (Tracy Brooks) was appointed, the <i>Ex-officio</i> Joe Bonnarens stated that no changes were requested/made in May 2015 at the final Admissions Meeting of the 2015-16 cycle • <u>Communication / Job Responsibilities</u> between -- Committee : <i>Ex-officio</i> : Chair : Office of Student Affairs
<p>Proposed future directions and/or charges for the committee in the 2016-2017 academic year</p>	<ul style="list-style-type: none"> • For 2015-16 – The committee took the initial step in evaluating the effectiveness of our admission criteria to predict academic success in completing the degree. The only “outcome of success” that was evaluated was “Did the student have any problem with any required course -- not passing and/or needing remediation = not good performance. This assessment needs to be expanded. It would be helpful to know if total application score + interview score correlates with success, since we spend a lot of time in admissions “scoring” both the interview and application.

Assessment Committee Progress Update

Chair: Brian Henriksen (interim Chair Diane Calinski)

Members: Diane Calinski, Dusty Linn, Tom Smith, Shealy Todd (student)

Ex-officio (non-voting): Jennifer Henriksen, Tommy Smith,

Charges	Progress towards charge
Charge 1: Collaborate with the Co-Curricular Committee in developing the Pharmacy program's report to ACPE addressing our plan for meeting the 2016 accreditation standards.	Complete
Charge 2: Implement the Committee's role in the Self- Study plan by establishing liaisons to Self-Study Teams and serving teams in the capacity outlined in the self-study plan	Complete
Charge 3: Complete the review and revision of the assessment plan for the pharmacy program.	Complete
Charge 4: Maintain and implement the Pharmacy assessment plan and facilitate the program's assessment process	In process

Strengths/Accomplishments of the committee in the 2015-2016 academic year	<ul style="list-style-type: none"> • The progress report on the programs preparations for ACPE Standards 2016 was submitted • The Assessment committee successfully represented the programs approach to assessment in the self-study and site visit • The program's Assessment Plan has been revised and is being implemented as part of continuous quality improvement (CQI) efforts to reduce the data collection efforts required by the next self-study
Challenges the committee faced in the 2015-2016 academic year	<ul style="list-style-type: none"> • The annual report is in its infancy. A substantial amount of work and review is required to ensure that the information needed for CQI is being collected from each unit or stakeholder group
Proposed future directions and/or charges for the committee in the 2016-2017 academic year	<ul style="list-style-type: none"> • Review our Course and Instructor Evaluation Policies and recommend updates • Monitor effectiveness of EPAs & Milestones • Implement Revised Assessment Plan

Co-Curriculum Committee

Chair: Andrea Wilhite

Charges	Progress towards charge
Charge 1: Collaborate with the Co-Curricular Committee in developing the Pharmacy program's report to ACPE addressing our plan for meeting the 2016 accreditation standards.	Complete
Charge 2: Serve as Self-Study Team 3c developing the self-study report for the standards outlined in the self-study plan.	Complete
Charge 3: Develop a plan for the integration of leadership and professional development based upon the ACPE Standards 2016 requirements and the CAPE Institute Team Report	In process
Charge 4: Develop a plan that integrates our mission, visions, and strategic commitment to service with our curricular and co-curricular requirements and desire to develop graduates of ability and conviction	In process

Strengths/Accomplishments of the committee in the 2015-2016 academic year	<ul style="list-style-type: none"> • We evaluated all current potential co-curricular activities being done at the college and mapped these to standards 3 and 4 of the 2016 ACPE Standards to assess areas of strength and opportunity in the program • We are developing a working plan for achieving the 2016 ACPE standards by implementing a LIEC (leadership, innovation, entrepreneurship, and cultural sensitivity) program • We submitted a team report addressing our plan to meet the 2016 accreditation standards
Challenges the committee faced in the 2015-2016 academic year	<ul style="list-style-type: none"> • With the co-curriculum being a new established committee to address the ACPE 2016 Standards, there is significant ambiguity on how to appropriately meet implement co-curricular activities • All members were part of other committees completing significant work for the ACPE Self-study making it difficult to coordinate time and allotment for working on development of co-curricular activities
Proposed future directions and/or charges for the committee in the 2016-2017 academic year	<ul style="list-style-type: none"> • With co-curriculum intersecting with many aspects of the curriculum, appointing faculty roles for interprofessional activities and professional development role would significantly aid in the development of co-curricular activities and ensuring standards are being met in these areas

IPE

Lab

	Number of activities	Other health professions participants (list)
P1 Fall	(1 + OSCE) SBAR Lab	SBAR: PA, PT, OT OSCE: PA, RN
P1 Spring	(1) Med Admin Routes Lab	Nursing (BSN)
P2 Fall	(2 + OSCE) Vital signs Emergency preparedness	VS: Nursing EP: Nursing OSCE: Nursing, PA
P2 Spring	(2 – 1 did not occur this year) Beyond the medicine (Not this yr) Pharmacogenomics	BTM: Social work PGX: PA
P3 Fall	(0)	
P3 Spring	(1+IPT+OSCE) Asynchronous Care plan PGX (IPT)	CP: Nursing PGX: Med students

FWAIEPC

- Institutions: St. Francis, Trine, IPFW, Huntington, IUsoM-FW campus, FWMedEd, Manchester
- Participants:
 - Students: MD, PA, NP, PT, OT, PharmD
 - Medical Residents
- P1: required to attend all 3 sessions
- P2: required to attend 1 of 3 sessions
- P3: Leadership Journey II student facilitated 1 session
- Summer workshop day (June 21): streamline the two year curriculum, enhance facilitator training to allow for P3 students and medical residents to facilitate and enhance assessment of the students and activities

Curriculum Committee

Chair: Trent Towne

Charge	Status of Charge
<ul style="list-style-type: none"> Charge 1: Identify the programs curricular progression requirements that are not currently based within a course and develop a plan to clarify accountability, delivery, completion and assessment of these requirements. 	Currently under review by committee. We have catalogued what we feel are progression requirements and this has instituted a broader discussion about what constitutes a progression requirement. Over the next 2 committee meetings we hope to develop some definitions and define how best to coordinate the assessment and accountability. Essentially we are looking at do we have a centralized person to track all this or do we have a centralized repository where everyone has individual roles but must log completion into one area.
<ul style="list-style-type: none"> Charge 2: Serve as Self-Study Team 3a: developing the self-study report for the standards outlined in the self-study plan. 	Completed
<ul style="list-style-type: none"> Charge 3: Evaluate our curricular approach to interprofessional education and develop recommendations for curricular change that would ensure compliance with ACPE 2016 standards. 	Completed
<ul style="list-style-type: none"> Charge 4: Complete the standard reviews of course and program offerings and assessment of curricular goals. 	All reviews completed to date; we anticipate 1-2 new electives to review as well as finalization and review of the 2016 fall core syllabi in the upcoming months.

Strengths/Accomplishments of the committee in the 2015-2016 academic year	<ul style="list-style-type: none"> Completion of a robust and complete self-study review that concisely summarized the program's curriculum Many updates to the procedures for how the committee processes the acceptance and review of syllabi <ul style="list-style-type: none"> Syllabus Review Process – Z:drive (Course information and Syllabi) Tracking system for Syllabi Review (Internal to committee and AA office) Movement of the committee's primary focus away from syllabi review and toward higher level overview of the program's overarching goals Adoption of a spiral integration model as the modality of integration for our program
Challenges the committee faced in the 2015-2016 academic year	<ul style="list-style-type: none"> Achieving quorum at committee meetings due to variety of commitments of members of committee Managing non-charge related queries to the committee due to volume of work necessary to complete self-study <ul style="list-style-type: none"> Spiral Integration Grading scale

	<ul style="list-style-type: none"> ○ Larger changes to courses/course designs
Proposed future directions and/or charges for the committee in the 2016-2017 academic year	<ul style="list-style-type: none"> • Review and assessment of the influence of spiral integration in the curriculum • Re-mapping of programmatic courses to EPAs • Review of programmatic topics and assurance all “critical” topics have been covered • Complete review of programmatic structure and recommendations for any changes to course offerings including but not limited to topics, credit hours assigned, year covered

Governance Committee

Chair: Özlem Ersin

Charge	Progress towards charge
(1) Develop an easy reference sheet on bylaws requirements that can be used by faculty and committee chairs.	Complete
(2) Serve as Self-Study Team 2 developing the self-study report for the standards outlined in the self-study plan.	Complete
(3) Benchmark the pharmacy P & T document against those of similar institutions and forward recommendations for change focusing on the evaluation criteria for teaching, scholarship and service.	This charge will continue to be a future charge for the committee. There have been challenges obtaining P&T information from other institutions. The committee is currently working Dean Rospond to complete the data gathering phase of this charge.
(4) Evaluate the AACP faculty survey results on issues related to faculty governance and communication and make recommendations on actions that will enhance outcomes utilizing the national statistics as our benchmark.	Currently in the data analysis phase of this charge.

Strengths/Accomplishments of the committee in the 2015-2016 academic year	<ul style="list-style-type: none"> • Getting our work done on time despite multiple competing priorities • Collegiality • We have served to facilitate faculty who want to ask questions about governance, and as a conduit to bring items to other committees
Challenges the committee faced in the 2015-2016 academic year	<ul style="list-style-type: none"> • Multiple competing priorities through other committee assignments and teaching
Proposed future directions and/or charges for the committee in the 2016-2017 academic year	<ul style="list-style-type: none"> • Coordinate effort with University-wide governance work • Clarify how/when faculty may engage with the Faculty Governance Committee • How do faculty members “assign” tasks to the Committee (or do they not?)

Ad hoc Professional Development Committee

Chair: Rob Beckett

Charge	Progress towards charge
(1) Serve as Self-Study Team 5 developing the self-study report for the standards outlined in the self-study plan.	Complete
(2) Develop a comprehensive faculty development plan for the pharmacy program.	Complete
(3) Articulate a growth and development process that links job descriptions/expectations, annual goals, faculty annual reports and performance evaluations, promotion and tenure preparation and feedback, and use of professional development funds.	Complete

Strengths/Accomplishments of the committee in the 2015-2016 academic year	<ul style="list-style-type: none"> • We also completed an update of the faculty awards process incorporating faculty input and facilitating leadership of this process by the director of professional development. • We assisted Experiential Education in developing the new preceptor of the year awards, and brought these forward for faculty approval. • We served as a sounding board for the director of professional development by providing input and feedback on planned and completed professional development programming. • We believe that our methods for obtaining input from the faculty through focus groups, town hall meetings, and early distribution of documents was effective in developing content that had relevance and reflected the majority of faculty needs.
Challenges the committee faced in the 2015-2016 academic year	<ul style="list-style-type: none"> • Our charges were all relatively urgent in terms of ACPE and annual review timelines, so most work needed to be completed in the fall semester.
Proposed future directions and/or charges for the committee in the 2016-2017 academic year	<ul style="list-style-type: none"> • If the director of professional development position is posted and successfully filled, this committee should not be needed next year. However, if this is not the case we will likely need a designate and committee in order to continue executing and assessing the professional development plan and the awards.

Strategic Plan Evaluation

Strategic Priority 1

Educating the next generation of practitioners and scientists.

Evolve education, engage students, advance healthcare

Strategic Initiative 1.1

Meet or exceed the standards for accreditation by ACPE, earning accreditation for the maximum interval available.

Objectives:

- Complete a comprehensive self-study that is notable for broad-based input from internal and external stakeholders and represents a plan to further advance the quality of the program beyond the requirements of the standards. **(Completed)**
- Invest in the participation of administrators, faculty and staff in professional development (i.e. ACPE workshops) that expands understanding of accreditation standards and supports the programs goal to meet or exceed the standards.
- Position the program to meet or exceed the accreditation standards that are effective July 1, 2016.
 - Create a co-curricular standing committee to prepare and develop co-curricular programs. **(Committees charges ongoing)**
 - Evaluate need for IPE and community service coordinator. **(Completed)**
 - Send a team to the AACP Encore Institute on ACPE 2016 standards. **(Completed)**
 - Evaluate portfolio for assessment of defined outcomes.
 - Develop entrustable professional activities for the program. **(Completed)**
 - Develop milestone assessments for each entrustable professional activity (EPA). **(Completed)**
- Debrief on our self-study process for full accreditation; adjust plan as we think forward to our next focused visit 2 years after full accreditation; approach; plan based on follow-up R&R.

Strategic Initiative 1.2

Evolve and engage learners to meet the needs of the profession today and into the future.

Objectives:

- Evolve the educational outcomes of the professional program utilizing guiding documents (i.e. CAPE, JCPP) that incorporate entrustable professional activities. **(Ongoing)**
 - Develop and approve entrustable professional activities (EPA's). **(Completed)**
 - Integrate EPA's into appropriate curricular documents and maps. **(Ongoing)**
 - Integrate EPA's into experiential education curriculum. **(Completed)**
- Mature the program's curricular philosophy and pedagogies to maximize curricular and co-curricular integration. **(Ongoing)**
 - Evaluate and adopt a model to guide curricular integration of the program. **(Ongoing)**
 - Enhance the co-curricular program to complement the program's educational outcomes and meet the 2016 ACPE standards. **(Ongoing)**
 - Integrate active learning strategies into all courses.
 - Develop and implement a systematic process for IPT course integration.
 - Implement effective milestone assessments utilizing current and new technologies.

Strategic Plan Evaluation

- Develop academic policies and/or procedures for non-course based curricular progression requirements to ensure accountability, delivery, completion and assessment.
- Evaluate the portfolio system to maximize its effectiveness in supporting professional development, documenting student learning, and providing advantages for career placement.

Strategic Initiative 1.3

Strategically position the pharmacy program to be nationally regarded as a model for interprofessional education through collaborative partnerships with non-academic health science center institutions

Objectives:

- Develop new and innovative IPE learning opportunities.
 - Develop an IPE plan to guide development of IPE Activities **(Ongoing)**
 - Evaluate the current status, review and adopt new approaches to enhance IPE in faculty practice sites.
 - Evaluate and enhance laboratory IPE activities.
 - Evaluate and recommend opportunities for enhancement of co-curricular IPE learning experiences.
- Explore and pursue models of inter-professional education that involve high-fidelity simulation training.
 - Build relationships with Mirro Research and Innovation Center to support IPE activities. **(Ongoing)**
 - Explore the ability to incorporate high-fidelity simulation training into laboratory and/or co-curricular experiences.
- Strengthen engagement with the Fort Wayne Inter-professional Education Consortium (FWAIEC). **(Ongoing)**
 - Encourage and support faculty participation as group moderators at FWAIEC events.
 - Develop and implement workshop to engage all FWAIEC partners in a discussion of IPE and respective accreditation requirements on IPE. **(To be completed on 6/21/16)**
- Evaluate the need for a formal coordinator or director of inter-professional education. **(Completed)**
- Identify key papers to write and publish that promote and support the innovative practices inter-professional education.
- Foster, encourage and support external visibility of our efforts regionally and nationally.

Strategic Initiative 1.4

Foster problem solving and critical thinking skills and transition student-learners from dependent to independent to facilitate life-long learning.

Objectives:

- Utilize and assess active learning and other validated pedagogical methods to enhance problem-solving and critical thinking skills.
 - Develop, integrate, and assess “real-world” cases designed to develop problem-solving and critical thinking into courses.

Strategic Plan Evaluation

- Develop, implement and assess laboratory activities designed to integrate students and learning objectives across P1-P3 classes.
- Identify and evaluate best practices to enhance problem solving and critical thinking.
- Offer professional development that focuses on problem-solving and critical thinking.
- Identify and evaluate best practices in assessment of problem solving and critical thinking.
- Incrementally and sequentially develop knowledge, skills and abilities
 - Develop entrustable professional activities that require problem solving and critical thinking and implement milestone assessments to demonstrate incremental development. **(Completed)**
 - Intentionally design lab experiences that cross semesters with increasing complexities.
 - Evaluate and revise OSCEs to focus on incremental development of problem solving and critical thinking.
 - Identify, evaluate and implement, as appropriate, applications within Neehr Perfect designed to develop and demonstrate incremental development of these skills.
 - Review and revise as sequential activities spanning IPPE's to APPE's that develop and demonstrate increasing problem solving and critical thinking skills.
- Develop learner accountability for continued growth through reflection, self-assessment and life-long learning.
 - Evaluate and revise role of faculty mentor in portfolio reflections, self-assessment and development plans.
 - Develop and implement student workshops on reflection and self-assessment.
 - Integrate portfolios into co-curriculum plan focusing on accountability of learning and development.
 - Provide faculty and staff professional development on coaching.
 - Evaluate and review mission driven service requirement within the plan for the co-curriculum.

Strategic Initiative 1.5

Create and promote innovative educational opportunities that enhance the distinctiveness of our graduates and appeal to prospective applicants

Objectives:

- Create academic certificates that reinforce the mission, vision, and areas of distinction.
 - Evaluate the potential for an academic certificate regarding underserved and vulnerable populations.
- Create co-curricular experiences that reinforce the mission, vision, and areas of distinction. **(Ongoing)**
 - Integrate community engagement goals with co-curriculum plan.
- Evaluate and develop dual degree or joint degree programs that enhance distinctiveness of our graduates and meet market needs
 - Develop a plan for a dual degree offering between Pharm.D. and MS in PGx.
 - Identify and explore additional distinctive dual degree or joint degree offerings.
- Explore and develop new and viable interdisciplinary and collaborative academic programs
 - Explore the ability to integrate PA (Trine) and pharmacy students in IPE activities.

Strategic Plan Evaluation

- Identify new routes to deliver the curriculum that benefit our students.
- Provide faculty and staff professional development in areas of distinctiveness. **(Ongoing)**
 - Faculty development workshop on inclusivity – Scheduled July 12, 2016
 - Faculty development workshop on teacher-scholar model – (date in 2015-2016)
 - Evaluate the possibility for international exchange of faculty and students.
- Create a marketing plan that promotes innovative and distinctive programs to prospective and current students.

Strategic Initiative 1.6

Recruit and engage a diverse community of students

Objectives:

- Evaluate the effectiveness of our admission criteria in predicting academic success. **(Ongoing)**
 - Create success measures connected to admission criteria for evaluation. **(Completed)**
 - Identify and obtain resources required to complete evaluation. **(Completed)**
 - Complete aggregate and sub-group analysis focusing at minimum on academic profile and diversity demographics to determine impact on success. **(Completed)**
 - Outline recommendations for revising admission criteria for the fall 2017 admission cycle. **(Completed)**
 - Train faculty, staff and students on best practices in evaluation of potential candidates.
- Evaluate the 2014-2015 admission process to advance the efficiency and effectiveness of the process. **(Completed)**
 - Develop rubrics to provide specific criteria and standardized scores for use in process. **(Completed)**
 - Evaluate the literature for best practices to determine fit with program mission and goals.
- Create a recruitment and marketing plan designed to maximize opportunities for a diverse group of learners. **(Completed as of 7/1/16)**
 - Implement EMP marketing to extend the reach of our program outside the mid-west region. **(Completed)**
 - Development of new community partners to diversify recruitment base. **(Ongoing)**
 - Identify projects for development of interest and pipeline from diverse high schools. **(Ongoing)**
 - Explore the possibility of collaborative recruitment with IPE partners. **(Ongoing)**
 - Develop and implement a program with local middle and high schools to enhance the interest of under-represented minorities in pharmacy. **(Ongoing)**
 - Train faculty, staff and students to participate in the program's recruitment efforts.
- Enhancement of endowments and scholarships designed to recruit and retain a diverse student community.
- Foster student professional identity by formal and informal interactions with professionals from diverse cultures and communities.
 - Develop proposal for seminar series to expose students to professionals from diverse backgrounds and communities.

Strategic Plan Evaluation

- Explore the integration of the MU VIA program to provide opportunities for formal and informal interactions.
- Provide professional development to faculty, staff and students on cultural awareness and diversity. **(Ongoing)**
 - Faculty Development Workshop on inclusivity – July 12, 2016
- Evaluate faculty and staff recruitment process focusing on strategies to ensure a diverse candidate pool

Strategic Priority 2

Advance the profession and practice of pharmacy through collaboration, leadership, innovation and research.

Advance practice, develop leaders, and engage community partners

Strategic Initiative 2.1

Position the pharmacy program to capitalize on opportunities to advance the practice of pharmacy and improve patient care.

Objectives:

- Explore the development of a practice-based research and scholarship network to further integrate pharmacy into the local research infrastructure.
- Support faculty in the development of innovative collaborative practices to advance patient care. **(Ongoing)**
 - Provide faculty development to translate pharmacogenomics into personalized medicine at faculty and community sites.
 - Integrate development of innovative collaborative practices into professional development and mentorship program.
 - Provide suitable faculty development funds to support these practices.
- Identify partnership opportunities for faculty practice that aligns with the mission and advances the practice of pharmacy.
- Develop the role of pharmacists to facilitate continuity of patient care.
 - Create milestone assessments for EPA's A2 and A3. **(Completed)**
 - Provide preceptor development programs on continuity of patient care.
- Engage local and state governments to advocate for the profession of pharmacy.
 - Outline curricular and/or co-curricular plan to educate students on advocacy
 - Create milestone assessments for EPA C1. **(Completed)**
- Explore documentation methods to demonstrate positive impact of faculty practices on quality and financial indicators.
 - Establish an ad-hoc committee to explore documentation methods and measures of evaluation and improvement.

Strategic Plan Evaluation

Strategic Initiative 2.2

Engage the broader community in working with the pharmacy program to advance the practice of pharmacy and improve patient care.

Objectives:

- Develop a document that outlines local and state partners and the program's relationships with these partners
- Maximize faculty and preceptor connectedness to the program
 - Faculty
 - *Balancing faculty workload appropriately (Ongoing with application of workload model)*
 - *Allowing faculty to work in areas of interest (both teaching and scholarship)*
 - *Evaluating the Annual Review of faculty to maximize outcomes*
 - *Hosting a variety of professional development sessions (Ongoing)*
 - *Suitable development funds*
 - Preceptors
 - *Advancements on the Preceptor Development Plan (Ongoing)*
 - *Benefits and resources afforded to preceptors*
- Inventory challenges and identify actionable issues. (Ongoing)
 - Identifying the variety and quantity of opportunities for student involvement in the community
 - Quantifying available back-up plans for sites
- Create a program to education the public on the impact of pharmacists on quality patient care.
 - Create a public service announcement on the impact of pharmacists on quality patient care.
 - Consider the creation of a mini-pharmacy school to educate the public and future students.
- Ensure pharmacy representation and engagement in community or health care organizations that are vital to advancing patient care in Fort Wayne and the Northeast Indiana region
 - Identify organizations in which faculty, staff and students are engaged.
 - Prioritize organizations that the program wishes to engage with to advance care.
 - Purposeful placement of faculty with organizations based on interests.
- Identify collaborative opportunities and key partners to facilitate the development, implementation and evaluation of interprofessional models of practice.
 - Identify leader for MU with the Fort Wayne area Interprofessional Education Coalition (FWAIPEC).
 - *Selection of an IPE Coordinator for the program (In Progress)*
 - Provide regular communication to faculty and administration about progress with FWAIPEC.
- Engage in meaningful, consistent community outreach that demonstrates the value of the pharmacy profession.
 - Identify milestone assessment of EPA C3.
 - Organize student organization service projects to provide consistent, meaningful outreach.
 - Identify mechanism to college pharmacy-based community outreach on the part of faculty and staff.

Strategic Plan Evaluation

Strategic Initiative 2.3

Create opportunities that promote leadership and professional development of faculty practitioners, preceptors, and residents

Objectives:

- Create and implement an advanced preceptor development program that fosters the advancement of preceptors as educators and practitioners
 - Identify barriers and opportunity to enhance participation in preceptor development programs.
 - Investigate collaboration in preceptor development with regional colleges/schools.
 - Retained Collaborative Education Institute (CEI) for provision of preceptor development.
- Evaluate the interest in a residency teaching certificate program in the northeast Indiana region and generate recommendations regarding such a program if viable.
 - Establish an ad-hoc committee to complete a needs assessment and cost-benefit analysis for teaching certificate programs in Northeast Indiana.
- Evaluate and develop recommendations for a virtual grand rounds program that can be utilized to promote education and practice development for pharmacists and/or interprofessional teams.
 - Identify potential stakeholders and interested parties.
 - Identify areas of practice interest most suited for virtual grand rounds, webinars, etc.
 - Develop program proposal with resource needs.

Strategic Initiative 2.4

Create additional post-graduate opportunities that advance the profession and practice of pharmacy

Objectives:

- Identify and initiative development of residency or fellowship training programs that align with the mission and addresses a market need.
 - Establish an ad-hoc committee to complete a needs and interest assessment for residency/fellowship training programs. **(Ongoing)**
 - Identify areas of opportunity or distinctiveness for such programs. **(In progress)**
 - Develop a proposal with resource requirements for residency/fellowship programs if support confirmed.
- Offer viable graduate level dual degree opportunities for residents that advance the profession and meet evolving scientific needs
 - Develop a joint degree option for the Pharm.D./MS in Pharmacogenomics. **(In progress)**
 - Assess the feasibility of a joint residency/master's program.
 - Evaluate potential Master's programs (e.g., MBA, health informatics, patient safety, risk management, regulatory affairs).
 - Develop a plan to offer a "clinical track" in the MS in Pharmacogenomics both live and on-line.
- Provide educational opportunities for practitioners that advance the level of practice in the Northeast Indiana Region.

Strategic Plan Evaluation

- Complete needs assessment for topics of interest using stakeholders, preceptors, Experiential Advisory Council and the Pharmacy Dean's Advisory Council.
- Identify experts that can generate programming.
- Identify existing programs that can be utilized.

Strategic Priority 3 Teacher-Scholar Model

Advancing scholarship and learning using a teacher-scholar model. Support faculty, advance research-scholarship, enhance learning.

Strategic Initiative 3.1

Strategically position the pharmacy program to be nationally and internationally regarded for best practices in the teacher-scholar model.

Objectives:

- Create a teacher-scholar culture. **(Ongoing)**
 - Evaluate literature on teacher-scholar models.
 - Develop the Manchester University teacher-scholar model.
 - Provide professional development sessions on MU's teacher-scholar model.
 - Preceptor Development session led by J.S. completed on XXXXXX.
 - Fully integrate the teacher scholar model into pharmacy program operations.
 - *Clarify expectations and evaluation regarding teacher-scholar.*
 - *Modify student evaluations to include assessment of incorporation of scholarship into the classroom.*
 - *Modify peer assessment to include assessment of incorporation of scholarship into classroom.*
 - *Review criteria for current awards.*
 - *Evaluate need for additional faculty recognition.*
- Obtain and allocate funding to support the programs and research focused on the teacher-scholar model.
 - Identify conferences that focus on aspects of a teacher-scholar model.
 - Support faculty attendance at conferences supporting the teacher-scholar model.
 - Integrate in knowledge gained and implemented into professional development program.
 - Identify potential funding sources that support development in this area.
 - Encourage and support faculty applications to these funding sources.
- Communicate and market programs and accomplishments to enhance visibility and reputation.
 - Support teacher-scholar publications and presentations by faculty members.
 - Identify award opportunities in the teacher-scholar vein and encourage faculty to apply. **(Ongoing)**
 - Establish Manchester University pharmacy program as host site for annual Midwest Teacher-Scholar Retreat. **(Ongoing)**
 - First event held XXXXX
 - Second event scheduled for XXXXXX
 - Budget and Marketing enhanced
- Integrate faculty and student scholarship and best practices throughout the Doctor of Pharmacy curriculum.
- Develop a systematic approach to enhance student involvement in scholarship.

Strategic Plan Evaluation

- Assess current involvement in student scholarship.
- Programmatically incorporate students into teacher-scholar projects.
 - *Create a summer research internship that students apply to work with specific faculty on pre-determined projects.*
 - *Develop projects that allow students to engage in inter-connected, yet independently accomplishable research.*
- Evaluate incorporation of students into Lunch and Learn programs.

Strategic Initiative 3.2

Create an environment that fosters educational research and the scholarship of teaching and learning.

Objectives:

- Develop and maintain state-of-the-art instructional technology, resources, facilities and personnel to support educational research and technology.
 - Perform a needs assessment utilizing a systematic approach with specific questions.
 - Determine the capabilities of current technology.
 - Develop opportunities for feedback and discussion related to information gathered on classroom technology by faculty and staff attending conferences.
 - Develop operational process to provide support/funding for faculty/staff that want to pilot new innovative technology.
 - Develop process to request formal adoption of new technology including use expectations and cost-benefit analysis.
 - Complete a survey on institutional ITS support.
- Support faculty professional development that engages faculty in the pursuit of educational inquiry and scholarship. **(Ongoing)**
 - Develop methods to identify faculty using noteworthy/best practices teaching methods.
 - Develop approaches to recognize, reward faculty with best practices teaching methods.
 - Integrate dissemination of best practices within professional development offerings (i.e., lunch and learn, research work group).
 - Support publication/presentation of these best practices.
- Foster and encourage faculty to collaborate with students on educational research initiatives.
 - Programmatically incorporate students into teacher-scholar projects.
 - *Create a summer research internship to support students to work with specific faculty on pre-determined projects.*
 - Incorporate training/mentorship of students in formal programs into workload model.
 - *Define student mentorship in terms of hours and quality of project.*
 - Develop a process that adjusts faculty workload to complete scholarship with accountability for completion.

Strategic Initiative 3.3

Create an environment that fosters discipline specific research that advances the field and enriches the classroom.

Objectives:

- Develop and maintain state-of-art instructional technology, resources, facilities, and personnel for discipline specific needs.

Strategic Plan Evaluation

- Develop projected needs through annual budget preparation process. **(Ongoing)**
 - Individual faculty provided requests for needs to Department Chairs in budget process
- Maximize the use of shared equipment and facilities.
- Develop operational process to provide support/funding for faculty/staff that want to pilot new innovative technology (non-capital).
- Develop process to request institutional support of new research technology including use expectations for use and cost-benefit analysis.

- Invest in faculty professional development that support the advancement of discipline specific research.
 - Encourage maximal utilization of available professional development.
 - Develop approaches to recognize, reward faculty with exemplary scholarship.
 - Integrate dissemination of research within professional development offerings (i.e., lunch and learn, research work group).
 - Support publication/presentation of research. **(Ongoing)**

- Foster, encourage, and support faculty collaborations with students on research initiatives. **(Ongoing)**
 - Programmatically incorporate students into research initiatives. **(Ongoing)**
 - *Develop a list of research interests and pre-determined projects offered by faculty.*
 - *Create a summer research internship to support students to work with specific faculty on pre-determined projects*
 - Incorporate training/mentorship of students in formal programs into workload model.
 - *Define student mentorship in terms of hours and quality of project.*
 - Develop a process that adjusts faculty workload to complete scholarship with accountability for completion.
 - Request Office of Sponsored Programs to generate a list of funding opportunities for faculty.

Strategic Priority 4

Improving healthcare through community engagement and service.

Develop partnerships, engage students; serve those in need.

Strategic Initiative 4.1

Be a leader in identifying health care issues that can be impacted by pharmacy professionals and in stimulating action for positive change in the human condition.

Objectives:

- Develop educational events around health care issues that stimulate change in regional health.
 - Identify primary health issues in region that MU wishes to focus on/engage with community partnership/locations.
 - Student Leadership Council to focus MU health care activities around primary health issues in the region. **(Ongoing)**
 - Educate faculty and student organization advisors on these health issues and needs.
 - Develop a MU health fair with services by vulnerable and underserved populations.
 - Student Personalized Medicine Coalition will participate in health fairs and distribute information about PGx use/ease of use.

- Partner with community leaders and organizations to implement community service programs and projects that improve the human condition and advance the health and well-being of residents in Northeast Indiana region.
 - Identify primary organizations or projects to engage as a partner.
 - Explore opportunities in partnership with the Quality Improvement Organization. **(Ongoing)**

Strategic Plan Evaluation

- Evolve the requirement for community service to deepen the programs engagement in the community and impact on the health of its residents. **(Ongoing)**
 - Develop service requirements as part of IPPE that builds service in collaboration with curricular growth through P2 and P3 years. **(Completed)**
 - Develop standard operating procedures and expectations for faculty involvement in community service/health fairs to demonstrate commitment while managing workload.
 - Create program infrastructure to support the community engagement.

Strategic Initiative 4.2

Strategically position the pharmacy program to be nationally regarded for a commitment to service.

Objectives:

- Create a metrics framework to assess the impact of community service and engagement activities on students, faculty, the institution and the community. **(Ongoing)**
- Foster, encourage and support external visibility of our efforts nationally and internationally.
- Encourage and foster scholarship in community engagement and service. **(Ongoing)**
 - Identify community service champions. **(Ongoing)**
 - Evaluate the need for a community service coordinator.
 - Support attendance at professional meetings/civic engagements. **(Ongoing)**
 - Provide support to faculty attending community engagements, when possible. **(Ongoing)**
 - Review service award criteria for faculty. **(Ongoing annually)**
 - Develop student service awards, criteria, process. **(Ongoing)**
- Evaluate criteria and award winners of AACP awards in community engagement and Weaver transformative service award. **(Ongoing)**

Strategic Initiative 4.3

Build infrastructure to support effective and sustainable community engagement and service

Objectives:

- Build a network of deep community engagement partnerships. **(Ongoing)**
 - Invite community members to participate in service day.
 - Identify deep community partners and identify person/position that will maintain relationship with that partner. **(Ongoing)**
 - Host an event to bring together partners to discuss area needs and opportunities to inform strategic decision about institutional commitments.
 - Complete needs assessment of the community needs.
- Develop and maintain resources (human, financial, facilities) necessary to support the community service program(s).
 - Evaluate need for community engagement coordinator.
 - Assess impact on faculty workload as health programs are developed.
 - Evaluate capacity to host events on the Fort Wayne campus.

Strategic Plan Evaluation

- Determine need to individual student malpractice insurance.
 - Evaluate our current CLIA waiver in light of current and future activities.
 - Strategic Priority/Initiative/Objective
 - Evaluate need to advertise and support with marketing dollars particular events.
 - Identify sources for funding of these projects.
- Fully integrate the community service into pharmacy program operations.
 - Strengthen day of service by setting objectives for faculty and students. **(Ongoing)**
 - Establish APPE experiences with community partners.
 - Create a community health fair on campus considering with appropriate for each class and IPE engagement.
 - Tracking mechanism for service activities provided.
 - Develop standard operating procedures for management of healthcare supplies.
 - Develop standard operating procedures for approval of program-sponsored events.

Strategic Initiative 4.4

Manchester University faculty and students will become leaders in the care of vulnerable and underserved populations.

Objectives:

- Support professional development that enhances the ability of faculty and practitioners to meet the health care needs and improve the human condition of diverse populations.
 - Integrate priorities for development into professional development offerings.
 - Support attendance at key conferences.
 - Professional development on creation of psychosocial issues.
 - Create experiential opportunities for faculty to serve these populations.
- Create a distinctive educational program for Doctor of Pharmacy students that integrates required, elective, and experiential curricular experiences with community and co-curricular opportunities to maximize the students' abilities to care for diverse populations.
 - Define vulnerable and underserved populations.
 - Create an academic certificate in vulnerable and underserved population.
 - Incorporate cases, standardized patients surrounding issues of these populations.
 - Develop and implement laboratory experiences around issues related to these populations.
 - Explore APPE requirement in underserved populations.
- Prioritize community service and engagement that addresses the needs of vulnerable and underserved populations focusing on the Northeast Indiana region.
 - Evaluate the need for tele-pharmacy to serve populations in northeast Indiana.
- Support scholarship efforts focused on vulnerable and underserved populations.
 - Identify conferences that focus on needs of vulnerable and underserved populations.
 - Support faculty attendance at conferences addressing the needs of these populations.
 - Integrate in knowledge gained and implemented into professional development program.
 - Identify potential funding sources that support development in this area.

Strategic Plan Evaluation

- Encourage and support faculty applications to these funding sources.

Strategic Priority 5

Ensuring our future by investing in meaningful personal and professional growth.

Foster talent, develop leaders, create community

Strategic Initiative 5.1

Create an environment that fosters meaningful personal and professional growth.

Objectives:

- Formulate a professional development plan that leverages the knowledge, skills, experience and abilities of current faculty, staff and administration. **(Completed)**
- Create avenues for career development and progression. **(Completed – professional development and mentoring plans)**
- Implement a mentoring program that supports professional success. **(Completed)**
- Establish annual process for identification of professional development needs through annual review of faculty, staff and administrative goals and performance. **(Completed)**
- Evaluate and evolve the faculty workload model to optimize faculty productivity. **(Ongoing)**
- Promote innovation and creativity through scholarship. **(Ongoing)**
- Institute a comprehensive performance evaluation process for all faculty, staff, and administration to ensure continuous quality improvement. **(Completed)**
- Provide resources, opportunities and coworker interactions necessary for meaningful workplace involvement and maximum productivity. **(Ongoing)**

Strategic Initiative 5.2

Promote leadership development for faculty and staff to provide continuity and ensure continued success of the program.

Objectives:

- Provide leadership programming that aligns with strategic priorities and directions.
- Develop leadership mentoring program.
- Create a dynamic and effective leadership succession plan.
- Strive to cultivate leadership attributes by being good role models for others. **(Ongoing)**

Strategic Initiative 5.3

Provide personal and professional growth opportunities for students

Objectives:

Strategic Plan Evaluation

- Develop a plan for the integration of leadership and professional development into curricular and co-curricular experiences based upon the ACPE Standards 2016 requirements and the CAPE Institute Team Report.
- Collaborate with the University's Career and Professional Development Office to development a mechanism for tracking placement of students upon graduation. **(Ongoing)**
- Regularly update career tracking data in alumni office and student affairs. **(Ongoing)**
- Provide a continuum of career preparation and networking opportunities that are based on student need and professional growth.
 - Evaluate the integration of the APhA pathways program into curricular or co-curricular programming.
 - Expand career fair/networking opportunities with lesser known groups (government, military, etc.).
 - Refine P3 specific workshops in preparation for APPE.
- Foster a culture that values personal growth and produces graduates of ability and conviction. **(Ongoing)**

Strategic Initiative 5.4

Promote and encourage development of student leaders.

Objectives:

- Develop a leadership training infrastructure geared toward student leaders.
 - Collaborate and support a Phi Lambda Sigma chapter to create a leadership focused event for students, advisors, faculty, and practitioners.
 - Evaluate and enhance leadership certificate after first cohort graduates.
- Engage students in professional organizations.
 - Enhance programmatic opportunities for students to be active in the profession.
- Support expansion of a visible and effective student government.
 - Create communication platform and mechanism for student government.
- Operationalize the selection of student organization advisors to align with faculty interests and participation in national organizations.
 - Develop a student organization guide for both advisors and student leaders.
 - Train and empower faculty to enhance their roles as advisors in student organizations.

Strategic Initiative 5.5

Strive for continuous quality improvement in professional development programming.

Objectives:

- Solicit feedback from faculty, staff, preceptors, and employers to assess strengths, weaknesses, opportunities, and threats (SWOT). **(Ongoing)**
- Assess individual and institutional professional development plans.

Strategic Plan Evaluation

- Implement evidence-based changes for programmatic outcomes keeping whole individual growth as the ultimate focus.

Strategic Priority 6

Maximizing our success through continuous quality improvement.

Build on past context, evaluate current practices, and create future best practices.

Strategic Initiative 6.1

Develop a culture of institutional effectiveness.

Objectives:

- Evolve the assessment plan to reflect the outcomes and strategic priorities articulated in our mission, vision and strategic plan documents. **(Ongoing)**
 - Finalize assessment plan focusing on five overarching topics, strategic priorities, mission, vision, curriculum, 2016 standards, professional development and preceptor development. **(Completed)**
 - Outline responsible parties and timeline for completion of assessments. **(Completed)**
 - Annually determine specific priorities to be included and reported on, in addition to standing points that will be recorded every year. **(Ongoing)**
 - Create metrics for each operational unit for inclusion in program dashboard.
- Operationalize assessment processes to ensure use of the analysis of assessment measures to improve student learning and achievement of programmatic goals.
 - Develop standard operating procedures for milestone assessments, remediation and progression in the curriculum. **(Ongoing)**
 - Operationalize a remediation process based on milestone performance.
 - Create a standard operating procedures for the development of an annual assessment report.
 - Complete evaluation of admission criteria as predictors of academic success. **(Ongoing)**
- Create an assessment annual report template that will capture curricular and programmatic changes that occur in response to assessment data. **(Ongoing)**
- Provide professional development to support a scholarly understanding of assessment and its utility to meet individual performance goals as well as programmatic goals.

Strategic Initiative 6.2

Efficiently apply technology to optimize utilization resources.

Objectives:

- Establish standards of practice for utilization of server to ensure up-to-date and efficient use of electronic records and archives.
 - Coordinate between two campuses to set standards regarding electronic records and archives.
 - Implement Digital Measures to streamline assessment practices and performance management process. **(Ongoing)**

Strategic Plan Evaluation

- Create secure electronic files and work toward a paperless system.
 - Collaborate with ITS, Registrar, Pharmacy Academic Affairs and Pharmacy Student Affairs to determine efficient means of sharing student electronic records.
- Evaluate and create a plan to transition all program faculty and staff to laptop computers.
 - Inventory type of computers assigned to faculty.
 - Survey faculty regarding pros and cons to transition to all laptop computers.
 - Complete cost-benefit analysis of conversation.
 - Consider impact on classroom technology required.
 - Create proposal supporting transition to laptops.
- Create a functional electronic meeting and voting system that meets the requirements of program bylaws and ensures a consistent platform for virtual meetings.
 - Collaborate with IT to evaluate possible systems considering two campuses, program by-laws, audio and visual opportunities, voting management, privacy of voting, question of anonymity.

Strategic Initiative 6.3

Cross-train administrative leaders, professional and administrative staff to support operations.

Objectives:

- Establish standard operational procedures (SOPs) for all practices within the program.
 - Establish annual review of SOPs and update as needed.
 - Consider the creation of one SOP manual for the program.
 - Identify areas that do not have SOPs that need to be developed.
- Cross-train all staff to support at least one other functional areas.
 - Identify SOPs that require cross-training to reduce programmatic risk.
 - Survey staff to determine areas of interest for training.
 - Create a calendar/schedule for cross-training.
 - Inform faculty/administrators of cross-trained individuals.
- Cross train leadership team and professional staff to support the functionality of at least one other functional area.
 - Identify SOPs that require cross-training to reduce programmatic risk.
 - Survey staff to determine areas of interest for training.
 - Create a calendar/schedule for cross-training.
 - Inform faculty/administrators of cross-trained individuals.

Pre-NAPLEX and PCOA – Exam Results

Class of 2016 – Pre-NAPLEX

Score range	Number of students
< 50	6
50 – 59	5
60 – 69	8
70 – 74	4
75 – 79	8
80 – 89	9
90 – 99	8
≥ 100	5

NAPLEX – two self-reported passes

Class of 2017 – PCOA

- Data is not yet accessible

Student Progression

Year	Progression change	Fall semester	Spring Semester	2015-2016 Total
P1	Alternate plan	3	3	6
	Withdrew	1	1	2
	Dismissed	0	0	0
P2	Alternate plan	4	0	4
	Withdrew	0	0	0
	Dismissed	1	0	1
P3	Alternate plan	0	0	0
	Withdrew	1	0	1
	Dismissed	2	0	2

2015 AACP Faculty Survey

Standard No.	Standard Question	Section	MUCOP SA/A %	Natl. Avg. SA/A
Standards ≥ 10% above the SA/A National Average				
5	The Dean is an effective leader of the college/school	Administrative System	92.3%	80.3%
10	Faculty meetings function effectively as part of the governance of the college/school		96.2%	79.1%
20	I receive adequate staff resources	Infrastructure	88.4%	74.9%
23	I have adequate laboratory and/or clinical space for my research and/or scholarship needs		88.5%	74.9%
24	Computer resources are adequate for my academic responsibilities		100.0%	89.6%
26	The college/school has appropriate physical facilities to allow me to fulfill my responsibilities		100.0%	85.5%
27	The college/school has a sufficient number of qualified faculty		84.6%	69.9%
28	The program's resources can accommodate present student enrollment		100.0%	78.5%
29	The physical facilities enable out-of-class interaction among administration, faculty, and students		92.4%	76.2%
34	Funds are available to support my faculty development	Faculty Development	92.3%	77.4%
Standards ≥ 10% below the SA/A National Average				
6	I am given the opportunity to provide evaluative feedback of the administrators	Administrative System	50.0%	65.8%
7	I am aware that my college/school has policies for dealing with harassment and discrimination		84.6%	96.1%
17	I receive formal feedback on my performance on a regular basis	Recruitment and Retention	57.7%	78.9%
18	The performance feedback I receive is effective		50.0%	75.8%
31	The college/school effectively employs strategic planning	Role and Governance	65.3%	80.8%
33	I receive adequate guidance on career development	Faculty Development	46.1%	71.8%
36	Programs are available to me to improve my teaching and to facilitate student learning		69.2%	90.4%
37	Programs are available to me that help me develop my competence in research and/or scholarship		53.8%	74.5%
46	The college/school uses programmatic assessment data to improve the curriculum	Curriculum, Teaching, and Assessment	69.2%	80.5%
59	The college/school effectively manages academic misconduct by students (e.g., plagiarism)	Developing and Supervising Students	69.2%	80.3%

Perceived Stress Survey Results- Spring 2016

Scale: 0=Never 1=Almost Never 2=Sometimes 3=Fairly Often 4=Very Often

	N=184	N=47	N=137
	Overall Mean	Faculty & Staff Mean	Student Mean
1. In the last month, how often have you been upset because of something that happened unexpectedly?	1.92	1.38↓ ¹	2.11 ²
2. In the last month, how often have you felt that you were unable to control the important things in your life?	1.71	1.27↓	1.86
3. In the last month, how often have you felt nervous and “stressed”?	2.79	2.13↓	3.02
4. In the last month, how often have you felt confident about your ability to handle your personal problems?	2.68	3.18	2.51
5. In the last month, how often have you felt that things were going your way?	2.26	2.53	2.17
6. In the last month, how often have you found that you could not cope with all the things that you had to do?	1.83	1.53↓	1.93
7. In the last month, how often have you been able to control irritations in your life?	2.46	2.67	2.39
8. In the last month, how often have you felt that you were on top of things?	2.30↑	2.51	2.23↑
9. In the last month, how often have you been angered because of things that were outside of your control?	1.79	1.33↓	1.95
10. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	1.57↓	1.13↓	1.81

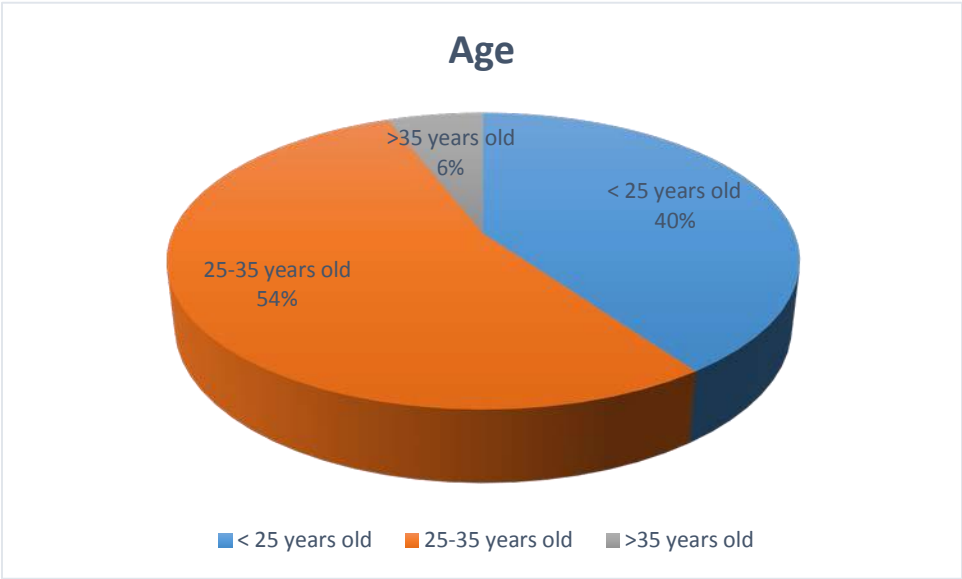
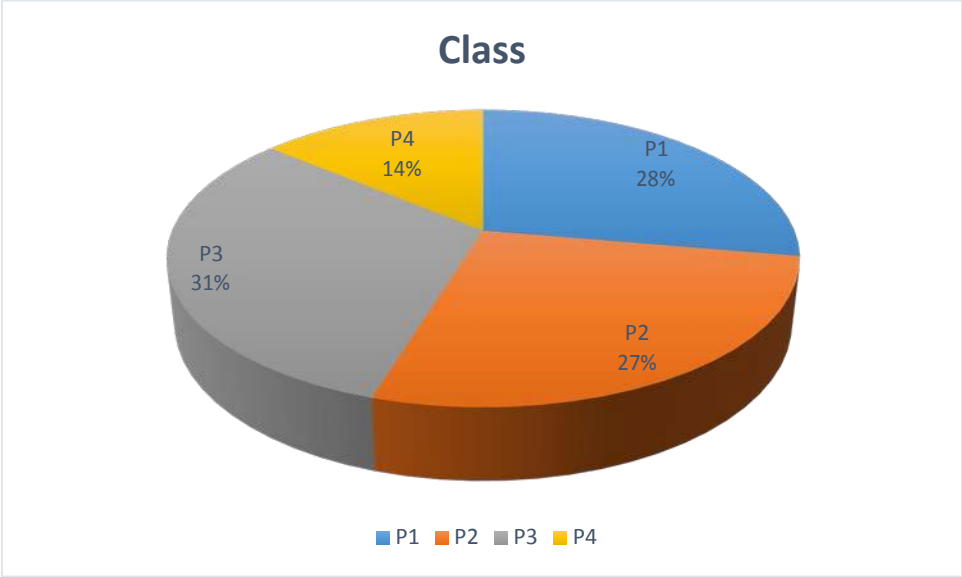
	Number	Percent Responding	Survey Overall Mean
Faculty	34	100	1.966
Staff	13	100	
Student	137	50.4	2.198
Total	184	57.7	2.03

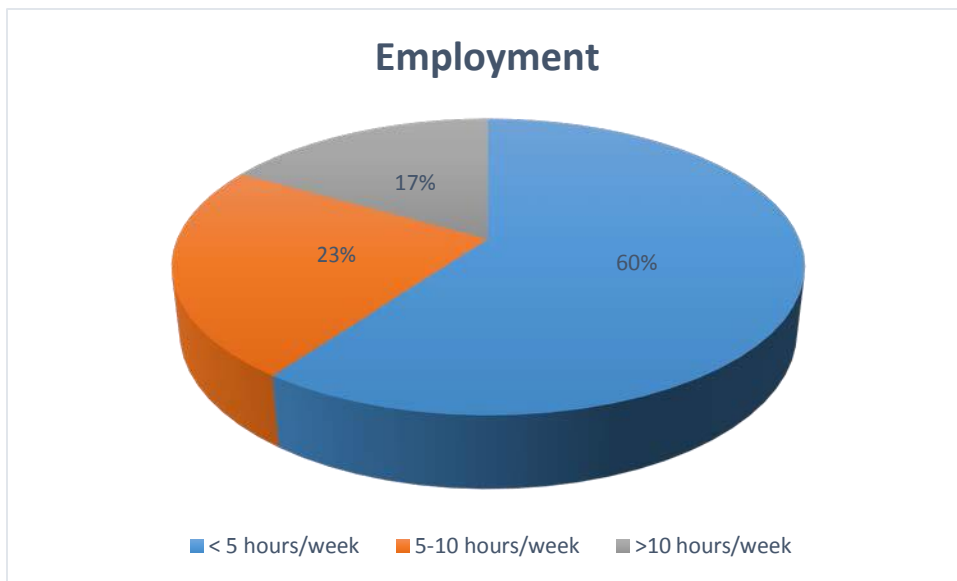
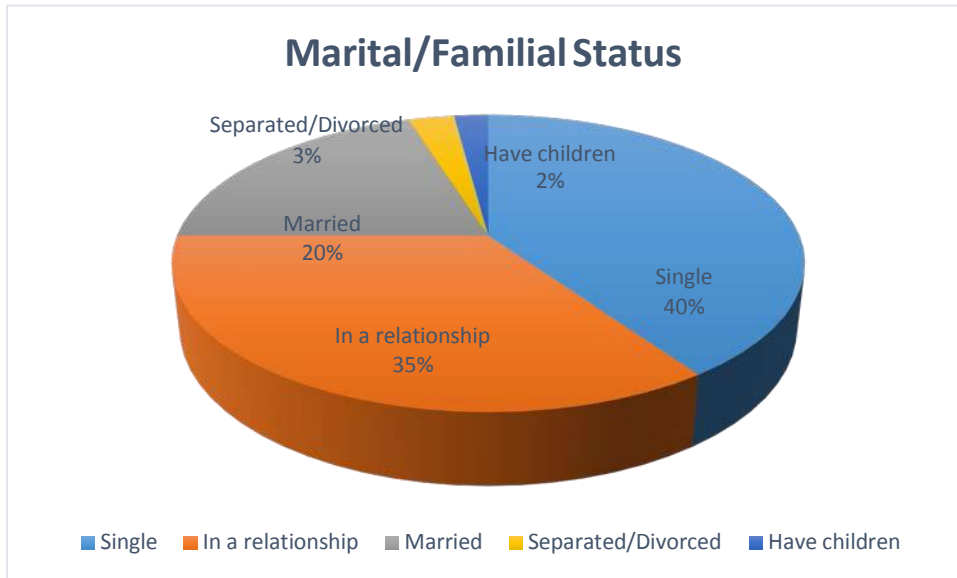
¹ Data highlighted blue indicate decreased stress (>0.25 point change) from October 2014

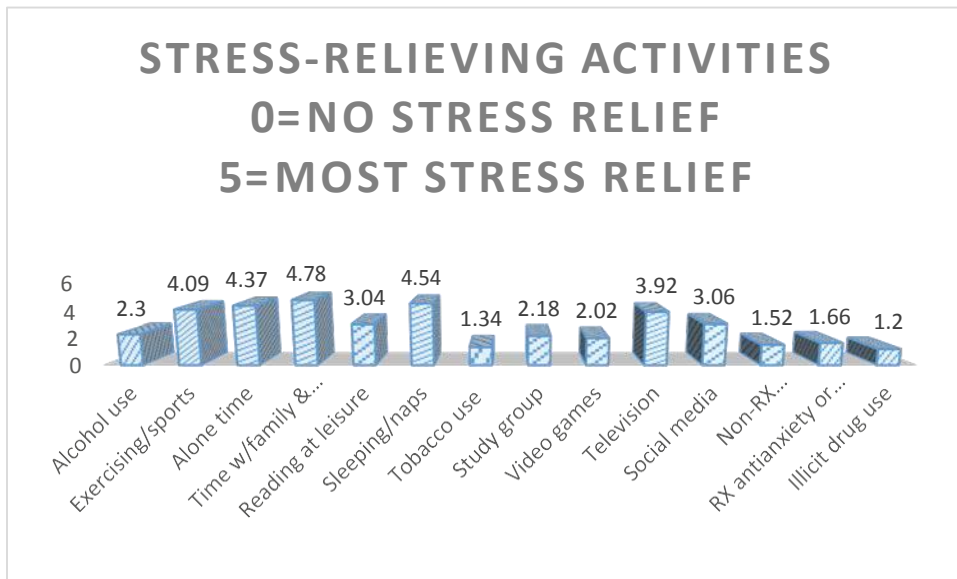
² Data in red indicate a slight increase in stress (<0.25 point change) from October 2014

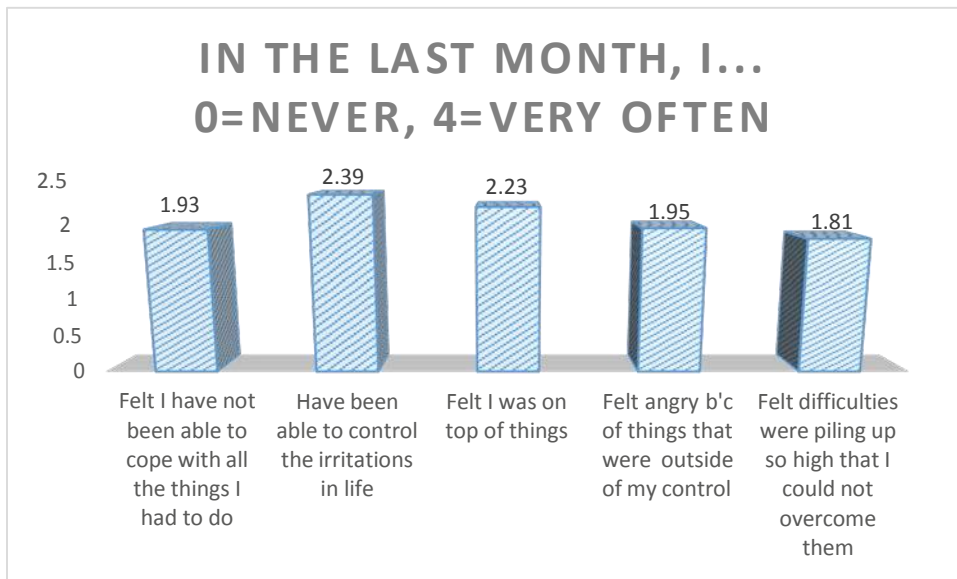
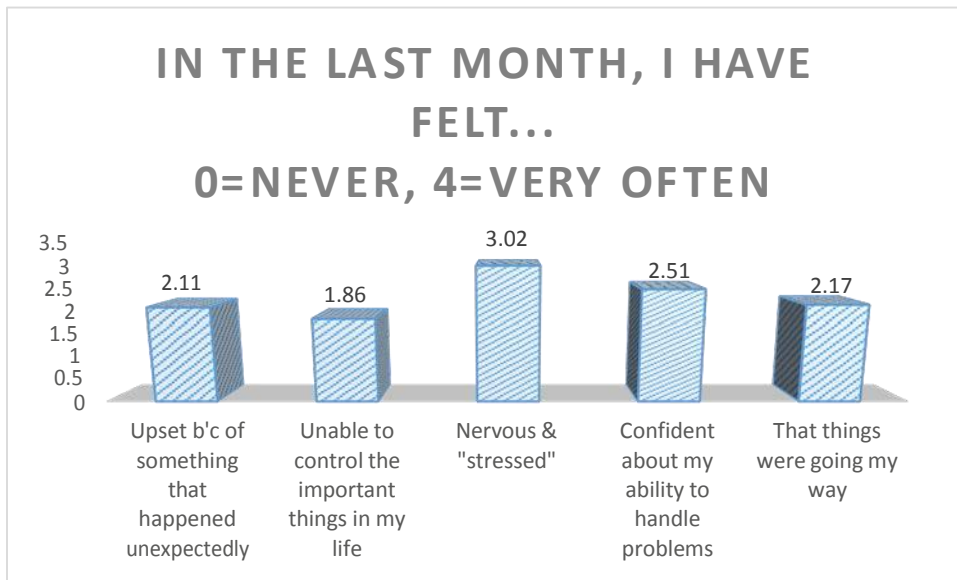
Spring 2016 Stress Survey: Additional

Student Data 137 students participated









2015 AACP Preceptor Survey

Standard No.	Standard Question	Section	MUCOP SA/A %	Natl. Avg. SA/A %
Standards ≥ 5% above the SA/A National Average				
12	I receive the results from students evaluations of my rotation	Communication	80.0%	73.9%
21	I use feedback about my site to make improvements to my student practice experience	Curriculum	96.6%	90.5%
24	The assessment tools provided to me for my site are suitable for measuring student performance		100.0%	92.2%
36	I have ongoing contact with the Office of Experiential Education	Resources/ Support	90.0%	83.7%
37	I receive needed support from the Office of Experiential Education		93.3%	85.0%
Standards ≥ 5% below the SA/A National Average				
14	I know how to utilize the process that exists within the college/school for effective manage professional misconduct (e.g., repeated tardiness/absences, drug diversion) by students	Communication	80.0%	85.2%
17	The criteria for evaluating my performance as a preceptor are clear		76.7%	82.2%
19	The responsibilities as a preceptor have been defined by my site	Curriculum	90.0%	96.3%
22	I am aware of the mechanism of provide feedback to the college/school regarding the Pharm.D. curriculum		70.0%	80.4%
27	The Pharm.D. program prepares students to develop disease management programs		80.0%	85.0%
41	The college/school provides me with access to library and educational resources	Resources/ Support	56.6%	80.1%

APPE Opportunities/Preceptor Evaluations

		Institutional Rotation Opportunities		
Yes	44	During this rotation, I had the opportunity to consistently and independently apply principles of civil, state and federal laws and regulations to the practice of pharmacy.		
	100%	43	During this rotation, I had the opportunity to communicate effectively with patients, healthcare providers, care givers and colleagues and act in a manner that conveys	
No	0	4	During this rotation, I had the opportunity to demonstrate effective, professional and independent performance in daily activities.	
	0	98%	During this rotation, I had the opportunity to improve my presentation skills through topic presentations and/or in-services.	
N/A	0	4	During this rotation, I had the opportunity to employ a critical thinking process when solving patient care problems.	
	0	98%	During this rotation, I had the opportunity to demonstrate my ability to retrieve, interpret, and report general drug information to pharmacists and other health care practitioners as well as patients and their families.	
	0	4	During this rotation, I had the opportunity to explain the process of reporting medication errors and adverse drug reactions within the institution and, when appropriate, to national reporting agencies.	
	0	4	During this rotation, I had the opportunity to evaluate patients' charts for appropriateness of medication, dose, frequency, and monitoring.	
	0	43	During this rotation, I had the opportunity to recommend appropriate medication dosages using pharmacokinetic principles when applicable.	
	0	41	The patient population that I encountered was diverse (medically, culturally, economically).	
	0	42	I am satisfied with my experience at the site.	

APPE Opportunities/Preceptor Evaluations

Institutional Preceptor Evaluation		Strongly agree		Agree		Neutral		Disagree		Strongly Disagree	
		Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage
My preceptor oriented me to the site with appropriate introductions to staff and to site-specific safety procedures, if applicable.		25	57%	18	41%	1	2%	0	0%	0	0%
		19	43%	23	52%	2	5%	0	0%	0	0%
My preceptor was familiar with the APPE objectives.		2	5%	1	3%	2	5%	1	2%	0	0%
		27	61%	14	32%	1	2%	2	5%	0	0%
My preceptor provided appropriate learning experiences to assist in achieving the APPE objectives.		2	5%	1	3%	2	5%	1	2%	0	0%
		27	61%	14	32%	1	2%	2	5%	0	0%
My preceptor communicated his/her expectations clearly.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor identified an alternative person to report to on the days he/she was not on site.		3	7%	1	2%	2	5%	0	0%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor was available for discussion and consultation (or an identified alternate).		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor gave positive feedback on things I did well.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor gave constructive feedback on areas for improvement.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor helped identify solutions for problems/questions that arose.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor allowed me the opportunity to ask questions.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor helped build my confidence.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor inspired and motivated my interest in the subject matter.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor helped me develop life-long learning skills.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor clearly communicated ideas and concepts.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor utilized precepting methods that enabled me to learn.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
My preceptor served as a professional role model.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%
I am satisfied with my experience with the preceptor.		2	5%	1	3%	2	5%	1	2%	0	0%
		2	5%	1	3%	2	5%	1	2%	0	0%

APPE Opportunities/Preceptor Evaluations

		Elective Rotation Opportunities	
Yes	92	During this rotation, I had the opportunity to consistently and independently apply principles of civil, state and federal laws and regulations to the practice of pharmacy.	
	93%		
No	94	During this rotation, I had the opportunity to communicate effectively with patients, healthcare providers, care givers and colleagues and act in a manner that conveys	
	95%		
N/A	99	During this rotation, I had the opportunity to demonstrate effective, professional and independent performance in daily activities.	
	100%		
7	9	During this rotation, I had the opportunity to improve my presentation skills through topic presentations and/or in-services.	
	99%		
5	8	During this rotation, I had the opportunity to employ a critical thinking process when solving patient care problems.	
	81%		
7	99	During this rotation, I had the opportunity to positively contribute to activities at the site.	
	100%		
7	96	During this rotation, I had the opportunity to use resources and literature to locate information regarding a topic or question.	
	97%		
7	70	The patient population that I encountered was diverse (medically, culturally, economically).	
	71%		
7	9	I am satisfied with my experience at the site.	
	100%		

Strongly Agree	Elective Preceptor Evaluation																																
	73	74%	6	67%	72	73%	6	68%	6	65%	75	76%	68	69%	5	56%	6	63%	77	78%	66	67%	6	64%	62	63%	63	64%	58	59%	75	76%	78
26	26%	3	33%	27	27%	3	31%	3	33%	23	23%	31	31%	4	41%	3	37%	22	22%	32	32%	3	34%	33	33%	35	35%	39	39%	24	24%	21	21%
0	0%	0	0%	0	0%	1	1%	2	2%	1	1%	0	0%	3	3%	0	0%	0	0%	1	1%	2	2%	4	4%	1	1%	2	2%	0	0%	0	0%
0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%

APPE Opportunities/Preceptor Evaluations

		Community Rotation Opportunities		
N/A	No	Yes		
0%	0	82	100%	During this rotation, I had the opportunity to consistently and independently apply principles of civil, state and federal laws and regulations to the practice of pharmacy.
0%	0	82	100%	During this rotation, I had the opportunity to communicate effectively with patients, healthcare providers, care givers and colleagues and act in a manner that conveys
0%	0	82	100%	During this rotation, I had the opportunity to demonstrate effective, professional and independent performance in daily activities.
12%	10	70	85%	During this rotation, I had the opportunity to improve my presentation skills through topic presentations and/or in-services.
0%	0	81	99%	During this rotation, I had the opportunity to employ a critical thinking process when solving patient care problems.
0%	0	81	99%	During this rotation, I had the opportunity to evaluate prescription orders; build upon intervention strategies necessary for developing and implementing individualized
2%	2	79	96%	During this rotation, I had the opportunity to determine when over-the-counter (OTC) treatment is appropriate, what circumstances warrant referral to a physician and to
6%	5	75	91%	During this rotation, I had the opportunity to demonstrate ability to properly explain the correct use of devices including, but not limited to, glucose monitoring,
1%	1	79	96%	The patient population that I encountered was diverse (medically, culturally, economically).
0%	0	81	99%	I am satisfied with my experience at the site.

APPE Opportunities/Preceptor Evaluations

		Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree		Community Preceptor Evaluation
		58	71%	22	27%	2	2%	0	0%	0	0%	My preceptor oriented me to the site with appropriate introductions to staff and to site-specific safety procedures, if applicable.
		55	67%	26	32%	0	0%	1	1%	0	0%	My preceptor was familiar with the APPE objectives.
		52	63%	26	32%	4	5%	0	0%	0	0%	My preceptor provided appropriate learning experiences to assist in achieving the APPE objectives.
		54	66%	27	33%	0	0%	1	1%	0	0%	My preceptor communicated his/her expectations clearly.
		57	70%	24	29%	1	1%	0	0%	0	0%	My preceptor identified an alternative person to report to on the days he/she was not on site.
		60	73%	20	24%	1	1%	1	1%	0	0%	My preceptor was available for discussion and consultation (or an identified alternate).
		58	71%	23	28%	0	0%	1	1%	0	0%	My preceptor gave positive feedback on things I did well.
		47	57%	33	40%	1	1%	1	1%	0	0%	My preceptor gave constructive feedback on areas for improvement.
		55	67%	25	30%	1	1%	1	1%	0	0%	My preceptor helped identify solutions for problems/questions that arose.
		64	78%	16	20%	1	1%	1	1%	0	0%	My preceptor allowed me the opportunity to ask questions.
		51	62%	28	34%	2	2%	1	1%	0	0%	My preceptor helped build my confidence.
		51	62%	27	33%	3	4%	1	1%	0	0%	My preceptor inspired and motivated my interest in the subject matter.
		50	61%	27	33%	4	5%	1	1%	0	0%	My preceptor helped me develop life-long learning skills.
		51	62%	29	35%	1	1%	1	1%	0	0%	My preceptor clearly communicated ideas and concepts.
		50	61%	30	37%	1	1%	1	1%	0	0%	My preceptor utilized precepting methods that enabled me to learn.
		59	72%	22	27%	1	1%	0	0%	0	0%	My preceptor served as a professional role model.
		63	77%	18	22%	0	0%	1	1%	0	0%	I am satisfied with my experience with the preceptor.

APPE Opportunities/Preceptor Evaluations

Ambulatory Care Rotation Opportunities	Yes		No		N/A	
During this rotation, I had the opportunity to consistently and independently apply principles of civil, state and federal laws and regulations to the practice of pharmacy.	81	98%	0	0%	2	2%
During this rotation, I had the opportunity to communicate effectively with patients, healthcare providers, care givers and colleagues and act in a manner that conveys empathy, honesty and integrity.	83	100%	0	0%	0	0%
During this rotation, I had the opportunity to demonstrate effective, professional and independent performance in daily activities.	83	100%	0	0%	0	0%
During this rotation, I had the opportunity to improve my presentation skills through topic presentations and/or in-services.	83	100%	0	0%	0	0%
During this rotation, I had the opportunity to employ a critical thinking process when solving patient care problems.	83	100%	0	0%	0	0%
During this rotation, I had the opportunity to independently gather and critically evaluate patient data .	83	100%	0	0%	0	0%
During this rotation, I had the opportunity to demonstrate up-to-date knowledge of common disease states and health care problems of patients seen in the clinic and retrieve information concerning current therapy from the literature to develop recommendations.	83	100%	0	0%	0	0%
During this rotation, I had the opportunity to utilize patient charts/medical records to elicit pertinent information and design a patient specific care plan.	83	100%	0	0%	0	0%
During this rotation, I had the opportunity to interview patients to gather accurate medical histories in a professional and sensitive manner.	82	99%	0	0%	1	1%
During this rotation, I had the opportunity to counsel and educate patients concerning medication use, adverse effects, and storage as well as healthcare problems/disease states.	83	100%	0	0%	0	0%
During this rotation, I had the opportunity to develop a care plan to monitor and/or modify pharmacologic and non-pharmacologic therapies to ensure effective, safe and economical patient care.	82	99%	0	0%	1	1%
During this rotation, I had the opportunity to interpret laboratory test results, including serum drug concentrations, to monitor disease processes and drug efficacy and toxicity.	81	98%	2	2%	0	0%
During this rotation, I had the opportunity to assess subjective and objective patient information to identify and prioritize drug related problems, triage the patient's healthcare needs, and refer to other health care professionals when necessary.	82	99%	0	0%	1	1%

APPE Opportunities/Preceptor Evaluations

During this rotation, I had the opportunity to correctly identify, document, and analyze possible adverse drug events and errors.	82	99%	0	0%	1	1%
During this rotation, I had the opportunity to recommend patient specific interventions with regard to drug therapy and clinical problems to peers, preceptors, and other professionals with verbal and/or written communication.	83	100%	0	0%	0	0%
During this rotation, I had the opportunity to list specific parameters for evaluating the success or failure of drug therapy in common disease states and document intervention(s) and outcome(s).	82	99%	1	1%	0	0%
The patient population that I encountered was diverse (medically, culturally, economically).	81	98%	2	2%	0	0%
I am satisfied with my experience at this site.	83	100%	0	0%	0	0%

APPE Opportunities/Preceptor Evaluations

Preceptor Evaluation	Strongly agree		Agree		Neutral		Disagree		Strongly Disagree	
My preceptor oriented me to the site with appropriate introductions to staff and to site-specific safety procedures, if applicable.	58	70%	24	29%	1	1%	0	0%	0	0%
My preceptor was familiar with the APPE objectives.	53	64%	28	34%	2	2%	0	0%	0	0%
My preceptor provided appropriate learning experiences to assist in achieving the APPE objectives.	57	69%	26	31%	0	0%	0	0%	0	0%
My preceptor communicated his/her expectations clearly.	56	67%	23	28%	3	4%	1	1%	0	0%
My preceptor identified an alternative person to report to on the days he/she was not on site.	52	63%	23	28%	7	8%	1	1%	0	0%
My preceptor was available for discussion and consultation (or an identified alternate).	64	77%	18	22%	1	1%	0	0%	0	0%
My preceptor gave positive feedback on things I did well.	56	67%	24	29%	1	1%	1	1%	1	1%
My preceptor gave constructive feedback on areas for improvement.	55	66%	24	29%	1	1%	2	2%	0	0%
My preceptor helped identify solutions for problems/questions that arose.	53	64%	30	36%	0	0%	0	0%	0	0%
My preceptor allowed me the opportunity to ask questions.	58	70%	25	30%	0	0%	0	0%	0	0%
My preceptor helped build my confidence.	48	58%	31	37%	3	4%	0	0%	1	1%
My preceptor inspired and motivated my interest in the subject matter.	54	65%	25	30%	3	4%	1	1%	0	0%
My preceptor helped me develop life-long learning skills.	55	66%	25	30%	2	2%	0	0%	0	0%
My preceptor clearly communicated ideas and concepts.	50	60%	30	36%	2	2%	1	1%	0	0%
My preceptor utilized precepting methods that enabled me to learn.	53	64%	29	35%	1	1%	0	0%	0	0%
My preceptor served as a professional role model.	55	66%	28	34%	0	0%	0	0%	0	0%
I am satisfied with my experience with the preceptor.	61	73%	21	25%	0	0%	1	1%	0	0%

APPE Opportunities/Preceptor Evaluations

ROTATION OPPORTUNITIES	Yes		No		N/A	
During this rotation, I had the opportunity to consistently and independently apply principles of civil, state and federal laws and regulations to the practice of pharmacy.	116	99%	0	0%	1	1%
During this rotation, I had the opportunity to communicate effectively with patients, healthcare providers, care givers and colleagues and act in a manner that conveys empathy, honesty and integrity.	117	100%	0	0%	0	0%
During this rotation, I had the opportunity to demonstrate effective, professional and independent performance in daily activities.	117	100%	0	0%	0	0%
During this rotation, I had the opportunity to improve my presentation skills through topic presentations and/or in-services.	117	100%	0	0%	0	0%
During this rotation, I had the opportunity to employ a critical thinking process when solving patient care problems.	116	99%	1	1%	0	0%
During this rotation, I had the opportunity to independently gather, monitor, and assess pertinent patient information and recommend changes if necessary to ensure safe, effective, and economical drug therapy.	117	100%	0	0%	0	0%
During this rotation, I had the opportunity to obtain and/or utilize medication histories, physical findings, laboratory tests, and pharmacokinetic data to select and recommend optimal drug therapy for individual patients as necessary.	116	99%	1	1%	0	0%
During this rotation, I had the opportunity to present complete and accurate patient information including appropriate components and sequence.	117	100%	0	0%	0	0%
During this rotation, I had the opportunity to develop an appropriate patient specific medication therapy management plan.	110	94%	6	5%	1	1%
During this rotation, I had the opportunity to retrieve and evaluate current drug therapy information from the literature and make recommendations utilizing evidence-based medicine to health care professionals.	115	98%	1	1%	1	1%
During this rotation, I had the opportunity to counsel and educate patients and/or caregivers on the appropriate use of medications utilizing the medication therapy management principles when possible.	109	93%	3	3%	5	4%
During this rotation, I had the opportunity to interview patients and/or caregivers to gather medication and health information in a professional and sensitive manner.	105	90%	4	3%	8	7%
The patient population that I encountered was diverse (medically, culturally, economically).	114	97%	2	2%	1	1%
I am satisfied with my experience at the site.	116	99%	0	0%	1	1%

APPE Opportunities/Preceptor Evaluations

PRECEPTOR EVALUATION	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree	
My preceptor oriented me to the site with appropriate introductions to staff and to site-specific safety procedures, if applicable.	76	65%	40	34%	1	1%	0	0%	0	0%
My preceptor was familiar with the APPE objectives.	78	67%	39	33%	0	0%	0	0%	0	0%
My preceptor provided appropriate learning experiences to assist in achieving the APPE objectives.	79	68%	38	32%	0	0%	0	0%	0	0%
My preceptor communicated his/her expectations clearly.	73	62%	41	35%	3	3%	0	0%	0	0%
My preceptor identified an alternative person to report to on the days he/she was not on site.	73	62%	39	33%	4	3%	1	1%	0	0%
My preceptor was available for discussion and consultation (or an identified alternate).	73	62%	42	36%	2	2%	0	0%	0	0%
My preceptor gave positive feedback on things I did well.	69	59%	46	39%	2	2%	0	0%	0	0%
My preceptor gave constructive feedback on areas for improvement.	67	57%	49	42%	1	1%	0	0%	0	0%
My preceptor helped identify solutions for problems/questions that arose.	67	57%	48	41%	2	2%	0	0%	0	0%
My preceptor allowed me the opportunity to ask questions.	79	68%	37	32%	1	1%	0	0%	0	0%
My preceptor helped build my confidence.	67	57%	46	39%	4	3%	0	0%	0	0%
My preceptor inspired and motivated my interest in the subject matter.	71	61%	44	38%	1	1%	1	1%	0	0%
My preceptor helped me develop life-long learning skills.	76	65%	41	35%	0	0%	0	0%	0	0%
My preceptor clearly communicated ideas and concepts.	69	59%	47	40%	1	1%	0	0%	0	0%
My preceptor utilized precepting methods that enabled me to learn.	76	65%	37	32%	4	3%	0	0%	0	0%
My preceptor served as a professional role model.	84	72%	32	27%	1	1%	0	0%	0	0%
I am satisfied with my experience with the preceptor.	85	73%	32	27%	0	0%	0	0%	0	0%

Student Affairs

Student accomplishments:

- P4 – Danny Bartoli – CVS recognized for saving patient life
- P4 – Nikhil Patel – served as APhA-ASP Region 4 Midyear Regional Coordinator for the 2015- 2016 Region 4 Midyear Regional Meeting in Dearborn, Michigan (October)
- P2 – Morgan Land – elected APhA-ASP Region 4 Member-at-Large (October)
- P3 – Kacie Knapp – IPA Pharmacy Education Foundation Joseph E. McSoley Scholarship Recipient
- P3 – Tung Nguyen – CVS Health Foundation Scholarship
- P3 – Stephanie Schrader – Walgreens Diversity and Inclusion Excellence Scholarship
- P1 – Nneka Igwemadu – Walgreens Diversity Scholarship
- P1 – Jonell Nwabueze – Walgreens Diversity Scholarship

Awards:

- APhA-ASP Manchester Chapter – Spirit Stick Award (Region 4 MRM Meeting) and Up & Coming Chapter Award (National Award – APhA Annual Convention)

Honors:

2016 Celebrating Accomplishments in Pharmacy Student Scholarship – May 6

Acute Care certificate best poster - OBSERVATIONS OF THE IMPACT OF CEFAZOLIN SKIN TESTING FOR PATIENTS WITH DOCUMENTED PENICILLIN ALLERGY AT A COMMUNITY-BASED, REGIONAL MEDICAL CENTER – RESEARCH IN PROGRESS - Audrey Rosene (P4), Kim Perkins (P4), Kathryn (Snyder) Bowman (P4) and Dr. Trent Towne
(Voted on by Acute Care certificate faculty)

Leadership certificate best poster – IMPACT INDICATORS OF SERVICE - Nicholas Grove (P4), Tung Nguyen (P3), Barbara Suh (P3) and Dr. Joe Bonnarens
(Voted on by Leadership certificate faculty)

Research/ Elective best poster - ANALYSIS OF PARENTERAL ANTICOAGULANT PRESCRIBING PATTERNS PRIOR TO INITIATION OF RIVAROXABAN AND APIXABAN - Paul Szostak (P4), Dr. Dustin Linn, Dr. Robert Beckett, Dr. Sarah Pfaehler
(Voted on by a panel of pharmacy program faculty)

Most Impactful Poster - EFFICACY OF RIVAROXABAN IN NON-LOW RISK PULMONARY EMBOLISM - Kathryn Loeser (P4), Pearl Pfiester (P4), Andrea Whitaker (P4) and Dr. Dustin Linn
(Voted on by all attendees)

Competition placement:

- ASHP Clinical Skills Competition – December – New Orleans – Manchester Representatives (Kathryn Snyder (P4) and Molly Grasberger (P4))
- APhA-ASP National Patient Counseling Competition – March – Baltimore – Manchester Representative (Nick Grove (P4))

Student Affairs

Residency placement:

16/50 (32%) participated in the Match...12/16 (75%) Matched in Match 1...1 withdrew, 1 did not go to Match 2...Match 2 – 1 of 2 matched...1 unmatched did not participate in scramble – 13 total residents (13/50=26% of class found residencies) – 11 PGY1 Hospital, 2 PGY1 Community Pharmacy

Job placement

EMPLOYED

Employed (34 (jobs) + 13 (residencies) = 47/50) - **94% of graduates have jobs**

Percentages (compared to total number of employed graduates)

Community (30/47 = 64%); Hospital (4/47 = 8.5%); Residency (13/47 = 27.7%)

Indiana breakdowns

Employed in Indiana (23/47) - 48.9%;

Staying in NE Indiana - out of those remaining in IN (18/23 = 78%)

OR out of all employed (job & residents) (18/47 = 38%)

State breakdowns

Employed in 8 states (IN-22, OH-1, MI-3, KY-1, NJ-1, TX-3, NE-1, CO-1)

Residencies in 10 states (IN-3, OH-2, AZ-1, CO-1, MI-1, NC-1, NM-1, OK-1, TN-1, TX-1)

UNDECIDED

Undecided - 3 (IN - 1; CA - 1; VA - 1) - of those undecided, all have opportunities and are trying to pursue a particular setting currently

Honor Council

In AY2015-2016, complaints involving 34 students were sent to the honor council's preliminary review group. Of these, roughly 70% were regarding the academic portion of the honor code while the remaining pertained to unprofessional behavioral. Only one complaint moved forward from the preliminary group to the entire honor council where it was reviewed. The recommendation from this case resulted in academic probation.

Following the end of the academic year, the honor council's preliminary group has begun assessing the entire process. An "ideas board" was placed in the faculty lounge to solicit input from faculty members on modifying any elements related to the honor council. The full council will meet in the summer to review the proposed changes.

Correlating Admissions Criteria with Success

OSA constructed a database (which included 11 indicators) for statistical analysis to determine which of these factors are predictive for increasing a student's risk of "not a good performance" in the Manchester College of Pharmacy Program. Due to limited sample sizes, the admissions math GPA was the only significant variable ($p < 0.0001$) = the risk of "not good performance" decreased with higher admission math GPA.

Technology Update

Canvas

- Templates created for Pharmacy Program and Pharmacogenomic courses.
- Fall Pharmacy courses with template applied are available for course coordinators in Canvas.
- Each faculty has a sandbox course in which to learn and play during training.
- Training, covering various topics, is occurring through the end of June.
- Quick Reference guides are available (See Melissa)
- Canvas Instructor Guide – <https://community.canvaslms.com/docs/DOC-4131>

ExamSoft

- Administrators have access and are working on setting up the structure.
- Tommy and Melissa just returned from the ExamSoft Conference.
- Training will be held in mid-July and will cover creating questions, importing questions, associating outcomes, and setting up tests.

Poll Everywhere

- Everyone has access at <https://www.pollev.com/>.
- Click Log in, type email address, hit enter. Click on Single-Sign On link and provide standard username and password.
- Training will be held in mid-July and will cover creating polls, presenting polls, and embedding polls in Canvas.
- Poll Everywhere educator guide - <https://www.polleverywhere.com/edu-guide>

Pharmacy Practice

Department Chair: Michael Bottorff

In the DPP, all faculty have completed a PGY1 (67%) or PGY2 (29%) residency and/or had five years of commensurate experience prior to employment. Faculty in this department have a variety of experience, with 57% having three or more years of academic experience and varying ranks. About 10% of Pharmacy Practice faculty are full professors, 19% are at the associate professor level and 71% are at the assistant professor level. Board certifications possessed by Pharmacy Practice faculty include pharmacotherapy, infectious disease, nutrition support, MTM, diabetes, immunization, anticoagulation, pain management, critical care, psychiatry and others. Sixty-seven percent of the Pharmacy Practice faculty are currently seeking or have recently obtained additional specialty certifications (Appendix 25.2). DPP faculty are fully licensed, have met all additional requirements for specific practice sites and are engaged in the provision of patient-centered care (Appendix 25.3).

Areas of clinical expertise include infectious diseases, cardiology, drug information, ambulatory care, internal medicine, critical care, hospice/palliative care, psychiatry, transitional care and pharmacy skills/abilities. Seven faculty have completed the BCPS (one with additional qualifications in ID), and 4 additional faculty are board certified in critical care, psychiatry, nutrition and lipidology. The PPR faculty have the training and expertise to contribute significantly to the execution of the strategic plan. Specific areas of contribution include 1.2, 1.3, 1.4, 1.5, 2.1, 2.2, 2.3, 2.4, 3.1, 3.2, 4.1, 4.2, and 4.4.

Department strengths include diversity of practice settings (including underserved populations), a significant number of faculty with national board certifications and certificate training, quality of didactic and clinical teaching and high level clinical services. Challenges would be the recent resignations, a number of junior faculty who still need to balance workload responsibilities and maintaining a strong relationship with our “distance” faculty.

PHARMACY PRACTICE FACULTY ACCOMPLISHMENTS
ACADEMIC YEAR 2015-16

ACCOMPLISHMENT	DEPARTMENT TOTAL
Total Published Publications	16
• Published Peer-Reviewed Journal Articles	11
• Published Book Chapters	5
Accepted for Publication/Not yet Published	1
Grants Submitted	10
• Grants Funded	5
Total Invited Presentations	37
• presented at Local Meetings/Events	16
• presented at Regional Meetings/Events	15
• presented at National Meetings/Events	6
Held Office in Professional Organization	5
Served on Committee, Interest Group or Task Force in Professional Organization	11
Received Award from a Professional Organization – (Andrea Wilhite)	1
• Award Received - Outstanding Volunteer/National Kidney Foundation of IN	1
• Type of Award - Service	1
New Board Certifications	3
• BCCCP (Dusty Linn)	1
• BCPS (Holly Robison)	1
• BCPP (Tom Smith)	1
Renewal of Certifications	1
• BCPS (Trent Towne)	1
Served as Peer Reviewer for a Journal	12
Attended AACP meeting	7
Number of Faculty Involving Manchester Students in Research	8
• Total Number of Students Collectively Involved	40
Served on a Committee at Practice Site	5
• Formulary Sub-Committee (Tom Smith)	1
• Residency Development Committee (Trent Towne)	1
• Residency Advisory Committee (Trent Towne)	1
• Antimicrobial Stewardship Team (Trent Towne)	1
• NICHE Steering Committee (Teresa DeLellis)	1
Number of protocols developed or implemented at practice sites	13
Served as Faculty Advisor to a Manchester Student Organization	7
Lead/Organized Community and/or Professional Service Event	23

Pharmaceutical Sciences

Department Chair: David Kisor

- (1) Assess baseline qualifications of faculty (particularly for faculty that joined during the 2015-2016 academic year)
 - Eleven faculty members in this department hold a Ph.D. degree (Drs. Beam, Betharia, Brown, Calinski, Ersin, B. Henriksen, Hoefler, Hrometz, Mundra, Nadithe, and Ray)
 - In 2015 a faculty in biomedical sciences with a PhD joined the Program (included in the 11 above) – Dr. Beam
 - In 2015 a faculty in pharmacology with a PhD joined the Program (included in the 11 above) – Dr. Hrometz
 - In 2016 a faculty in pharmaceuticals with a PhD joined the Program (included in the 11 above) – Dr. Mundra
 - In 2016 a faculty member in pharmacogenomics joined the Program (included in the 11 above) – Dr. Hoefler
 - In June of 2016 a faculty in social administrative science with a PhD will join the Program – Dr. Amin;
 - Two faculty hold a Pharm.D. degree (Drs. Kisor and Smith; one with a research post-doc fellowship(DK));
 - Two faculty hold a Juris Doctor degree (Drs. Caudill and Smith);
- (2) Expertise & quality of the faculty to deliver the curriculum (again, focusing on examples from the 2015-2016 academic year)
 - Collectively, their expertise spans administrative science, law, social science, pharmaceuticals, pharmacology, medicinal chemistry, pharmacokinetics, pharmacogenomics, medical/molecular genetics, biomedical sciences and toxicology.
 - As one measure of quality are the student evaluations of faculty teaching. When considering two of the statements that students consider in the evaluation of a faculty member, the collective faculty perform well:
 1. The instructor clearly communicated ideas and concepts.
Strongly agree/Agree: 79.4%
 2. The instructor inspired and motivated student interest in the course content.
Strongly agree/Agree: 81.5%
- (3) Expertise & quality of the faculty to meet the Strategic Plan
There are 12 full-time faculty in the Pharmaceutical Sciences. In addition, Drs. Bonnarens, Caudill, and Smith have part-time appointments. Eleven of the faculty members hold a Ph.D. degree, two hold a Pharm.D. degree and two hold a Juris Doctor degree. The Department expertise includes administrative science, law, social science, pharmaceuticals, pharmacology, medicinal chemistry, pharmacokinetics, pharmacogenomics, medical/molecular genetics, biomedical sciences and toxicology. During the annual evaluation, the Department efforts were related to the strategic plan. The Table below identifies the efforts and related strategic initiatives for the full-time faculty.

Table. Full-time Pharmaceutical Sciences Faculty and Program Strategic Initiatives.

Faculty	Strategic Initiative Number
Teri Beam	1.2, 1.4, 1.5, 2.1, 3.1, 3.2, 3.3, 4.1, 4.2, 4.3, 4.4, 5.3
Swati Betharia	1.4, 1.5, 3.3, 5.1
Dennis Brown	1.2, 1.4, 3.1, 3.2, 3.3
Diane Calinski	1.2, 3.1, 3.3
Ozlem Ersin	1, 3, 4, 5
Brian Henriksen*	
Carrie Hoefler**	
Sandra Hrometz	1, 2, 3, 4, 5, 6
David Kisor	1.3, 3.1, 3.2, 3.3
Vaibhav Mundra	1.4, 1.6, 3.1, 3.3,
Venkat Nadithe	1.2, 1.4, 1.6, 3.3, 5.1, 6.1
Sid Ray	1.2, 1.4, 1.5, 2.3, 2.4, 3.1, 3.2, 3.3

*information being gathered

**New in pharmacogenomics in March 2016

(4) Strengths/Accomplishments of the Department

The strengths of the Department are grounded in cooperation and collaboration, both in the classroom and in scholarship and service. Pharmaceutical Sciences Faculty had over 700 didactic instructional contact hours and as stated above this was done with a level of quality. In the scholarship domain, as a Department, the faculty had 26 publications with an additional five papers accepted. Faculty had 16 presentations ranging from local to national. Six grants were funded, while faculty submitted a total of twelve grants.

(5) Challenges the Department may have experienced

Challenges the Department faced included the resignation of two colleagues and having to absorb the workload on very short notice. The Department faculty members stepped-up and took on the extra workload. The Department then undertook faculty searches to fill the vacated positions.

Additionally, as did other units in the Pharmacy Program, the Department took on the workload related to our full-accreditation visit by the American Council for Pharmacy Education. Again the Department members fulfilled the needed roles and helped lead the writing of our self-study document.

While faced with increased workload and other stressors, the Department performed well and is looking forward to a strong 2016-2017.

PHARMACEUTICAL SCIENCES FACULTY ACCOMPLISHMENTS
ACADEMIC YEAR 2015-16

ACCOMPLISHMENT	DEPARTMENT TOTAL
Total Published Publications	26
• Published Peer-Reviewed Journal Articles	17
• Published Book Chapters	9
Accepted for Publication/Not yet Published	5
Grants Submitted	12
• Grants Funded	6
Total Invited Presentations	16
• presented at Local Meetings/Events	6
• presented at Regional Meetings/Events	2
• presented at National Meetings/Events	8
Held Office in Professional Organization	6
Served on Committee, Interest Group or Task Force in Professional Organization	7
Received Award from a Professional Organization – (Sid Ray)	1
• Award Received – Senior Toxicologist	1
• Type of Award – Combined teaching, scholarship and service	1
Served as Peer Reviewer for a Journal	11
Attended AACP meeting	6
Number of Faculty Involving Manchester Students in Research	6
• Total Number of Students Collectively Involved	12
Served as Faculty Advisor to a Manchester Student Organization	3
Lead/Organized Community and/or Professional Service Event	2

Student Organizations

Organization	Members	Participation in local, regional & national meetings	# of members which hold national positions	Member achievement recognition	Involvement in co-curricular events
ASHP	51	8 annual local 0 regional 1 national	0	Certificates of appreciation	Clinical Skills competition Collaborative Practice Competition Homecoming Health Fair Two guest speakers per year (minimum) Residency informational meeting Midyear Clinical skills competition OSCE review session
APhA	140	9 annual local (including IPA) 1 regional 3 national	0	Monthly recognitions at meetings as well as recognizing members at the regional meetings.	Community and educational outreach (kindergarten round up, health fair) Patient counseling competition. Immunization clinics
SPMC	17	4 annual local	0	N/A as of yet	Health Fair DNA day
CPFI	54	2 annual local	1	N/A	PSLC Meeting Christian Mission trips
Student Ambassadors	40	4 annual local	N/A	End of year certificates	Health Fair Preceptor showcase Interview Days Virtual Fairs
MHP	40	4 annual local	N/A	End of year certificates	IPSF – Lecture Series Operation Immunization – UEF Health Fair CPFI – Mikes Got Your Backpack
CPNP	55	2 annual local	0	N/A as of yet	Health Fair

2015 – 2016 Student Representation on Pharmacy Standing Committees

Pharmacy Standing Committees	P1	P2	P3
Admissions Chair – Tracy Brooks <i>2 students per P1, P2 & P3 classes</i>	Love Famuyide John Palaika	Emily Cooley Morgan Land	Ashley Kopla Tung Nguyen
Assessment Chair – Brian Henriksen <i>1 student from P1, P2 or P3 classes</i>			Shealy Todd
Co-Curricular Chair – Andrea Wilhite <i>1 student from P1, P2 or P3 classes</i>		Vasuki Pilli	
Curriculum Chair – Trent Towne <i>1 student per P1, P2 & P3 classes</i>	Kareem Addassi	Micah Spurgeon	Alyssa Petry
Honor Council Chair – Tom Smith <i>1 student elected by each class (P1-P3)</i>	John Palaika	Kaitlin Abou-Ganim	Ashley Kopla

University Standing Committees	P1	P2	P3
IRB/IACUC Chair – Özlem Ersin		Anayo Ohiri	Geoffrey Chemelil Scott Thurston

Pharmacy Student Class Focus Groups	P1	P2	P3
Team 1	Christina Ford	Team 1	Anayo Ohiri
Team 2	Aakash Patel	Team 2	Kevin Tammen
Team 3	John Palaika	Team 3	Rosary Ajaelu
Team 4	Natalia Suhali-Amacher	Team 4	Micah Spurgeon
Team 5	Mehvish Elahi	Team 5	Morgan Wolf
Team 6	Erum Rizvi	Team 6	Ngoc Nguyen
Team 7	Alexis MacDowell	Team 7	Shaden Mahjoob
Team 8	Shaheed Abdo	Team 8	Samah Kutom
Team 9	Victoria Rundquist	Team 9	Alison Koelling
Team 10	Mihir Shah	Team 10	Candice Harding
Team 11	Rajbir Singh	Team 11	Rozette Fawzy
Team 12	Alissa Kent	Team 12	Emily Cooley
Team 13	Brandon Renn	Team 13	Kehinde Adeniran
Team 14	Josh Rowe	Team 14	Alli Heeter
Team 15	Chad Glesing	Team 15	Lena Hakim
Team 16	Kimberly Hershberger	Team 16	Brooke Vonada
Team 1		Team 1	Tujan Almasri
Team 2		Team 2	Carmen Whitlock
Team 3		Team 3	Sara Barker
Team 4		Team 4	Tina Okoroafor-Egwim
Team 5		Team 5	Samah Yatooma
Team 6		Team 6	Ashley Montgomery
Team 7		Team 7	Marina Rizkalla
Team 8		Team 8	Daniel Rafael
Team 9		Team 9	Jennifer Riggle
Team 10		Team 10	Nathan Gregory
Team 11		Team 11	Jason Eakins
Team 12		Team 12	Trung Nguyen
Team 13		Team 13	Bitu Adabkhah
Team 14		Team 14	Steven Fuentes
Team 15		Team 15	Patricia Leng
Team 16		Team 16	Dominique Pavon

Pharmacy Student Leadership Council**Executive Committee**

Chair – Tung Nguyen (P3)
 Treasurer – Nancy Luu (P3)

Secretary – Morgan Land (P3)

Class of 2016 – TBD

Class of 2017 – Bianca Daisy & Alyssa Petry

Class of 2018 – Reid Kennison & Aubrey Mills

Class of 2019 – Natalia Suhali-Amacher & Jonell Nwabueze

Ambassadors – Dan Rafael (P3)

American Pharmacists Association Academy of Student Pharmacists (APhA-ASP) – Nour Al-Jamal (P3)

American Society of Health-System Pharmacists (ASHP) – Trung Nguyen (P3)

Christian Pharmacists Fellowship International (CPF) – Sandy Fam (P2)

College of Psychiatric and Neurologic Pharmacists (CPNP) – Jennifer Riggle (P3)

Muslim Healthcare Professionals (MHP) – Iman Aoude (P3)

Personalized Medication Coalition (PMC) – Kehinde Adeniran (P2)

Student National Pharmaceutical Association (SNPhA) – Nichelle Logan (P3)

PSLC Advisor – Dr. Bonnarens

Class Officers**P4 – Class of 2016**

President – Richard Ekanem
 Secretary – Hong Dao
 Activities Coordinator – Nic Robinson

Vice President – Andrea Fung
 Treasurer – Tom Carey

P3 – Class of 2017

President – Bianca Daisy
 Secretary – Alyssa Petry
 Activities Coordinator – Shealy Todd

Vice President – Jessica Western
 Treasurer – Nancy Luu

P2 – Class of 2018

President – Reid Kennison
 Secretary – Aubrey Mills
 Activities Coordinator – Ermin Begovic

Vice President – Mallory Sims
 Treasurer – Lori Grossman

P1 – Class of 2019

President – Reid Kennison
 Secretary – Aubrey Mills
 Activities Coordinator – Ermin Begovic

Vice President – Mallory Sims
 Treasurer – Lori Grossman

College of Pharmacy Student Organizations**Student Ambassadors Officers**

President – Daniel Rafael (P3)
 Secretary – Morgan Gilbert (P3)

President-elect – Aubrey Mills (P2)
 Activities Coordinator – Nour Al-Jamal (P3)

Members

Aakash Patel (P1)	Al Hoang (P3)	Alexis MacDowell (P1)	Alli Heeter (P2)
Ana Vargas (P3)	Atit Patel (P3)	Bianca Daisy (P3)	Brittany Reese (P2)
Brooke Vonada (P2)	Dipesh Patel (P1)	Engy Kheir (P1)	Ermin Begovic (P2)
Erum Rizvi (P1)	Fernando Ruiz, Jr (P1)	Ivalin Yordanov (P1)	James Bryant (P2)

Jason Eakins (P3)	Jennifer Riggle (P3)	Jessica Western (P3)	Jonell Nwabueze (P1)
Kacie Knapp (P3)	Kareem Addassi (P1)	Kelvin Reynolds (P1)	Linda Pio (P2)
Lori Grossman (P2)	Melissa Gasmen (P2)	Mihir Shah (P1)	Morgan Land (P2)
Ngoc Nguyen (P2)	Sara Shahdoost Moghadam (P1)	Sara Barker (P3)	Shaena Osborne (P3)
Shane Gurley (P2)	Stephane Schrader (P3)	Tara Chohan (P3)	Yamini Patel (P2)

Co-advisors – Greg Hetrick and Kasey Jones

APhA-Academy of Student Pharmacists Officers

President – Tara Chohan (P3)	President-elect – Morgan Land (P2)
Membership VP – Nour Al Jamal (P3)	Finance VP – Shaden Mahjoub (P2)
Policy VP – Kacie Knapp (P3)	International VP – Rozta Fawzy (P2)
Communications VP – Lisa Pinerros-Jacobs (P2)	Patient Care VP – Stephane Schrader (P3)
Website Chair – Jason Kopp (P3)	Generation Rx – Sara Barker (P3)
	Co-Chair – Kaitlin Abou-Ganim
Social Media Chair – Anayo Ohiri (P2)	Operation Diabetes – Bianca Daisy (P3)
	Co-Chair – Leilani Hirasuna (P2)
	Operation Heart – Shealy Todd (P3)
	Co-Chair – Marisarah Torres (P2)
	Operation Immunizations – Tung Nguyen (P3)
	Co-Chair – Ermin Begovic (P2)

Co-advisor: Drs. Joe Bonnarens and Sarah Gordon

American Society of Health-System Pharmacists (ASHP) recognized SSHP Officers

President – Gary Hite (P3)	President-elect – Sandy Fam (P2)
VP – Membership – Morgan Gilbert (P3)	VP – Clinical Skills – Tung Nguyen (P3)
Secretary – Jessica Western (P3)	Treasurer – Barbara Suh (P3)

Co-advisors – Drs. Trent Towne, Andrea Wilhite, Dusty Linn

Christian Pharmacists Fellowship International (CPFI) Officers

President – Sandy Fam (P2)	Vice-president – Matt Bessesen (P3)
Secretary – Dana Hakim (P3)	Treasurer – Fernando Ruiz (P1)
Events Coordinator – Rosary Ajaelu (P2)	Communications/Historian – Linda Pio (P2)
National Student Council Representative – Marisarah Torres (P2)	
Fellowship Coordinator/Ambassador – Denisse Marioni (P2)	
P4 Liaison – Steve Sitto (P4)	

Advisor – Dr. Joe Bonnarens

College of Psychiatric and Neurologic Pharmacists (CPNP) Officers

President – Jennifer Riggle (P3)	President-elect – Kaitlin Montagano (P2)
Secretary – Tara Boelke (P2)	Treasurer – Nour Al-Jamal (P3)

Advisor – Dr. Tom Smith

Muslim Healthcare Professionals (MHP) Officers

President – Tujan Al-Masri (P3)	Vice President – Iman Aoude (P3)
Secretary – Hussein Bazzi (P2)	Treasurer – Osmaan Syed (P2)

Advisor – Dr. Ahmed Abdelmageed

Phi Lambda Sigma Officers (Elections will take place February 2016)

President –

Vice President –

Secretary –

Treasurer –

Advisor – Dr. Joe Bonnarens

Student National Pharmaceutical Association (SNPhA) Officers

President – Renee Mickens (P3)

President-elect – Emily Cooley (P2)

Vice President – Mike Obeng (P3)

Secretary – Nichelle Logan (P3)

Treasurer – Geoffrey Chemelil (P2)

Community Service Chair – Rosary Ajaelu (P2)

Co-advisor: Drs. Kierstan Hanson and Joe Bonnarens

Student Personalized Medicine Coalition (SPMC) Officers

President – Kehinde Adeniran (P2)

Vice President – Rosary Ajaelu (P2)

Secretary/Treasurer – Anayo Ohiri (P2)

Chair, Education Committee – Dinh Ha (P2)

Chair, Technology Committee – Sandy Fam (P2)

Chair, Regulation Committee – Candice Harding (P2)

Co-advisors – Drs. Dave Kisor and Diane Calinski

2015-09-29 – OSA/jkb

Themes from spring 2016 student focus group sessions

P1 & P2

1. Course resources
 - a. Readings
 - i. Will read if required
 - ii. If require a textbook, students want to *use* it (more than a chapter or two)
 - b. Active learning
 - i. Valuable: Clicker questions; using brief case studies; think-pair-share; team activities; writing case studies; fill-in-the-blank handouts; drawings/diagrams; D2L chats; text messages; technology
 - ii. Less valuable: Team activities; “wordy” PowerPoints; “sparse” PowerPoints; think-pair-share
 - c. Faculty
 - i. Strengths: Knowledgeable; caring/personable; innovative
 - ii. Areas for improvement: Inconsistent enforcement of policies & management of classroom
2. Course assessments
 - a. Effective methods
 - i. Homework (most effective according to students); quizzes; comprehensive exams
 1. While quizzes are a preferred method, students want fewer of them (esp. in IPTs) & want them to be fairly low stakes
3. Course and instructor evaluations
 - a. Not seen as very useful by many; though some students found them valuable
 - i. Noted that some faculty indicate changes they’ve made to their courses based on student feedback
 - b. Doubt that they’re truly blinded
 - c. Too many of them
 - i. Stressful to complete
 - ii. Take seriously only for courses/instructors where students have something constructive to say
4. Integrated & spiraled curriculum
 - a. P1: Lab/Calculations; NPT/Biomed/IPPE/Lab
 - b. P2: Lab/IPT; ID/CNS/CV; Lab/Drug Lit.
 - c. Areas for improvement: Want Top 200 integrated; some faculty not familiar with overall curriculum
5. Program resources
 - a. Utilized: counseling; student mentors; workshops (e.g., professionalism); online databases
 - b. Wish list: more study areas; expanded building access; tutors; stress relief activities (e.g., yoga); improved financial services; P3 capstone course; additional copiers & copier “money”

Themes from spring 2016 student focus group sessions

P3

1. Reflected on fall 2015 IPT courses
 - a. Lengthy exams; would like paper copy of cases; want increased synergy between courses within a dyad; prefer exams on separate days
2. Compared IPT dyad model to monad IPT model
 - a. Prefer dyad in fall & monad in spring; stress about the same regardless of model; some students like the dyad model better due to slower pace, increased retention & every other weekend “off”, while others like the monad model better due to focus on a single topic & only one exam on a given test day
3. Class environment/resources
 - a. Strengths: “Lecture” handouts; recapping previous class at the top of the next class; help sessions; clicker questions; faculty who inspire learning
 - b. Areas for improvement: Workshop on &/or tips for success in IPT dyads; more active learning; spread assessments out better; team-based learning not perceived to be effective
4. Integration
 - a. Renal/critical care; Lab/IPTs (though, many want even more)

P4

1. Curriculum
 - a. Strengths: Patient counseling; use of drug literature
 - b. Areas for improvement: Capstone course; P4 project for residency-bound students; calculations; pediatric pharmacy; a “how to” on systematically presenting a patient; finding guidelines; more pharmacokinetics; endocrine IPT should be sooner
2. What the program could do to better prepare students for board exams
 - a. Send NAPLEX book & question bank sooner; suggest modules to prepare on specific rotations; tweet a daily practice question or email a weekly “quiz”; online workshop in P4 spring on board applications; integrate NAPLEX-type questions into lab
3. Fulfillment of mission
 - a. Strengths: Several APPEs in underserved locations; many courses on patient-centered care; scholarly opportunities with faculty; elective courses focusing on mission elements
 - b. Areas for Improvement: More focus needed in advancing the profession; greater emphasis on the profession on Day of Service
4. Program, generally
 - a. Overall strengths: Faculty; student input valued; IPTs; active learning; small class size; training/certificates; patient interaction early on
 - b. Areas for improvement: More communications during P4 year as students felt somewhat detached from the program; knowledge retention; new school stigma; communicate changes (e.g., faculty leaving) in a more timely fashion; health fair; spread out spring P3 co-curricular experiences (e.g., etiquette dinner), as too many are at the end of the semester; more advanced planning & notice of events; quality of IPPEs quite varied; want health insurance; lack of diversity, esp. African Americans & Latinos; begin IPTs in P1 spring; better integration with North Manchester

P1 Focus Group Questions, Spring 2016

Course resources:

1. How useful do you find the recommended/required/supplemental course readings/textbook?

- Completing the readings in certain course (i.e. Calculations, Pharmacy Law) are more beneficial as they help to complete required assignments and/or homework
- Calculations textbook is contradictory of what is being taught
 - Calculations are incorrect in book
 - Dr. Trovinger is proactive in identifying helpful information prior to assigning reading
- Readings are nice to use as a refresher if something is taught in lecture and students need further information or clarification
- Pharmaceutics – book not necessary; available in DI center
- Biomed Textbook rarely used – needs to be used for more than one or two topics to be worth purchasing
- Intro to Pharmacy – only used twice for the semester but was required & was expensive
- Pharmaceutics book mandatory - never used
- Communications “The Spirit Catches You” book never even mentioned within the course but recommended
- NPT, Law and Calculations books are helpful & useful in P1 year.
- Some professors attach the readings on D2L therefore students do not have to use secondary sources
- Not too useful, unless points are leveraged in readings in an expensive book that is used for two quizzes.

2. What active learning methods (e.g., clickers, think-pair-share, team activities) do you find helpful in your courses? What makes them effective? What active learning methods would you like to see utilized?

- NPT – clicker questions from prior week’s material are used to reinforce information
- Handouts could be polished to be more cohesive and not include outdated information
 - Students need help connecting the differences between resource information that is conflicting and how to make judgement calls
- Clicker questions are great in preparing for exams
- Team Activities with no guidance are not beneficial
- Use of clicker questions following every 5-6 slides helps students pay attention
- PowerPoints are difficult to understand when they are cluttered with too many colors; different fonts
- PowerPoints that are essentially blank & provide links to the internet are not helpful; instructors need to elaborate and give students more guidance
- Think-pair-share usually lasts about 15 minutes and not as helpful

P1 Focus Group Questions, Spring 2016

- Clickers, team activities, and think pair share are all helpful, with clickers and teams being more effective. It allows discussion (clickers) and more thorough thought of a subject (team activities).
- Would like to see: more clickers and “case studies” but quick case studies

3. In what ways do faculty review course material (e.g., recitations, D2L chats)? How beneficial do you perceive these to be?

- Recitations – students bring questions sometimes which are never answered; more basic information is covered for foundational knowledge vs. covering deeper understanding of material
 - Need to strike a balance between the two type of students and their questions
- Dr. Brown/Dr. Henriksen used recitations 1st semester which gave focus to what students needed to study
- Recap at the beginning of lecture to review last class material
- Review: These are planned and show benefit of the major points
- D2L chats: long standing D2L chats (biomed) worked fairly well so far this semester, an Intro midterm review d2L chat, started very late, barely before the end time.

Assessments:

4. Which assessment methods (e.g., exams, quizzes, assignments/homework) are most effective in evaluating your learning and performance?

- Biomed homework helps with understanding
- Homework is most beneficial – gives you material necessary to review prior to class.
 - Biomed and Calculations are moving that direction In class assignments are now being allowed for students to take home and start working on them which helps students have time to think through
- Exams are comprehensive and help access knowledge
- Exams: comprehensive, quizzes: sometimes miss major points or focus on others, homework is best)
- Quizzes are a good means of keeping students up-to-date with material rather than leaving everything to study for exam

5. How effective are you in keeping up with and retaining information, particularly in courses that are fast-paced? What can be done to optimize your performance (e.g., time management seminars)?

- Dr. Beam – Biomed homework

P1 Focus Group Questions, Spring 2016

- Helps students fill in the gaps to check understanding;
- NPT- quizzes every week; group and individual – helps with exam studying and keeps you prepared
- NPT posts tables to condense what was discussed in class and is helpful in studying
 - Suggested that information be posted in NPT earlier than Thursdays to help students who have IPPE on Thursday more time to study – currently benefits Tuesday students
- Homework vs quizzes; homework in P1 year seems higher priority than quizzes.
 - For homework students can use notes and get that done and then use rest of time for studying for quizzes
- Homework forces you to get into material earlier.
- It's difficult, always depends on depth and teaching method as well as length between assessments (can't just do 2 hours of lecture and then have that information be of equal importance on final exam)
- Time management workshops are re-telling information students already are aware of from undergrad and are not beneficial

6. How effective are faculty in assessing their course outcomes? How effective are students in achieving those outcomes? What specifically do you do to ensure that you meet the outcomes of a course?

- Biomed – hard to correlate how objectives relate to outcomes
 - Are assessments reflective of objectives and/or outcomes?
 - 1st half of Biomed yes – 2nd not so much
- Rarely look at outcomes – focus more on objectives
 - Students depend on faculty to tell them what they need to know
- Some are good: see BMS I and II, DI some are bad: see BMS I&II (too general)

7. How effective are course/instructor evaluations in assessing the quality of a given course/instructor? What specific suggestions do you have to improve the process?

- Not useful; scared to talk about situations that really happen. Students feel targeted.
- Depends on if faculty show evidence of incorporating feedback from students
 - Calculations did a good job of incorporating feedback from evaluations

P1 Focus Group Questions, Spring 2016

- Students will continue to spend quality time on Calculations evaluations because they feel their feedback is implemented and used to improve future semesters.
- Might be helpful to reiterate to students these are anonymous surveys
- Apply reflections in other courses similar to those currently being used in Lab
- Students just click to get completed & don't spend a lot of time in general
- Evaluations are good and rarely taken seriously
- Need a better balance of time between release date & completion date

Curriculum:

Our curricular model centers on a spiral integration approach. Spiral integration involves learning basic and clinical sciences across both time (i.e., throughout the curriculum) and subject matter (i.e., across disciplines). The spiral model describes integration as topics being introduced at a simple level, revisited and reinforced throughout the Pharmacy Program at increasing levels of complexity.

8. How integrated do you find the curriculum to be? What examples can you provide where the curriculum is optimally integrated (within a course or across courses)?

- Cancer day seemed like a great idea but P1 students were kind of lost because they were feeling like they were listening vs. participating.
 - Felt they benefitted only by seeing where they will be in a few years
 - P1 students would like to be more involved
- Calculations/Lab optimizes integration across courses
- NPT this semester is where integration is most noticeable
 - NPT / IPPE / Lab integrate nicely
 - NPT – really brings everything together in Lab
 - i.e. Otic/Cough and Cold
 - Smoking Cessation was off schedule a little bit; didn't have the foundation needed for IPPE
- Biomed and NPT – good correlation
- Vocab in Lab integrates well with Biomed & NPT

Student resources:

9. What resources have you utilized this year (e.g., optional workshops, using your mentors, Student Success Center, counseling)?

- Mandatory workshops
- Counseling services

P1 Focus Group Questions, Spring 2016

- Student mentors are only good for a nice chat about questions; formal inquiries feel like should be made to faculty/staff

10. What additional resources need to be available to help you succeed in the pharmacy program?

- More study areas and building availability for study time
 - expanded weekend hours,
 - open building earlier in am or stay open later in pm
 - 24/7 availability
- Students would like to be able to see their exams to review. Some feel that Manchester has a policy where exams do not have to be revealed to students in all circumstances.
- Tutors for classes - maybe a student who knows what to focus on and to lower the “embarrassment” about asking a simple/stupid question.

Wrap-Up:

Is there anything you would like to say about the pharmacy program that hasn't been discussed yet?

- Personable faculty and staff has carried over from North Manchester; some students were afraid they would lose that coming into the Pharmacy Program in Ft. Wayne
- Certain policies are not enforced at all times for all students
 - Dress code-students wearing sweatpants
 - Tardy policies-not enforced week to week
- First semester felt more polished than the second semester
- Would like to see an IPT incorporated at the end of P1 year to introduce students to the IPT sequencing
- Some courses feel as if lectures are thrown together at the last second
 - i.e. Intro to Pharmacy
- Classroom lacks discipline. Faculty don't maintain professional atmosphere in class which hinders the learning process
- Quiz/Exam make-up policy needs to be enforced and revisited. Certain students seem to be allowed to abuse this privilege without valid or authentic medical notes and/or supposed court date(s). Propose putting a limit on the amount of makeups allowed per semester.
- More vertical integration

P2 Focus Group Questions, Spring 2016

Course resources:

1. How useful do you find the recommended/required/supplemental course readings/textbook?

- Don't really use AccessPharmacy or online resources unless they are required
- Rarely use textbooks unless mandated by faculty.
- Doesn't matter if textbooks are required or recommended – usefulness depends on time availability
- Students will read required – recommended is not completed if not being tested on
- Expensive books are often noted as required, but then not necessarily used for more than 1 or 2 chapters or one topic.
- Don't have time to read or look at textbooks. Detailed PowerPoints include all the info students have time to process.
- ID I IPT has a recommended book which faculty will direct students to specific portions of that textbook if there will be quiz/exam questions related to it.
- P2 year there are no required books – felt in P1 year NPT book was useless; Law and Pharmacogenomics books very worthwhile and helpful.
- They are useful however, there never seems to be enough time to fully access the readings and apply it to our course curriculum.

2. What active learning methods (e.g., clickers, think-pair-share, team activities) do you find helpful in your courses? What makes them effective? What active learning methods would you like to see utilized?

- Helpful to use reward at end of active learning – (example -Dr. Beckett's Jeopardy game)
 - Bonus points are good incentive to keep student's engaged
 - Dividing class into groups that compete against one another helps facilitate with active learning – students are competitive
- Students like Dr. Wilhite's style – she gives cases with specific information and multiple examples
- Dr. Towne's small group activity writing patient cases worked well
 - One group comes up with case; then pass to another group; next group comes up with questions regarding case; next group answers case questions. Activity usually lasts about 1 hour
- Think-pair-share activities don't stay focused; to be more useful there needs to be more foundation laid ahead of time.
- Clicker questions used as a poll of understanding of students are helpful
- Clicker questions help to prepare students for style of questions that will be presented on exams
- Clicker questions help students stay engaged in class and apply their knowledge & understanding
- Clickers often don't work which is frustrating to students and discourages participation

P2 Focus Group Questions, Spring 2016

- Clicker questions are helpful because students are able to discretely answer questions without fear of answering incorrectly. Additionally, it allows us to see how we answered and correct any gaps in our understanding once the answer is explained in lecture.
- The think-pair-share method is helpful, as it allows us to hear how other students are understanding the course material.
- Fill in the blank outline/handouts used by Dr. Hrometz are helpful to follow along and keep students engaged and keep class pace
- Attendance required “incentive” worksheets/handouts which are point based are helpful
- Dr Betharia’s drawings are a helpful learning tool

3. In what ways do faculty review course material (e.g., recitations, D2L chats)? How beneficial do you perceive these to be?

- Recitations give you a chance to practice and apply information as well as solidify what you know and apply it
- Discussion boards on D2L are good for students who have questions.
- D2L chats are beneficial
 - It is helpful to see what questions other students ask
 - Typically held on the weekend prior to the exam. (i.e. Sunday afternoon)
- Text messages via Remind
- Homework or quizzes every week or class period; helps students stay on track but can be stressful
- Dr. Henriksen (male) was great at scheduling in-person recitations, even over the weekends. This was extremely helpful.

Assessments:

4. Which assessment methods (e.g., exams, quizzes, assignments/homework) are most effective in evaluating your learning and performance?

- Homework formatted similar to exam questions (short answer or multiple choice)
- Homework assignments are also helpful because you are able to assess your learning by confirming through course material and other resources.
- Homework in IPT is helpful; isn’t as overwhelming as quizzes and helps students retain info for exams.
 - CV II had quizzes every class period which caused stress and cramming
 - However, it forces students to come to class prepared – homework would be better than quizzes
 - Quizzes have value within reason (possibly make them lower stakes)
- Quizzes that are more relevant to exams would help students learn from your mistakes
- Quizzes are helpful in that it allows students to prepare for the exam in increments.
- Exams are most effective

P2 Focus Group Questions, Spring 2016

- Short answer questions are more difficult to come up with answers and solidify within timeframe allotted but ultimately will show more of what you know
- Multiple select and K questions are more difficult and challenging – used extensively on boards and reason why they are used here.

5. How effective are you in keeping up with and retaining information, particularly in courses that are fast-paced? What can be done to optimize your performance (e.g., time management seminars)?

- Checkpoints
 - Drug Lit Evaluation- checkpoints for Monographs which are helpful and make a difference.
- Quizzes
 - Lecture on Monday–quiz on Wednesday helps stay on track and read material
- Repeating concepts helps with retention
- Holding more review sessions or recitations for retention
 - Would students attend review sessions in the evening?
 - Class officers need to poll students to see what days and times work
 - Some professors will do D2L chats which work better than scheduled recitations
- Dr. Smith does separate Tegrity recordings as review sessions
- Dr. Smith uses Remind to text random questions and answers- well received by students
- Weekly quizzes that aren't high stakes would be more helpful and less stressful
- Retaining information appears to be most challenging. Time management would be best so having seminars on ways that other students or faculty have adapted to the fast-pace of pharmacy school would be ideal.

6. How effective are faculty in assessing their course outcomes? How effective are students in achieving those outcomes? What specifically do you do to ensure that you meet the outcomes of a course?

- Follow objectives more than overall course outcomes
- Objectives are used to prepare for quizzes and exams
- Depends on faculty–students take cues from instructors
- Objectives give more of a focused picture of class period rather than outcomes
- More condensed objectives seem less overwhelming than slides upon slides
- Drug Info – good example of outcomes/objectives/assessment
- Rarely look at outcomes – focus more on objectives
 - Students depend on faculty to tell them what they need to know
- Exam questions are based on objectives so it forces students to look at these.
- Students feel if they meet objectives they are also satisfying course outcomes

P2 Focus Group Questions, Spring 2016

7. How effective are course/instructor evaluations in assessing the quality of a given course/instructor? What specific suggestions do you have to improve the process?

- Too many to be effective—need to cut back on the amount required
- Helps next class improve
- Overall a good thing
- Asking students to highlight positives as well as asking for the negative or improvements might help feel like these are more beneficial from the faculty standpoint
- Students feel feedback is not taken into account – things don't change
- Faculty have too many to read so it isn't effective for them either –
 - Might be a better process (i.e. having faculty who are doing things well assist or mentor other faculty)
- Evaluations are a great way to constructively critique a course or instructor.
- Having them due at the end of the semester is stressful. Maybe on the last day of each course, at the conclusion of our final exam, we can be prompted to complete a mandatory evaluation of the course and instructor. That way it does not build up for each course at the end of the semester.

Curriculum:

Our curricular model centers on a spiral integration approach. Spiral integration involves learning basic and clinical sciences across both time (i.e., throughout the curriculum) and subject matter (i.e., across disciplines). The spiral model describes integration as topics being introduced at a simple level, revisited and reinforced throughout the Pharmacy Program at increasing levels of complexity.

8. How integrated do you find the curriculum to be? What examples can you provide where the curriculum is optimally integrated (within a course or across courses)?

- Lab and IPT
 - Need to align topics better; at times they get off sequence
- Top 200 quizzes need to be condensed down and tie into IPT classes
 - Students don't take these seriously and they aren't set up in an effective way to help students remember
 - Incorporate drugs from IPT into Top 200 instead of being so random some weeks
 - Making Top 200 quizzes a requirement to achieve 80% or higher would help motivate students to take more seriously
- IPT exams (incorporating previous courses and old material into exams - ID I is a good example of how to do this with CNS & CV)
 - Other IPTs incorporate NPT only
 - Integrate past material within current lectures and not just on exams

P2 Focus Group Questions, Spring 2016

- Drug Lit Evaluation brings in trials about BP or other disease states being talked about in other classes.
- Repetition and reinforcement is beneficial to students
- Lab and Drug Lit are good examples of integration with IPTs
- The curriculum is very integrated, not only in coursework but outside interpersonal relationships with other classes.
- Biomed for current P2s was not beneficial; Current P1 year is so much better in the way the course is structured and material that is integrated
 - Current P2 students would like an online PowerPoint as a resource they can reference back to
 - Access to this year's P1 completed handouts supplied to them by course faculty.
 - Access to Tegrity recordings

Student resources:

9. What resources have you utilized this year (e.g., optional workshops, using your mentors, Student Success Center, counseling)?

- Professionalism workshop was helpful and should be required
- Counseling services are beneficial – students like the skype availability
- Student mentors are helpful to get a heads-up about future classes and faculty
- AccessPharmacy and other databases and mobile apps
- Copiers need to work
 - DI center copier won't feed papers from the top feeder
 - IT copier jams consistently
 - 2nd floor copier runs out of paper on the weekend & students don't have access to additional paper
- I have utilized my mentor quite heavily and think it is a great asset of our program.

10. What additional resources need to be available to help you succeed in the pharmacy program?

- Financial Services needs to review & revise student living expenses.
 - Not reflected accurately.
 - Students are having to get jobs in order to make ends meet which is taking time away from studying and interfering with their ability to be successful.
- More study areas and building availability for study time
 - expanded weekend hours,
 - open building earlier in am or stay open later in pm
 - 24/7 availability
- One-on-one tutoring from upper classman (on campus)
- Offer Stress relief activities (i.e. medication, yoga)
- Utilize student mentors more regularly throughout the program

P2 Focus Group Questions, Spring 2016

- Give extra credit for students who would offer to tutor on weekends
- Set up “open” study group tables where faculty members or fellow peers are available during certain times to answer questions.
- Availability to a program where students could ask questions “live” & anonymously
- Student access to view recording of their counseling sessions done in the Communications Labs
- More physical copies of textbooks; and ability to check-out books and take home and study
- A library!!!! Studying would be great with a library. Access to a library in this city is not ideal and greatly impacts my studying time.

Wrap-Up:

- **Is there anything you would like to say about the pharmacy program that hasn't been discussed yet?**
 - Innovative
 - Technology is superior
- Day of Service – Not beneficial the way it is currently set up
- Addition of P3 year Capstone course
- Workshop on Outlook – Microsoft 365
- P2s are skeptical about P3 IPT dyad
- Re-evaluate P2 Schedule
 - Monday and Tuesday seem way underutilized; Wednesday seems overloaded;
 - Suggest using flipped classroom approach-online lectures available on these days for students to better utilize time
- Student Print money needs to be increased
 - Students are mindful of what they are printing and are still running out way before the semester ends
- Another printer is needed to meet demands
- Faculty need to be aware of the entire curriculum so they what is going on in the other courses and what students already know or haven't covered
- Doctoral cap for graduation day. Not an undergraduate square cap but a doctoral cap like every other university.
- More loan and scholarship availability

P3 Student Fall 2015 Focus Group Feedback

1. What are the positive and negative aspects regarding the schedule for the IPT courses in the P3 Fall semester?

Positive

- Feel like they are learning the material
- 4 exams vs. 3 allows opportunity to make up points if you do poorly
- More engaging & interesting – more variety & nice complement to each other
- Having one Tuesday off – able to catch up on material. Review and rest in between
- Lab on Monday; extends study time; no new lecture material
- Enjoy weekend off by not having exam every week. Having a break makes semester seem slower and not as overwhelming
- Helps retain information and allows time to go back and ask questions and review
- Tuesday exam day is better and less stressful than having to be prepared for Monday exam
- Week off is good only for disciplined students. Need to use time effectively. P3s should know how to balance

Negative

- Really stressful when you are studying for two exams at the same time
- Block format is too overwhelming – Rationale from faculty-say they did it in pharmacy school–but didn't have same structure – testing on 12 credit hours
- More fatigue; don't like two exams the same day;
- Not having slides set up ahead of class is detrimental to learning
- Hard to study for both classes and do well in both. Trend is most of the students are doing better in one than the other.
- A lot of material at once -overwhelming
- Never seems there is time to review due to amount of material

2. How does the pace compare to previous IPT semesters?

- More intense because of the increased amount of material
- Rapid – lectures are rushed to complete material in allotted time
- Pace is about the same as previous years

3. How does the amount of material compare to previous IPT semesters?

- Increased material in lectures
- More material because of additional class
- Told material was cut from last semester; doesn't seem that way; material is too much because two classes at same time. Diabetes and birth control will be seen every day – need to absorb and remember for important details.
- Double information – after test; behind on one lecture

4. What are some things that faculty have done that enhanced your learning so far in the P3 Fall semester?

- Added quizzes and homework to reinforce material; helps sort through material

P3 Student Fall 2015 Focus Group Feedback

- Review sessions
- Review big picture things; letting class know what to focus on. Homework packets reviewing important points.
- Handouts beneficial to paying attention in class
- Homework over quizzes allows better performance and less stress. Reinforces learning and helps get questions answered.

5. What could the faculty do differently that would enhance your learning in the P3 Fall semester?

- Schedule voluntary session on a different day. Tuesdays are supposed to be study time; but sessions make you exhausted for the remaining portion of the day
- Structure exam differently; allow more time for increased amount of questions; 65 questions in 90 minutes is too much
- Push 2nd exam back to later time on Tuesday. Allows more time for studying in between
- More consistent lower stake homework.
- Offer study skills workshop prior to IPT dyad starting to help students make the transition.

6. By the morning of the non-exam Tuesday, do you have the previous week's material learned to the point of being prepared to take a quiz or exam?

a. If so:

i. What is your process to accomplish this?

- Try to re-listen to tegrity and keep up with lecture notes.
- Use off day to review things. Weekend is for relearning and re-listening.
- Use off week to full capacity. Being disciplined; prioritizing time and using good study habits

b. If not:

i. What adjustments do you plan to make to ensure you have learned the material before new material is introduced?

- Adjust study habits. More material and/or two classes is requiring adjustments to be successful.
- Study material as if there will be an exam every week.

ii. What are the barriers to you learning the previous material before new material is introduced?

- Still learning material from previous week as new material is being introduced.
- Reviewing material to prepare for exam instead of "keeping up".
- Using long weekend for personal ventures vs. studying and keeping up and on track

P3 Focus Group Feedback Spring 2016

IPT experience

Describe the amount of time for the IPT Dyad 1 (endocrine and renal) exams.*

- Exam time 90 minutes w/same amount of questions normally given for 2 hour exam.
- Case questions are too complex for allotted time
- Propose less overall cases and choose a more complex case that could overlap multiple questions
- Would help if faculty provided a paper copy of the case facts due to amount of time wasted scrolling back and forth to reference these electronically
- Would like to see questions decreased if time stays at 90 minutes
- If questions are not reduced, expand exam time to 2 hours.
- Endocrine/renal exams more difficult to finish in 90 minutes than the ID II/Pulm CC exams

Describe the amount of time for the IPT Dyad 2 (ID II and pulmonary/critical care) exams.*

- See above
- ID II / Pulmonary dyad seemed to be set up better. There was adequate learning time built into class. Endocrine/Renal did not incorporate active learning and seemed to have an overabundance of material to absorb.

***Note:** Please reflect on the actual exam length, not the time preparing for the exam.

In the IPT Dyad structure, the exams will remain on the same day. Describe the pros and cons of the following schedules.

- Exams combined into a single 3-hour exam
 - Not a good option
 - Too many questions in one sitting could result in more stress
 - Too intense and may result in mixing up information for two exams
 - Never had this experience so it is hard to analyze if it would be a good option
 - Could finish exams early and be done for the day
 - This is a long exam and it is hard to stay focused
- Exam 1 8:30-10am and Exam 2 10:30-noon
 - Would cause fatigue ½ way through the 2nd exam
 - Break is too short; doesn't allow time for review
 - Perfect amount of time for a break – best option
 - Not enough of a break – exams too close together

P3 Focus Group Feedback Spring 2016

- Two separate exam times, but still finish early in the day
- Not much time to recover from the first exam and/or prepare for the next.

- Exam 1 8:30-10am and Exam 2 1:30-3pm
 - Best Option
 - Allows for review time and rest period
 - Too long of a break – just want to get exams over and be done
 - Allows a nice amount of time to review for the 2nd exam while also being able to relax a bit.

- Exam 1 8:30-10am and Exam 2 3:00-4:30pm
 - Too long of a break
 - Students will not be able to focus on 2nd exam because they are too tired and unable to focus after the long break
 - Would like this schedule because it gives time between the exams to rest however it makes for a very long day.

*Additional Suggestion was made to Start Exam 1 at 10AM vs 8:30 and Exam 2 at 3PM. Would give students time to review in the am prior to Exam 1 as well as give a break for review and rest before Exam 2 beginning at 3:00.

Compare the pace of the IPT Dyads with the one IPT at a time you are experiencing now.

- The pace is slower with exams every other week and more time to relax the week without exams for IPT Dyad
- One IPT at a time seems less stressful. More time to absorb information rather than cramming with IPT Dyad.
- Liked the idea of mixing the option (IPT Dyad in Fall/Single IPT in Spring)
 - IPT Dyad in the Fall when pace seems slower and the material can be more spread out
 - One IPT in the Spring to be able to focus on the material at a faster pace
 - Quantity of material in Spring is less and easier to manage
- Prefer IPT dyads because it allowed a weekend off as well as a day off for studying and digesting material. Having two exams on the same day, however, did seem exhausting.
 - One IPT at a time does not allow enough time for students to take a break from studying and allow time for retention of material
- Students feel like they are struggling to retain information from the dyads vs. one IPT at a time

P3 Focus Group Feedback Spring 2016

GENERAL

Describe the classroom environment. How did it contribute to your success? Give examples of class environments that were particularly productive.

- Using first 5 minutes of class to review important points
- Use of fill-in-the-blank handouts
- Help sessions offered by faculty on off exam days gave students chance to ask questions
- Enjoy professors who inspire and encourage learning and participation

Provide ideas on how the curriculum could be better integrated. Include ideas of integration within courses, among courses in the same semester and across the entire curriculum. Provide examples of areas that you identify as being successfully integrated.

- Have faculty work together when planning quiz/exam schedules. Would help attendance policy when students are skipping classes to study for other courses.
- Helpful if lab integrated what was taught in IPT so they could apply their learning and relate it to the upcoming exam(s).
- Workshops on how to prepare to and be successful studying for IPT dyad. Focus on how to break down material.
- Teaching styles of some faculty could incorporate more active learning rather than straight lecture to help solidify learning.
- Clicker targeted questions are helpful
- Linn/Betharia – Renal and critical are the best examples of integration. It is obvious they prepare and are tuned in to other faculty slides
- Would like to see some integration in the Immune IPT
- Spring semester IPTs seem random and unorganized (uncovered topics had to be put somewhere so this is where they landed)
- More integration of lab and IPTs. Make lab time more focused and beneficial to students.
- Advanced Clinical Skills seems like it could be condensed and focus more of that time in IPT. Most of work in Advanced Clinical Skills is done on your own anyway.
- Team based learning in place of lecture is the worst thing

At the end of this semester you will take the PCOA and the P3 OSCE. Describe how you are preparing or planning to prepare for these assessments.

- Would be helpful if faculty incorporated questions from old IPTs into new material to help refresh and reinforce learning.
- Study Top 200 Quizzes
- Target major disease states
- Tailor lab experiences to mirror real world expectations and take it more serious
- Not preparing at all – too much other course work to prepare
- Not really preparing for either other than reviewing drug classes

P3 Focus Group Feedback Spring 2016

What advice would you provide to the P2 class as they prepare for the P3 year?

- Work hard
- Practice time management
- Always go to class
- Take lab seriously so you can be prepared for the OSCE
- Review materials after each class and it will help exam studying
- Keep up with material and don't procrastinate
- Tell them to come to class, participate, study, focus and stay on top of things.
- P3 year is a doable year – the material is so much more interesting.
- Minimize the amount of time Tegrity is used and attend class.
- Don't skip class or you fall to far behind and can't catch up

P4 Focus Group Questions, Spring 2016

1. How prepared were you for APPEs?

- Prepared with interaction with patients – comfortable with counseling patients. Standardized patients in lab really helped with that.
- Multiple preceptors commented that Manchester students excel in using evidence based literature for practice in comparison to other students from other schools.
- Struggled with finding where to find/look up guidelines.
 - Uploading a list on LMS on where to find guidelines would be helpful
 - In lecture, include a slide of resources including where faculty member found their info
 - Include looking up guidelines in class – or reading as a requirement within courses
 - Oncology/Diabetes topics did a good job incorporating this

2. What is missing from the curriculum?

- Capstone course would be beneficial to help serve as a refresher from previous 2 years.
- Require a PharmD final project in P4 year or as possible component of Capstone course
- Incorporate (possibly in lab) an activity to learn how to systematically present a patient which goes beyond SBAR
 - Enhance communication skills in order to present in 1 or 2 minutes in an more understanding/effective manner
- Not prepared in Calculations
- More topics related to pediatric patients integrated throughout curriculum

3. In what ways did the Pharmacy Program excel in preparing you?

- Well prepared in Drug Info

4. How prepared do you feel for the NAPLEX & MPJE?

No feedback shared

5. Is there something that the Pharmacy Program could have done/can do to better prepare you?

- Send question banks prior to NAPLEX book distribution and review session
- Integrate curriculum more throughout – information familiar but needs to be refreshed
- Integrate capstone course prior to APPEs
- More time spent between drug interactions
- Supplemental Modules or readings sent from faculty during APPEs helpful?

P4 Focus Group Questions, Spring 2016

- Would be better utilized if sent prior to APPEs so they could pick through what they needed as progressions through APPEs.
 - time is a factor while going through APPEs
- Endocrine earlier in the curriculum to help with better understanding of disease states (i.e. diabetes)
- Workshop(s) In March or April to help get your applications in – (NAPLEX and licensure)
 - Suggest presentation format as pre-recorded videos or webinar
- Pharmacokinetics – incorporate it more through curriculum (Calculations)
- Get NAPLEX review book sooner – maybe prior to Christmas break (or related material if book is not available)
- Send “Question(s) of the week” – send 5 questions at the end of the week for practice (extracted from old exams) Digestible bytes of information to keep students updated.
 - How to communicate best – email is the most reliable for this group – may use other forms of social media additionally.
- Communication from school during rotations was lacking. Need some feedback; areas to look at to keep students abreast of new drugs/guidelines etc. Felt like the connection was gone.

6. What has the Program done that you have found helpful in preparing you for these exams?

- NAPLEX review
- MJPE Review

The Pharmacy Program **mission** now states: *“To cultivate graduates of ability and conviction to provide patient-centered care guided by respect for the infinite worth of individuals; and dedicated to improve communities by advancing pharmacy education, practice, service and scholarship.”*

7. In what ways has the Pharmacy Program fulfilled its mission? Please be specific.

- Providing APPEs or rotations for underserved populations – i.e. Matthew 25
- Courses focus on patient centered care – wide range of cultures worked with through community and student organizations
- Research opportunities with faculty – scholarship
- More focus is needed on advancing pharmacy education
- More pharmacy related service opportunities for service day would serve more mission specific

P4 Focus Group Questions, Spring 2016

8. What evidence can you point to demonstrate that the Program is developing graduates of ability and conviction?

- Various Electives offered help focus in on certain areas of mission.

9. What is the Program's greatest strength? What is its greatest challenge?

Strengths:

- Wide variety of faculty that are knowledgeable with real life experience.
- Opportunities to engage student input
- Seeing/counseling patients really early on within the curriculum
- IPTs are strength
- Active learning – flip style classrooms
- Class size – small compared to national class size averages
 - Helps facilitate professionalism, mentorship and meaningful relationships
- Training and certificates – all strengths that other schools do not hone in on (i.e. CPR, Immunization, MTM)
 - CPR recertification may be useful prior to graduation – about to expire
- Faculty treat you as an individual and are very helpful and a benefit of the university

Challenges:

- Getting students to retain knowledge from the early years
- New school – stigma to overcome that there is a reason you are at a new school and you have to overcome (not as good because it is new)
- Communication between students and faculty/staff. Changes are not communicated in a timely manner.
- Health fair each year is good – but could be better by being included in larger opportunities like IPFW health fair so community can see what pharmacists can bring to the table.
- At end of P3 semester – so much is crammed in the last few weeks (etiquette dinner, meetings, etc.) spread out more. Also studying hardcore IPT during that time.
- On the fly planning of events – expectations need to be communicated earlier for students ability to schedule
- Dropping student insurance is causing students to work more and take away class and study time.
- APPE experiences are highly variable in quality

P4 Focus Group Questions, Spring 2016

- P1 lab was valuable. P2 and P3 lab was not as beneficial. Lot of wasted time. Need to integrate more by building upon topics & integrating what is happening in the classroom
 - Possibly integrate some NAPLEX questions in lab

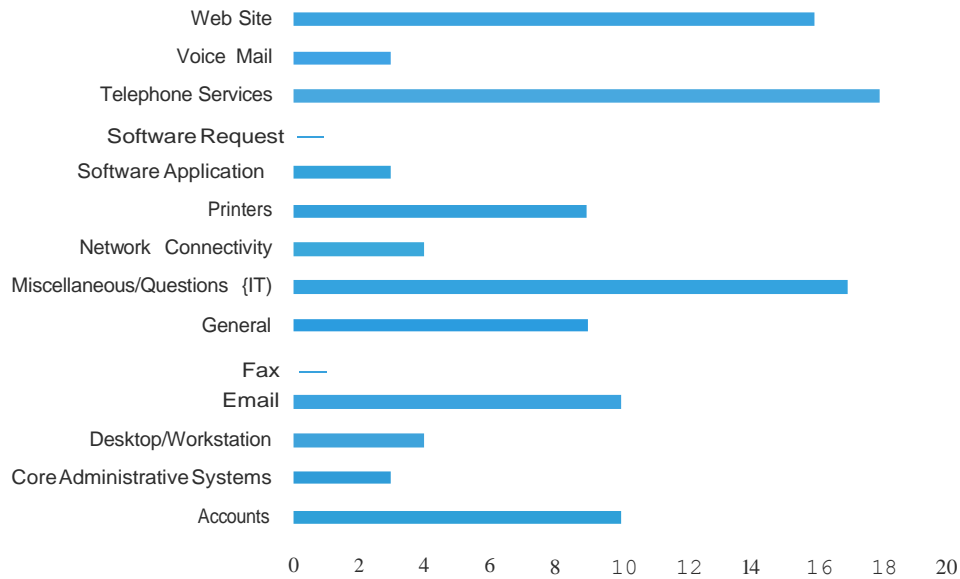
10. Is there anything you would like to say about the pharmacy program that hasn't been discussed yet?

- Lack of African American diversity within faculty/staff. No role models for these students.
- Offer BMS for one semester – incorporate other BMS material into IPTs when appropriate. This would allow curriculum to begin offering IPTs in Spring P1 year.
- Building hours need to be expanded for student studying on weekends
- Pharmacy Program isn't very integrated with the main campus. Speaking from a student organization viewpoint, met with a lot of roadblocks (i.e. getting t-shirts printed, and other student org opportunities). Need to do a better job of facilitating and communicating the transparencies of regulations and rules between the two campuses.

ITS Report

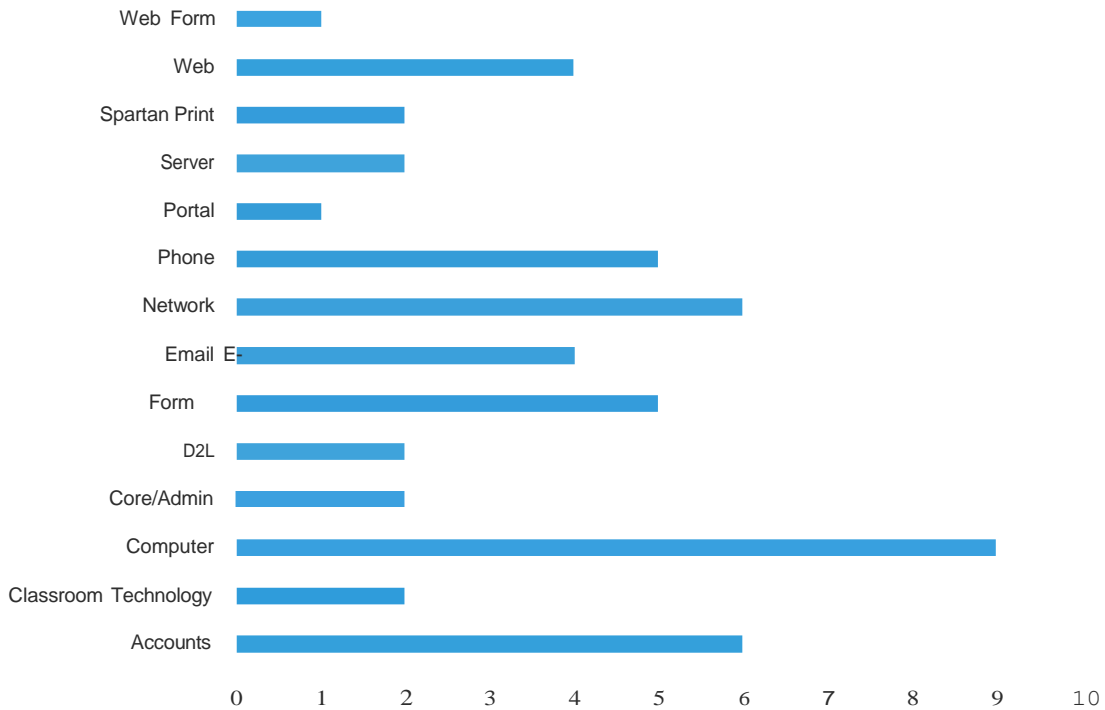
Average length of days to completion (20.5 days) - Fall 2015

Tickets by Problem Type



Average number of hours to completion (5 hours) Spring 2016

Tickets by Problem Type



Master of Science in Pharmacogenomics

Program Implementation

- PHMGEN Council responsible for program development and implementation
 - Diane Calinski, David Hick, David Kisor, Jill Lichtsinn, Robin Mitchell, Thomas Smith
- Higher Learning Commission approval October 30, 2015
- Program publicly announced November 16, 2015
- Over 70 inquiries (BS degree, MS degree, MD/PharmD/RN/Genetic Counselor, others)
 - 13 applications/11 accepted (10 BS degree/1 MS degree)
- Program started May 17, 2016

Curriculum

- Three semesters (Summer/Fall/Spring)
 - Summer (May 17-August 19)
 - Fall (August 31-Dec 16)
 - Spring (January 16-May 5)
- 14 Semester credit hours per semester
- Rooms
 - 133
 - 213 (Lab)
 - 219 (“Blue Sky room”)

Faculty

- Summer
 - Swati Betharia, Diane Calinski, Sandra Hrometz (Pharmacology)
 - Teri Beam, Carrie Hoefer (Mol Bio/Analytical Tech)
 - Dave Kisor, Venkat Nadithe (Intro to PGx/Pharmacokinetics)
 - Tom Smith (Patient genome evaluation)
 - Ozlem Ersin (Research Responsibilities and Ethics)

Recruitment is ongoing via rolling admissions.