

## AACP REPORTS

### Report of the 2007-2008 Academic Affairs Committee

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#### BACKGROUND AND CHARGES

According to the Bylaws of the American Association of Colleges of Pharmacy (AACP), the Academic Affairs Committee shall consider:

*the intellectual, social, and personal aspects of pharmaceutical education. It is expected to identify practices, procedures, and guidelines that will aid faculties in developing students to their maximum potential. It will also be concerned with curriculum analysis, development, and evaluation beginning with the pre-professional level and extending through professional and graduate education. The Committee shall seek to identify issues and problems affecting the administrative and financial aspects of member institutions. The Academic Affairs Committee shall extend its attention beyond intra-institutional matters of colleges of pharmacy to include interdisciplinary concerns with the communities of higher education and especially with those elements concerned with health education.*

Consistent with a theme of exploring how AACP might foster organizational improvement and success among its institutional members, President Cynthia Raelh asked all standing committees of the Association including the 2007-08 AACP Academic Affairs Committee to critically review the past work of Academic Affairs Committees as reflected in reports published from 1999 through 2007. The focus of this critical review was to study the progress made on recommendations put forward, and recommend concrete action steps for implementation of those recommendations still unfulfilled that will significantly advance the Association's highest

priorities. Furthermore the AACP Board identified those priorities to be progress in three core areas: i) faculty recruitment and retention, ii) assessment program maturation and iii) quality assurance in experiential education.

#### COMMITTEE PROCESS

Background information and resource materials were distributed to Committee members prior to a conference call on November 5, 2007. During the conference call Committee members shared preliminary views and discussed their approach to the charge. The Committee completed its subsequent work through conference calls and electronic communications.

After reviewing its charges, the Committee decided to take the following approach to review a total of eight Academic Affairs Committee reports from 1999-2007<sup>1-8</sup> which were focused on the following topics:

- 1999-2000 – Integration of general ability based outcomes into pharmacy curricula.
- 2000-2001 – Use of courseware technology in pharmacy schools and how professional values can be inculcated in students via the use of technology. Implementation of AACP Teaching and Learning Roundtables.
- 2001-2002 – How curriculum has been revised to include information on pharmacogenomics and pharmacogenetics.
- 2002-2003 – All of the standing committees were charged with identifying the leadership characteristics and skill sets needed by deans, chairs, vice chairs, assistant and associate deans, directors and other aspiring administrators. The Academic Affairs Committee was asked to focus

on specific aspects of leadership that impinge upon faculty recruitment, hiring, development, and retention, as well as the characteristics and skills that enable leaders to acquire resources essential to develop faculty and maintain quality instructional programs.

- 2003-2004 – Recommend appropriate assessment measures, indicators and processes to guide institutions in responding to the question “how do you know if you have a quality program?”.
- 2004-2005 – Explore how schools and colleges can foster interest in and preparation for careers in academic pharmacy and facilitate progressive development of faculty skills across an individual’s academic career.
- 2005-2006 – How academic pharmacy can help to achieve the JCPP vision.
- 2006-2007 – Complete an environmental scan of how the IOM competencies have been integrated into pharmacy curricular, how curricular has changed since Background Paper II, examine what curricular design innovations have taken place and plan a summit to continue the discussion of curricular issues.

The Committee formed four teams consisting of two Committee members that reviewed two reports each. Four reports (2002-2003, 2003-2004, 2004-2005, 2005-2006) were determined to have particular relevance to the three identified priorities for 2008-2009 by the Chair. Each team was assigned to review one of these four reports in addition to a second report from the remaining four years. Each team was asked to determine the following in the review of their respective reports:

1. What recommendations were provided in the assigned reports and if action had been taken to implement the recommendations.
2. If recommendations have not been implemented, the team should consider the relevance of the recommendations and determine what the priority should be placed on its implementation.
3. If a recommendation was implemented, where is the evidence regarding its implementation (i.e. AACP website, publication in AJPE or AACP programming, AACP policy adoption).
4. What suggestions or policy recommendations were provided in the report? Are the relevant to the three identified priorities? If they are, should the suggestions be included as a priority for 2008-2009? Were policy recommendations adopted?

Each team submitted its findings on a data collection template form to the Committee Chair for compilation. To find evidence of implementation of the recommendations,

AACP Staff searched the American Journal of Pharmaceutical Education (AJPE) [www.ajpe.org](http://www.ajpe.org), the AACP website [www.aacp.org](http://www.aacp.org), AACP programming files related to Annual and Interim Meetings, and other pertinent sources.

Subsequently, the Committee met several times to discuss the findings and come to consensus on its relevance to the three identified priorities, developed a ranked list of these report recommendations inclusive of suggestions and policy statements, and identified recommendations that have not been implemented (e.g., those for which no evidence of action was found). In addition, the Committee provided recommendations regarding actions that can be taken by AACP regarding the reports’ recommendations as well as their implementation status. Based on the evaluation and discussion of the Committee members, the attached table outlines the Committee’s findings and recommendations that should be considered for action by AACP in 2008-2009.

## **FACULTY RECRUITMENT**

As identified by the AACP Board the three areas of priority for 2008-2009 were reviewed: i) faculty recruitment and retention, ii) assessment program maturation and iii) quality assurance in experiential education. Interestingly, all three areas have been the focus of recent AACP Institutes: 2008 (faculty recruitment, retention, and enrichment), 2007 (accreditation and assessment) and 2006 (experiential education). Not surprisingly the top areas identified by the Academic Affairs Committee for relevance to 2008-2009 were related to faculty recruitment and retention (identified in 14 of the first priorities) and thus the focus of this report.

### **Demand**

Recognizing the need to track pharmacy faculty vacancies, in 2002 AACP introduced the Survey of Vacant Budgeted and Lost Faculty Positions. In 2006-07<sup>9</sup>, a total of 595 vacant and/or lost positions were reported, up from 429 in 2005-06.<sup>10</sup> In fall of 2007, there were 4,647 full-time and 483 part-time faculty across the 98 colleges and schools of pharmacy.<sup>11</sup> Of the 595 vacancies, the most were reported in clinical science/pharmacy practice (51.3 percent). Top reported reasons for all vacancies included: individual in position moved to a faculty position at another academic pharmacy program (11.9 percent) or an individual retired (10.3 percent). Of concern was the impression that positions remained vacant because there were not enough qualified candidates in the pool (i.e., candidates judged unable to meet the institution’s expectations/requirements for the position, inadequate number of qualified candidates in the discipline, lack of response to position announcement) as indicated by 37.4 percent of respondents.

Recognizing that the total number of academic pharmacy programs today is near 110 (including emerging programs) it is quite plausible that there are nearly 1,000 pharmacy faculty vacancies at colleges and schools of pharmacy going into the 2008-09 academic year. Thus it is imperative that leaders in academic pharmacy begin to think both from tactical and strategic perspectives to address the multitude of issues that relate to faculty recruitment, retention, and enrichment within their organizations and across the Academy.

### Supply

As described in the 2004-05 Academic Affairs Committee Report,<sup>6</sup> there are at least four student populations where future academicians might be identified, mentored, and nurtured to an academic career path in pharmacy education: (1) professional (doctor of pharmacy) students; (2) postgraduate students in the clinical sciences and administrative sciences (i.e., residents, fellows, and those in clinical or administrative graduate programs) who typically have a foundation in pharmacy; (3) graduate students in the pharmaceutical sciences with a pharmacy background; and (4) graduate students in the pharmaceutical sciences with backgrounds outside of pharmacy (e.g., chemistry, biology, chemical engineering). In addition to these four student populations, there is also the possibility of attracting practitioners who desire a career change and who have harbored at one time or another, a yearning for the academic life.

In trying to fill the pipeline, for the past four years AACP has conducted the *Wal-Mart Scholars Program* for pharmacy and graduate students as well as post-graduate residents the opportunity to spend time with a faculty mentor at the AACP Annual Meeting and Seminars with the objective of strengthening students' interest in careers in academic pharmacy. The goal of the *Scholars Program* is to help colleges and schools of pharmacy ensure there are an adequate number of well-prepared individuals who aspire to join the faculties at pharmacy institutions across the country. In 2007 over 50 student/faculty pairs were supported in part to attend the AACP Annual Meeting and Seminars through such scholarships with an anticipated equal number of awards for 2008.

The collective group of approximately 5,000 faculty (in conjunction with many volunteer pharmacy preceptors) at the colleges and schools of pharmacy are responsible for indoctrinating the knowledge, skills, and abilities requisite for the future generation of pharmacy practitioners, represented in the 9,812 PharmD graduates in 2007.<sup>12</sup> Given the over 100 colleges and schools of pharmacy today, if one additional student per class were attracted to an academic career in the pharmaceutical

sciences and one additional student per class were attracted to the clinical or social sciences, following the requisite graduate education and post-graduate training, an additional supply of 200 new pharmacy faculty annually could be projected for the years to come (Table 1). Thus, by 2015 the potential for 1,000 new academicians in pharmacy education could be realized.

Academic pharmacy must also look to "non-traditional educators" to fulfill the void of pharmacy faculty positions present in colleges and schools of pharmacy. Such individuals may have forewent the direct migration from professional or graduate school into higher education, yet accumulated years of expertise in their respective areas. As such, there are many talented clinicians, pharmaceutical scientists, and entrepreneurs that could bring a unique wealth of experiences to the educational and research programs in colleges and schools of pharmacy.

However the academic community must be welcoming of these individuals that desire to transition into various roles of teaching, practice, and research. As argued by one pharmacy academician, "It is our responsibility as faculty colleagues and administrators to serve as vocal and enthusiastic advocates for those individuals who transition into our colleges and schools."<sup>13</sup> The establishment of mentoring programs within a comprehensive faculty development program is critical to many faculty members,<sup>14,15</sup> especially those coming into their first academic appointment. Likewise a comprehensive faculty development program would be assumed to be very desirable for those coming from outside academia.

### FACULTY RETENTION AND ENRICHMENT

One of the greatest assets to any organization are the human resources (i.e, faculty and staff). The costs to recruit for open vacancies in higher education can be

Table 1. Projected Impact of Additional Students Entering Pharmaceutical Sciences and Clinical and Social Sciences

<b>1 student per class pursuing PGY1 and PGY2 post-graduate training</b>	<b>1 student per class pursuing a PhD</b>
Year 1 100	Year 1 100
Year 2 100, 100	Year 2 100, 100
Year 3 100, 100 {100}	Year 3 100, 100, 100
Year 4 100, 100 {100}	Year 4 100, 100, 100, 100
Year 5 100, 100 {100}	Year 5 100, 100, 100 {100}
Year 6 100, 100 {100}	Year 6 100, 100, 100 {100}
Year 7 100, 100 {100}	Year 7 100, 100, 100 {100}
Year 8 100, 100 {100}	Year 8 100, 100, 100 {100}
<b>600</b>	<b>400</b>

extremely expensive. At the University of Wisconsin-Madison, across the disciplines, Madison figures that it spends an average of \$1.2-million in start-up costs for each new professor. It typically takes eight years for a professor to bring in enough research money to cover that cost. . . the university loses many professors before they even pay off the initial investment.”<sup>16</sup> The expenditures associated with the recruitment of faculty are highly dependent on the mission of the institution but the indirect “hidden” costs (e.g., double teaching loads, burnout, intellectual loose, etc) can be extremely costly as well. Therefore a prudent measure is to attempt to retain current faculty and staff in colleges and schools of pharmacy.

New approaches to reward systems that often have not been available historically in our institutions need to be developed and embraced (e.g, merit systems). Promotion and tenure guidelines need to be reviewed to allow individuals the opportunity for success, including the openness for non-tenure and non-faculty appointments where appropriate to those appointees not desiring the traditional tenure-track system in higher education. The use of non full-time appointments must also be examined and the ability for such individuals to remain employed in the private sector requires consideration as well.

The use of sabbaticals needs to be embraced in colleges and schools of pharmacy, as their use is often more accepting in the cultures of undergraduate programs on campuses though their use is elusive in professional education.<sup>17</sup> Such sabbaticals need not be full year or even six months in duration. The use of mini-sabbaticals throughout a faculty member’s appointment should be explored. The ability of faculty to reinvigorate or enrich their teaching or scholarly pursuits needs to be fostered. For clinical faculty this may be the ability to become certified in a given clinical area or gain experience in a new clinical service or patient population. Whereas for basic and social science faculty this may be the acquisition of new research techniques or methodologies or the establishment of relationships for research collaborations. In essence these sabbaticals can occur in “micro-bursts” throughout a faculty member’s career. With this approach an organization’s perspective on the return on investment need not be calculated over multiple years, thus the willingness to offer sabbaticals may be enhanced.

## CONCLUSION

In the coming decade key challenges in academic pharmacy will remain the recruitment of sufficient numbers of qualified faculty in all disciplines; assuring a diverse and cultural competent faculty; and attracting student leaders to faculty positions in academia. The

recommendations and suggested actions that can be taken by the Academy have been identified in this report. Swift action is needed among all pharmacy faculty and administrators, as the time to contemplate and study has passed.

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Appendix 1. Table of Prioritized Recommendations from Academic Affairs (1999-2007)

Year	Type (R = recommendation, P = policy, S = suggestion)	Statement (as presented in the report)	Relevance (P = program assessment, F = faculty recruitment & retention, E = quality experiential education)	Priority	Recommendations & Findings
'04-'05	R 03 01	The proposed joint Council of Deans-Council of Faculties Committee on Faculty Workforce should: 1) Prepare a compilation of model programs and initiatives, such as orientation programs, certificate programs, course sequences, structured teaching opportunities, intended to prepare graduate students, residents, and fellows for academic teaching roles. 2) Develop guidelines for the development, implementation, and enhancement of such programs.	F	1	1) A survey of individuals who have used Education Scholar should be conducted to determine its impact. Additionally, determine how many people have completed Education Scholar. 2) Consider other target groups for Education Scholar and how it should be marketed to enhance its utility. Section of Teachers of Pharmacy Practice completed a survey of orientation programs prior to 2004-2005 (in 90's) and information varied greatly. It is unclear what the utility of this information is today; 3) there is currently ongoing discussion with ASHP with respect to the Residency Accreditation Standards (PGY1 and PGY2) for the inclusion of an introduction to teaching and learning in residency training. This was reaffirmed at the 2007 ASHP Midyear Clinical Meeting with ASHP Officers) 4) work with ACCP Education & Training PRN.
'04-'05	R03 03	The proposed joint Council of Deans-Council of Faculties committee on faculty workforce should 3) establish a process to evaluate the success of such efforts as measured by the percentages of participating students securing faculty positions in pharmacy colleges and schools.	F	2	
'04-'05	S 02	AACP member institutions should increase the number of Advanced Pharmacy Practice Experiences that emphasize academic and research skill development.	F	4	Examples are published in AJPE and Journal of Pharmacy Teaching. Continue to encourage development of such experiences.

'04-'05	S 03	<p>ACCP member institutions should develop formalized orientation programs for new faculty that include and emphasize aspects of academic appointments that pertain to the multitude of academic success measures (e.g., in teaching, research, university and community service, patient care service). A future Academic Affairs Committee or some other task group should be charged to review the status of peer teaching evaluation mechanisms and other faculty teaching skill development and assessment programs at member institutions and develop guidelines for their continual improvement and enhancement.</p>	F	5	<p>ACCP should create or identify a curriculum framework or program skeleton that member schools can use to create programs.</p>
'04-'05	R 07	<p>ACCP member institutions should develop, implement, and evaluate mentoring programs for all faculty, with special attention to junior faculty.</p>	F	6	<p>1) Include these strategies in a "tool box" that is housed on the ACCP website; 2) 2008 Annual meeting Teachers Seminar will focus on triangulation of peer and student evaluations regarding teaching excellence. This topic should be repeated so that it can reach a greater number of target audiences.</p>
'04-'05	S 04	<p>ACCP member institutions should develop, implement, and evaluate mentoring programs for all faculty, with special attention to junior faculty.</p>	F	7	<p>ACCP should create or identify a framework or program skeleton that member schools can use to create such programs.</p>
'04-'05	S 05	<p>ACCP member institutions should encourage, and if possible, provide financial support for all junior faculty members to attend a minimum of one American Association of Colleges of Pharmacy annual meeting.</p>	F	8	<p>1) ACCP should consider the use of technology, such as Webinars, to increase accessibility for faculty who do not have funding to attend the meetings; 2) ACCP should evaluate how to develop programming that is attractive to junior faculty particularly young practice faculty who will be attracted to other national meeting such as ACCP.</p>
'04-'05	S 07	<p>ACCP member institutions should contact and nurture alumni to attract those who might be interested in returning to graduate school in anticipation of embarking on a second career in academic pharmacy.</p>	F	9	
'04-'05	S 06	<p>ACCP member institutions should develop professional and career development course work encompassing career planning for its professional doctoral students.</p>	F	10	

‘02-‘03	R 04	<p>AACP should establish a Center for Academic Leadership &amp; Management in Pharmacy (the Center). The Center will become an organizational structure within AACP, appropriately staffed, with organized input from member advisory panel(s), responsible for the design and implementation of a structured, on-going, and comprehensive program of leadership and management development for AACP members.</p>	F	11	<p>Currently, AACP offers 1) Academic Fellows Program, 2) Department Chairs programming at annual Meeting 3) Deans Manual; 4) leadership seminar prior to annual meeting.                  Recommendation:                  1) Consider an Institute type of program offering in order to accommodate more individuals. AACP has put together a Chairs group. 2) Consider programming at the Interim meeting 3) Consider branching out into discipline specific meetings to increase accessibility of programming to faculty who may not have the funding and/or to attend multiple meetings.                  There are currently faculty that have begun to investigate this area.</p>
‘04-‘05	R 09	<p>A future Academic Affairs Committee or some other task group should be charged to conduct an exploratory, descriptive study to define the various purposes, benefits, and outcomes of sabbaticals for pharmacy educators.</p>	F	12	
‘04-‘05	R 04 02	<p>A future Research and Graduate Affairs Committee or some other task group should be charged to 2) prepare a compilation of strategies at member institutions to educate graduate students lacking a professional background and/or degree in pharmacy about the profession and the role their scientific disciplines play within the profession.</p>	F	13	<p>AACP is in discussion with APhA to see how the APhA Pathway Program can be used to educate non-pharmacists graduate students and faculty. No additional action is recommended at this time.</p>
‘05-‘06	R 05	<p>A future Argus Commission should be charged to envision the characteristics of the pharmacy profession at the end of the first quarter of the 21st century (2025). In light of this envisioned future, delineate its implications for pharmacy education and considerations that must be before the academy now to influence, prepare for, and optimize pharmacists’ contribution to society in this timeframe.</p>	F, P, E	14	<p>This issue is a charge for 2007-2008 Argus Commission. The report will be released later this year; no additional recommendations at this time.</p>

‘03 –‘04	R 02, R 03	<p>AACP, through its Institute for promoting leadership and continuous improvement of curricular and pedagogical activities and other programs, products, and services, should continue to provide member education and resource materials to support the implementation of program assessment processes by member institutions.</p>	P	15	<p>Currently, AACP offers the graduate, preceptor and alumni survey instruments. The 2007AACCP Institute programming focused on assessment. There are many publications in AJPE regarding this issue.</p>
		<p>AACP Institutional Research Advisory Committee or another ad hoc task force or committee should be charged to compile a list of assessment tools, including those listed above, and relate the tools to specific assessment plan components in order to guide the appropriate application of the instruments and processes for specific purposes and to answer specific assessment questions.</p>			<p>Recommendation: The various source materials, AJPE articles should be compiled to provide one cohesive set of documents or a listing of all references to date. Develop a "tool box" that is easily searchable and retrievable for placement on the AACCP website. Include the emerging Pharmacy Educational Assessment System (PEAS) in this tool box.</p>
‘03 –‘04	S 02	<p>The Academic Affairs Committee encourages AACCP member institutions to adapt one or more the assessment plan templates included in Appendix 1 as the basis for an institution-specific plan for the gathering, analysis, and use of specific data elements to provide evidence of programmatic effectiveness and indicators of needed quality enhancements.</p>	P	16	<p>Make this info accessible by placing it in the tool box as noted on priority # 15</p>
‘03 –‘04	S 03	<p>The Academic Affairs Committee encourages AACCP member institutions to share their assessment plans with peer institutions for the purpose of facilitating an understanding of assessment plan development and implementation within the academy.</p>	P	17	<p>Need to develop a mechanism for how this can occur. Should work with ACPE to identify mechanisms for sharing best practices after receiving consent from the member institution.</p>

‘06- ‘07	R 01	<p>AACP should work with appropriate partners to develop performance measures to evaluate and validate the ability-based outcomes for the professional curriculum, including the development of standardized core assessments for core curricular experiences. These core assessments should include clinical performance skills and be sufficiently specific in nature as to operationalize the tenets of patient-centered care</p>	P	18	<p>Currently, the 2007-2008 AACP Scholar in Residence is working on a proof of concept project relate to this issue. No additional recommendations at this time.</p>
‘01-‘02	R 01	<p>1) AACP should reconvene the CAPE Advisory Panel on Educational Outcomes to examine the Educational Outcomes to ensure that they maintain contemporary validity relative to roles and responsibilities of pharmacists and requisite knowledge base, especially within the emerging areas of pharmacogenomics and pharmacogenetics.</p> <p>2) AACP should appoint a focus group to clarify the importance of general abilities within professional education, and to develop and describe models of student-centered instruction and assessment that integrate general and professional outcomes within the professional degree program.</p>	P	19	<p>The 2004 CAPE Outcomes mentions pharmacogenomics and pharmacogenetics topics. The general abilities are mentioned in the 2004 CAPE Supplements but are not clearly delineated in CAPE and are buried. Recommend 1) the CAPE Advisory Panel consider how emerging topics/issues will alter the CAPE outcomes and revise accordingly. 2)The dialog regarding the importance of continuing to develop and assess general abilities within the professional program should continue - enhance emphasis on general abilities in the CAPE Educational Outcomes document. It appears that the element that still remains to be worked on is "assessment". 3) Consider this issue for a future Curricular Summit; 4) Not mentioned in the ACPE Standards 2007; should it be? 4) delineate general abilities in future revisions of CAPE.</p>
‘99-‘00	R01				

‘05-‘06	R 02	<p>AACP should convene a task force of thought leaders selected from among AACP members to consider the current evidence base to support the contemporary professional degree curriculum as defined by the CAPE Educational Outcomes (2004) and the ACPE Accreditation Standards and Guidelines (2006).</p>	P	20	<p>There has been discussions of these at meetings each year however a task force was not formed.</p> <p>Recommend AACP to continue planning the curriculum summit and recommend a discussion be conducted on how schools have applied the CAPE outcomes and ACPE standards in curricula or have altered course delivery. What problems were encountered with its applications and any strategies for resolution. Additionally, recommend a discussion on whether the CAPE outcomes are appropriate for preparing graduates for current and future pharmacy practice.</p>
‘05-‘06	R 03	<p>AACP should serve as a national instructional resource center to facilitate the development and dissemination of instructional resources and courses to support the delivery and/or enhancement of (a) professional degree programs; (b) graduate degree programs in the pharmaceutical, administrative, clinical, and cognitive sciences; and (c) certificate- and degree-granting programs</p>	p	21	<p>Recommend inclusion of this information in the redesigned AACP Curricular Resource Center on the AACP website to enhance dissemination of information. Preliminary discussions with the American Association of Medical Colleges (AAMC) and AACP have occurred with respect to the product MedEdPortal that allows for peer review and dissemination of instructional materials.</p>
‘05-‘06	R 04	<p>The Section of Continuing Professional Education is the AACP member group with expertise to shape the future of continuing professional development. The Section should investigate the applicability of existing frameworks for self-assessment and portfolio development to support continuous professional development principles and processes relative to acculturation of professional students and to faculty and preceptors.</p>	P	22	<p>Currently, some work is being done to look at continuing professional development (CPD). There are pilot programs among several state professional associations and colleges/schools of pharmacy. Recommend continued exploration and report of findings to the AACP membership.</p>
‘03-‘04	P 01	<p>AACP supports and encourages the implementation of on-going program assessment processes at member institutions for the purpose of enhancing the quality of educational programs and student services.</p>	P	23	<p>Currently, this topic has been included in many annual meeting programs. Recommend this be continued. This policy was adopted.</p>

'99-'00	R 03	<p>AACP should sponsor programs to disseminate the ideas identified by this Academic Affairs Committee report, by the appointed focus group, and through the collaboration of ACPE and AACP. Specifically, the 2001 AACP Institute should be designed to focus on the integration of general and professional ability outcomes within the pharmacy curriculum. The Institute should be designed to stimulate dialogue regarding the nature of professional education; the role of general ability outcomes in the education of future professionals; and the content, processes, and outcomes of a curriculum in which general and professional outcomes are integrated. Steps should be taken to ensure this dialogue is extended to the participating teams' institutions and to other AACP member institutions.</p>	E	24	<p>Recommend 1) Future AACP Institutes should revisit the integration and development of general and professional abilities within Doctor of Pharmacy curricula; 2) Consider having the Interim meeting focus on curriculum and assessment issues on a consistent basis; 3) consider how technology can be used to enhance the reach of programming to members.</p>
'06-'07	S 01	<p>Colleges and schools of pharmacy are urged to 1) use the resources developed through the APPI to recruit, develop, and retain preceptors, and 2) contribute to the further expansion of resources and tools available through the APPI.</p>	E	25	<p>Recommend 1) AACP needs to develop mechanisms for reminding members to use the resources in APPI; 2) Determine how this information can be integrated into faculty development programs; 3) Consider how this information can be included in the "tool box" recommendation that was discussed in priority item # 15; 4) Request a report from individuals who attended APPI as well as those who used the information from APPI to determine level of success and what was learned. This information can be disseminated to the membership at large.</p>