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Assessment Activities by ALL Committees for AY2014-2015

Assessment committee will be responsible for reviewing all data.

QUESTION TO ASSESS (*Students, Alumni, Faculty, Preceptor, Administration*)	OUTCOME MEASURE	ACPE STAN-DARD	TARGET	ASSESS CYCLE	GROUP(S) to Provide Data	Observation & Action **denotes the action & changes made based on results (Pending data, Pending Review, Completed, Archive)
Student Learning Outcomes						
Personal Management and Leadership *To what extent have our students learned to be productive members of their profession who contribute to the improvement of the health of their patients and communities?*	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: a. Time management b. Work teams	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Every three years	Curriculum Committee, Course Coordinators	Class of 2018: 98.59% Class of 2017: 98.02% Class of 2016: 95.74% Class of 2015: 89.97% **All measures greater than 75%, however discussion that there is decreasing across P1-P4. As transition to CAPE outcomes, will monitor more cross-sectional, so we can track longitudinal per cohort.** **Archive as this system will be phased out by 3 years.**
Systems Management *To what extent have our students learned to create and manage medication systems that provide the best possible outcomes for their patients?*	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: a. Therapeutic outcomes b. Budgeting c. Resource management d. Distribution of medication e. Medication management	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Every three years	Curriculum Committee, Course Coordinators	Class of 2018: 95.20% Class of 2017: 82.82% Class of 2016: 83.00% Class of 2015: 91.96% **All measures greater than 75%. As transition to CAPE outcomes, will monitor more cross-sectional, so we can track longitudinal per cohort.** **Archive as this system will be phased out by 3 years.**

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Service and Social Responsibility *To what extent do our students understand that service to patients and communities differentiates a profession from an occupation?*	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: a. Commitment to pharmacy b. Community involvement	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Every three years	Curriculum Committee, Course Coordinators	Class of 2018: 98.56% Class of 2017: 84.10% Class of 2016: 79.40% Class of 2015: 85.00% ****All measures greater than 75%. As transition to CAPE outcomes, will monitor more cross-sectional, so we can track longitudinal per cohort.**** **Archive as this system will be phased out by 3 years.**
Lifelong Learning *To what extent have our students learned to identify learning needs and resources to adapt to changes in health care and the profession?*	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: a. Emerging issues b. Implement change c. Self-improvement d. Self-assessment	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Every three years	Curriculum Committee, Course Coordinators	Class of 2018: 93.12% Class of 2017: 87.96% Class of 2016: 91.11% Class of 2015: 81.97% ****All measures greater than 75%. As transition to CAPE outcomes, will monitor more cross-sectional, so we can track longitudinal per cohort.**** **Archive as this system will be phased out by 3 years.**
Student, Faculty, Staff						
Student Progression *Is there a correlation between curricular markers and APPE performance?*	OSCEs CLP Peer evaluations IPPE preceptor comments APPE performance	10, 13,14	Positive correlation between students OSCE grades, students with CLP peer evals, IPPE preceptor comments and APPE performance	Annually	CLP Coordinators, Experiential Committee	Was only able to obtain OSCE P3 data and full APPE data for the graduated class of 2015. Found a slight correlation (R2=0.3) with OSCE average and overall APPE average. ****Recommend to continue to track data (through the Office of Student Affairs) to determine if OSCE in addition to peer evaluations, IPPEs, e-portfolios and APPEs can be used as a progression. Track**

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						available data for current P1-P3 students.
Patient Care Process *How effectively do DYCSoP faculty feel like our students can fulfill each component of the patient care process at the end of each professional year?*	Effectiveness of current student achievement of the Patient Care Process at the end of each year.	10.8 Standards 2016	Faculty will rate students as being able to adequately fulfill all components of patient care process by end of P4 year.	Once	Faculty Survey from Curriculum Committee & Assessment Committee	On a 5 point likert scale (5 being best), the faculty rating for students to be able to adequately fulfill the patient care process components are: • 4.1 for Collect • 3.6 for Assess • 3.7 for Plan • 3.1 for Implement • 3.6 for Follow-up ****Current processes are in place to implement the PCP into the curriculum. The current Care Plan template and rubric have been updated and will rolled out in the Summer of 2016. Reassess PCP in 2016-2017.**

§NABPLEX & NYS Pharmacy Licensure *Have DYCSoP graduates achieved a licensure pass rate at or above the National or State average?*	Percentage of graduating students passing board examinations
	• NAPLEX
	• MPJE
	• NYS Part 3 exam
		12, 15	>state and national pass rate on 1st attempt	Every year	Dean	NAPLEX 2015 (May 1 – Aug 31)
						  DYCSoP:90.4% (1st Time), 90.6% (All)
						  State: 92.3% (1st Time), 90.9% (All)
						  National: 93.9% (1st Time), 92.3% (All)
						 MPJE 2015 (May 1 – Aug 31)
						  DYCSoP (In state): **94.1%** (1st Time), 94.3% (All)
						  DYCSoP (Out State): 90.5% (1st Time), 88% (All)
						  DYCSoP (All): **92.7%** (1st Time), **91.7%** (All)
						  State:95.3% (1st Time), 94.3% (All)
						  National: 94% (1st Time), 93% (All)
						 NYS Part 3 exam (June 2015)
						  DYCSoP: 82% (First Timers), 100% (Repeaters)
						  State:72% (First Timers), 74% (Repeaters)
						
						**Monitor another year to observe for any trends. Add to website quality indicators.

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‡Student Achievement *How many of our students are capable of successfully completing the planned curriculum in the designated time frame?*	• Percentage of students completing the PharmD program in 4 academic years • Progressing to next year in program • Number of Student on Probation – Total • Number of students remediating at least one course at the end of the academic year (total) • Number of unsuccessfully completed rotations each academic year (total)	19	• ≥95% completion rate • ≥95% of student progressing to next year • < 5% of students on probation at the end of academic year • < 10% of students remediating 1 or more courses at the end of the academic year • < 1% of rotations not completed with "satisfactory or higher grade"	Annual	Academic Performance & Office of Student Affairs	• 96.7% completion rate • 95% of student progressing to next year • 4.3% of students on probation at the end of academic year • 9.3% of students remediating 1 or more courses at the end of the academic year • 1.1% of rotations not completed with "satisfactory or higher grade" **Monitor another year to observe for any trends.**
‡Student Achievement *How many of our students are high performing?*	Percentage of students: • with program QPA ≥ 3.0 • on the Dean's list (QPA ≥3.5)	15	• ≥75% of students with QPA of 3.0 or higher • ≥10% of students on Dean's list	Annual	Academic Performance & Office of Student Affairs	• 53.2% of students with QPA of 3.0 or higher • 24.3% of students on Dean's list **Monitor another year to observe for any trends.**
§Diversity *How many non-Caucasian DYCSoP enrollees are there?*	At least 15% of enrollees will be non-Caucasian.	17	>15% of enrollees will be non-Caucasian in each class	Every year	Admissions Committee & Office of Student Affairs	• 23.6% of enrollees will be non-Caucasian in each class **Add in international student percentage**

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§Interprofessional Education *Are our graduates prepared to interact with practitioners in other health care professions?*	Percentage of graduating students who have successfully completed greater than one interprofessional education module	6,12	100% of students participate in > 1 IPE session.	Every year	IPEC representative (Butterfoss)	100% of students participate in 1 IPE session as it is required as part of the CLP course. **As this is required part of the curriculum will be changing outcome measure to better align with the 2016 standards. The current IPE survey data given before and after the required IPE session will be used to assess students on the themes of team dynamics, roles/responsibilities, and communication. Further consideration will be needed for assessment of IPE in experiential and other curricular aspects. **2015-2016 Measures will be – 1. **Individuals make every effort to understand the capabilities and contributions of other health professions (2016 STD 11.1)** 2. **Individuals need to cooperate with other health care professionals (STD 11.2)** 3. **Individuals are willing to share information with other health care professionals (STDs 11.1, 11.2 and 11.3)** 4. **Individuals must depend upon the work of people in other health professions (STD 11.3 and 3.4)**
§Assessment Portfolio *Do DYCSoP students have an assessment portfolio?*	DYCSoP will have an implementation plan for the assessment portfolio	15	100%	Every year	Portfolio ad hoc committee	Portfolio ad hoc committee has implementation plan for a portfolio for the P1 students and future students. Faculty and students are being trained Fall of 2015. **Assessment measures of the student portfolio will be designed for 2015-2016 Grid.**
Student	Professionalism survey results on student commitment to:	23	≥30% of students will actively	Annual	Assessment Committee	Based on student survey administered Spring 2015: • 62.5% of Students hold leadership roles or have

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Professionalism *How prepared are our students to serve their profession?**	• leadership • life-long learning • altruism • integrity		participate in professional organizations ≥65% of students will be members of more than one pharmacy organization ≥90% of students will participate in volunteer activities (not associated with experiential education requirements) 0 incivilities or integrity violations will be reported			service positions in professional Organizations (55.9% in 2013/14) • 77.3% of Students Affiliated with >1 Pharmacy-related Organizations or Fraternities (62.5% in 2013/14 pharmacy organization) • **71%** of student participate in volunteer activities (not associated with experiential education requirements) (**73.5%** in 2013/14) • 1 integrity violation reported: Students had access to previous versions of microbiology material - Resolved ****Continue to monitor annually for reporting purposes. Consider linking to Educational Outcome 4.4 Professionalism****
§Student Professionalism *How involved have our students become in the pharmacy profession?*	Percentage of graduating students who have attended a professional meeting	23	≥ 30% of graduating students have attended at least one national or regional professional meeting 100% of graduating students have attended at least one local professional meeting	Annual	Office of Student Affairs	100% of graduating students have attended at least one professional organization meeting as an APPE requirement. Unable to obtain if local, regional or national. ****Consider adding a supplemental question to the graduating student survey for 2015-2016, integrating meeting attendance to portfolios or tracking through experiential.****
Graduating Student Satisfaction *How well do our graduating students think we prepared them for pharmacy*	AACP graduating student survey ratings on our: • professional competencies & outcomes • curriculum (Q30-36) • experiential rotations & sites	12, 22	Ratings for each item will be at or above the average national categorical rating	Annual	Assessment Committee in Collaboration with Director of Assessment	**2015 DYC Survey Results: 24/58 respondents (41.4% RR); national average 72.07% RR** **Q10-Q30:** >75% or more agreed with Pharm.D. curriculum preparation for the listed professional competencies/outcomes. (**Nat. Ave > 93%**) **Q30-36:** Q30: 87.5% A or SA course sequence is appropriate;

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practice?	• overall program					12.5% disagree **(Nat. Ave 89.25%A or SA)** Q31: 100% A or SA the curriculum allowed them to develop skills needed to prep for continued learning after graduation **(Nat. Ave 95.3% A or SA)** Q32: 100% A or SA they were provided opportunities to engage in active learning **(Nat. Ave 96.9% A or SA)** Q33: 95.8% A or SA they were encouraged to ask questions in class; 4.2% disagree **(Nat. Ave 92% A or SA)** Q 34: 95.8% A or SA pharmacy related elective courses met Pharm. D student needs; 4.2% disagree **(Nat. Ave 86.1% A or SA)** Q 35: 100% A or SA that course loads were Reasonable **(Nat. Ave 87.4% A or SA)** Q36: 95.8% A or SA the program included opportunities to develop professional attitudes, ethics and behaviors; 4.2% disagree **(Nat. Ave 94.4% A or SA)** **IPPE and APPE Overall**: 100% A or SA the practice experiences allowed for direct interaction with diverse patient populations and to collaborate with other health care professionals.**(Nat. Ave 98.1% A or SA)** **Overall Program:** 95.8% A or SA they are prepared to enter pharmacy practice; 4.2% disagree **(Nat. Ave 94.5% A or SA)** 83.3% A or SA if they were to start their college career over again they would choose to study pharmacy; 16.7% disagree **(81.7% A or SA)** 87.5% A or SA if they were starting pharmacy program over again to choose same college/school; 12.5% disagree **(Nat. Ave 79.8% A or SA)**

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						87.5% A or SA to recommend a career in pharmacy to a friend or relative; 12.5% disagree (**Nat. Ave 78% A or SA**) ****Continue to monitor and link to the internal student survey to observe trends.**
Graduate Employment *How many of our students are formally continuing their education after graduation?*	Percentage of graduating students who have been accepted into residency or fellowship programs	15, 16	≥10% of all graduating students ≥25% of students who applied	Annual	Office of Student Affairs	• 17.7% of all graduating students of class of 2015 accepted to residencies (11 of 62) • 57.8% of students applied matched (11 of 19) – National average was 64% ****Continue to track. Committee discussed that is most important to ensure that students who applied for residencies are on par with National average for obtaining residencies.**
Alumni Satisfaction *How well do our graduating students think we prepared them for pharmacy practice?*	AACP Alumni survey ratings on our: • professional competencies & outcomes • curriculum • experiential rotations & sites overall program	12, 22	Ratings for each item will be at or above the average national categorical rating	Annual	Assessment Committee in Collaboration with Director of Assessment	Response: 2 All Data concerning students were all "Agree" with exception of: Information about additional education opportunities (1 Agree/ 1 Disagree) Pharmacy related electives met needs (1 Agree/ 1 Disagree) ****Cannot interpret results. Suggest to leadership that a social media network be implemented for maintaining contact with students post-graduation. Send memo to leadership 12/8/15 with recommendation.**
Faculty Satisfaction *"How do our faculty's*	AACP faculty survey ratings on our: • administrative system • recruitment and retention • faculty development	3	Ratings for each item will be at or above the average national categorical rating	Annual	Assessment Committee in Collaboration with Director of	Question below national average: Administrative system – 1, 2, 3, 6, 10 Recruitment & retention – 11, 12, 13, 15, 16, 17, 18, 19

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experiences differ from those at other schools of pharmacy?"	• curriculum, teaching & assessment				Assessment	Faculty development – 33, 35, 37 Curriculum, teaching, & assessment – 39, 49, 50, 51 These results had a few themes including effectiveness of college/school governance and administration, faculty performance feedback and expectations, and available computer resources. **Leadership is aware and conducted focus groups and is implementing a plan to improve survey results. Thus far:** • **Q10 - the faculty meeting structure has been changed and is lead by a pro-temp faculty that is voted by the faculty** • **Q2, Q6 – The college administrators have changed with a new Dean and Assistant Dean, nonetheless, Leadership is conducting a 360 leadership survey development evaluation by Dr. Beth Bradley** • **Q35 – Non-practice faculty are invited to attend practice site visits through experiential, if interested.**
Faculty Development *Does faculty have adequate financial support to promote their professional development?*	•Percent faculty attendance at professional meetings •Percent faculty holding membership in professional societies •Percent requests approved for miscellaneous developmental resources	26	>80% of faculty will have attended at least one professional meeting 100% of faculty will hold membership in at least one professional society >90% of faculty will indicate agree/strongly agree on Q34 of annual faculty survey	Last 2014-2015 Every two years	Department Chairs	Per Annual report 82.6% (19/23) of faculty attended at least one professional meeting. Unable to obtain if faculty holds membership in a professional society. Q34 – 92.6% SA/A **Monitor in 2 years and create a plan to obtain all data**

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§Faculty/Staff Service Projects Have DYCSoP faculty/staff provided any service projects?	Faculty and staff will participate in at least one service project annually	23	100% of faculty/staff with be involved in a service project	Every year	Department Chairs	Unable to obtain data ***Recommend more clear definition of service project and monitor by department chairs**
‡Teaching Effectiveness	Student evaluations of: • overall effectiveness • availability • fairness • clarity of presentation	11	≥75% of SOP faculty will score at or above the college's "middle 60%" for these categories	Annual	Leadership Team	****MUST BE MONITORED BY LEADERSHIP** ***Archive as no leadership determined are assessing teaching effectiveness through other methods**
Teaching Effectiveness *"How frequently do our faculty receive regular feedback regarding their teaching skills?"*	Teaching evaluations completed by department chairpersons and peers	11	100% of faculty will be evaluated at least once each year by their department chairperson and one peer	Last 2014-2015 Every two years	Faculty Development Committee	Unable to obtain data **** Keep on 2015-2015 Assessment grid as unable to obtain data this year. Suggest to leadership that Chairs do evaluate faculty every year with documentation. Consider revising measure to align with AAUP contract and compliance.**
§Research Collaborations *Has DYCSoP developed any collaborations with community research and/or practice partners?*	The SOP will have developed and maintained: • Collaborative research and grant awards with community partners including universities and hospitals • Interdisciplinary research and grant awards • Service based research	3.2, 6, 6.2	# of research collaborations # of grants awarded # of grants resubmitted At least 2.5% growth rate every year	Every year	Research Committee	• 15 research collaborations • 7 grants in preparation or submitted, 2 of grants awarded, 6 of grants resubmitted ****Do not have growth rate as new measure for 2014-2015.**

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	and grant awards					
*§Research Progress *How are we advancing the pharmacy profession?*	Research project, publications, posters, presentations for students and faculty	3.2, 6, 6.2	Faculty # of research projects # of publications # of posters presented # of professional presentations Students # of research projects # of publications # of posters presented # of professional presentations At least 2.5% growth rate every year	Every year	Research Committee	Faculty (data from research committee report) • 26 of research projects (range 1-12 per faculty) • 14 journal article publications (range 1-3 per faculty) • 1 book publication # of posters presented • 10 of professional presentations in preparation, submitted or accepted (range 1-2 pre faculty) Students (data from research committee survey to faculty, interviewed by summer research intern) 16 of research projects 5 student on publications 8 of posters presented # of professional presentations was not able to be obtained **Student data was difficult to assess, recommending to research committee to determine a more consistent and concise way to obtain data. On the faculty research committee survey did determine that faculty are interested in having students involved in research, will share with research committee and recommended sharing with SPRA and SCCP.**
§Drug Information Center Service *Does the DYCSoP Drug Information Center provide service to the college or professional community?*	The Drug Information Center will be providing service to the college and the professional community.	3, 3.2	At least a 2.5% growth rate per year	Every year	Director of DIC	Source Document: 1 - Service Plan Complete with Digital Signage 2 - A DI Database listing Formal and Informal DI Questions **Archive as measured via leadership**

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Principle: Cimino						
Experiential						
Preceptor Satisfaction *"How do our preceptor's experiences differ from those who precept for other schools of pharmacy?"*	AACP preceptor survey ratings on our: • communication • curriculum • resources & support	3	Ratings for each item will be at or above the average national categorical rating	Annual	Assessment Committee in Collaboration with Director of Assessment	**AACP Preceptor Survey (2015)** **Communication**: Scored at or above the average national categorical rating in 1/7 questions **Curriculum**: Scored at or above the average national categorical rating in 0/18 questions **Resources & support**: Scored at or above the average national categorical rating in 0/6 questions ****Did not meet target set in all three categories** • **The EE office/committee has reviewed preceptor focus group data (from April 2015) and developed a plan to address concerns.** • **The EE office/committee will plan to hold another focus group in May 2016.** ****Monitor for one more year as we transition to assessing surveys using ratios, than consider every 2 years to allow time for changes to be implemented and reflected in the survey.**
Are work processes efficient and timely?	Student survey responses Student focus group Faculty focus group	14	70% of students will agree that the process for attaching student work is efficient 70% of faculty will agree that the process for reviewing student work is efficient 70% of students and preceptors will agree that they are given adequate advance notice of placements	Annually	Office of EE	Targets related to the processes for attaching student work could not be assessed using the available data. **Focus Group Data (April 2015) – Qualitative data** • All Non-faculty preceptors **agreed** that communications concerning student placements were timely and effective • >1 faculty preceptor comments stated that "they **did not** agree that communications concerning student placements were timely and effective"

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						• >1 faculty and non-faculty preceptor comments expressed some dissatisfaction with the student placements • >1 student comments expressed dissatisfaction on site placements ****Based on the qualitative nature of the data, we cannot assess if we met our set target.** • **The plan is to continue to implement the recommendations made from the focus group** • **The EE office/committee will plan to hold another focus group in May 2016.** **Target will be reviewed and revised as needed for the 2015/2016 AY to better assess the outcome**
How well does the quality assurance process identify high-performing and poor-performing sites?	Review of student feedback on sites Review of students' authentic work	14, 28	90% of sites will be adequate or better 10% of sites will be high-performing <5% of sites will be low-performing	Annually	EE Committee	**Student survey (2015 AACP graduating student survey)** • 83.3% of students agree that the **IPPE** sites were high quality • 98.2% of students agree that the **APPE** sites were high quality **Student's rotation assessment (IPPE and APPE)** • High Performing Site Evals- 72.1% (435) • Satisfactory Performing Site Evals - 25.2% (152) • Poor Performing Site Evals - 2.65% (16) • *(Site average score of 90% or more of site related rubric questions are high performing, 70-90% are satisfactory, <70% are deemed poor performing)* **Site visits data** • High performing site – 81.2 (32/39 of sites visited) • Satisfactory performing site – 12.8% (5/39 of sites visited) • Poor performing sites – 5.1 % (2 out of 39 sites visited) • Total # of NY sites (2014/15 IPPE and 2014-15 APPE) = 180, sites visited = 39 (21.7%)

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						• *Site average score of 90% or more of site assessment rubric questions are high performing, 70-90% are satisfactory, <70% are deemed poor performing* **** Target was met but more sites need to be sampled to obtain a more robust data. Site visits are completed for all sites once every three years Continue to monitor the additional sites visited annually.**
How well are students meeting the learning objectives for IPPE and APPE?	Review of student work, preceptor evaluations	14	95% of students will meet the minimum standards of performance	Every semester	EE Committee	**IPPE and APPE final evaluations** Students meeting minimum standards of performance at end of APPEs: • By student: 96.9% (63/65) • By rotation: 345/349 Students satisfactorily completing IPPE requirements:: 100%; • By Rotation: P1(153/153) P2(150/150) P3(204/204) • All students who participated in an IPPE rotation satisfactorily completed their IPPE rotation requirements **** Target was met. Continue to monitor**
Operations						
Assessment Effectiveness *How effective are the SOP Assessment Committee's assessment efforts?*	Results/Actions from assessment girds		100% of assessment questions not meeting target have an action in place to make improvements	Annual	Assessment Committee	100% of the assessment questions have an action in place, which may include: • monitoring for one more year • sharing with appropriate group for a plan • or assessing further for more information ****Using a dashboard to track this moving forward. Archive**
Does the current curriculum demonstrate	Course review forms	10, 15	90% of the 25% of courses were completed using the	Annually	Curriculum Committee	100% of course reviews were completed

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improvements in course integration, development, organization and delivery?			course review sheet 100% of courses' credit hours aligns with the master calendar and CASI and associated DYC websites			100% of courses align with the master calendar and CASI ****Course reviews found discrepancies in credit hours compared to class hours and required changes to 4 classes. Consider in future evaluating changes made through course reviews. Archive the alignment with master calendar as addressed.**
§ Scholarships *Does DYCSoP have adequate scholarship funds?*	# of students who have received internal and/or external scholarship Amount of scholarship funds awarded annually	16,30	# students per class annually receive an internal and/or external scholarship will be at or above previous years number of awards Amount of scholarship funds awarded will be at or above previous year's award amount	Annually	Assistant Deans Office	86 total students received an internal and/or external scholarship 2014-2015 AY total scholarships awarded $472,844 ****New target continue to monitor**
Course Materials *Are students getting their course materials in a format and time that meets their learning needs?*	% of students who agree on the minimum time handouts should be posted % of students who prefer electronic vs paper format		>75% of students should agree on a minimum time faculty should post handouts >75% of students should agree on the preferred electronic vs paper format	Once	Student survey	Students surveyed in Spring 2015 reported wanting handouts electronically 1 day (10.6%), 2 days (21.8%), 3 days (25.3%) and >3 days (42%) ahead of time. Students printing materials all the time (48.8%), often (22.4%), once in a while (21.2%), and never (7.6%). ****Based on this information it was discussed to send a reminder out to faculty to please be mindful and post final student handouts at least 2 days before class. Students also requested that these should be final versions.** ****For printing, at this time there are college level changes on printing, will revisit this issue if becomes a concern again.**
§Software Needs	The faculty development	26	100%	Every	Leadership	Out of 14 surveys returned to Faculty Development

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Do DYCSoP faculty have any software needs?	committee will prepare an inventory of software "needs."			year	Team	committee from 2014-2015 survey the following were reported - Moodle training (grading), online quiz/exam software, Turningpoint/student polling system, statistic software **Faculty development days provided training of Examsoft/ExitTix systems & access databases. Faculty development will be sending out an online survey to the faculty for this year's software needs assessment.** **Continue to monitor as question 24 on the faculty survey resulted in the following:** 24. Computer resources are adequate for my academic responsibilities Our Ratios Peer Ratio 2013 2014 2015 2015 6.7 14.0 3.5 6.4
Off-Cycle Questions						
Do the IPPE experiences expose student's to contemporary practice models, ethics, expected behaviors, and direct patient care?	Student evaluation of site Student survey responses Student focus group	12.4	80% will indicate satisfactory exposure via survey	Last 2014-2015 Every 2 years	Director EE/ Asst Director	**Archived 2014-2015 as similar to question currently being assessed.**
Student Services *Does the college provide adequate support services to*	AACP student survey rating of our student services • financial aid • counseling	19	≥75% of ratings are "agree" or higher for these categories	Last 2013-2014 Every two years	Assessment Committee	**Archived 2014-2015 as will be assessed via the graduating student survey assessment**

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its pharmacy students?	• advising • IT • student organizations					
‡Student Achievement *Is our early assurance program providing us with students who are higher achievers?*	QPAs for early assurance students vs. students admitted through PharmCas	17	Average QPA at the end of the P1 and P2 years for early assurance students will be equal to or higher than average QPA for students admitted through PharmCas	Last 2013-2014 Every two years	Admissions Committee & Office of Student Affairs	****Added onto 2015-2016 Assessment Grid**
SLO: Professional Behavior and Ethics *To what extent do our students understand and accept responsibility for the care of their patients?*	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: c. Patient relationship d. Rational and ethical decisions e. Initiative and responsibility f. Sensitivity, tolerance and respect	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Last 2013-2014 Every three years	Course Coordinators	Class of 2014: 88.2% Class of 2015: 85.7% Class of 2016: 91.7% Class of 2017: 93.9%
SLO:Communication and Collaboration *To what extent are our students able to convey information so that it is received and understood?*	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: f. Counseling skills g. Professional communication h. Collaboration i. Scientific communication	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Last 2013-2014 Every three years	Course Coordinators	Class of 2014: 90.7% Class of 2015: 81.6% Class of 2016: 89.9% Class of 2017: 89.8%

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SLO:Public Health *To what extent do our students understand the system in which they practice and demonstrate willingness to work to improve the health of individuals and communities?*	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: c. Professional collaboration d. Data-driven needs assessment e. Wellness and disease prevention f. Disease prevention	10, 15	>75% on each outcome measure for P1, P2, P3 and P4 years	Last 2013-2014 Every three years	Course Coordinators	Class of 2014: 92.1% Class of 2015: 83.2% Class of 2016: 93.1% Class of 2017: 91.8%
Scientific Foundation *Do students comprehend scientific methods and understand important scientific principles in depth in order to be able to identify and solve problems related to drug therapies?*	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: g. Scientific concepts h. Scientific methods i. Care plans	10, 15	>75% on each outcome measure for P1, P2, and P3 years	Last 2012-2013 Every three years	Curriculum Committee, Course Coordinators	All 9 targets were exceeded. Two notes:* *P2 Scientific concepts (PMD702): Dr. Gettman spoke with Dr. Shapiro & formative assessments (pediatrics case and opiods-med chem assignment) were both added to help students do better on summative assessments (3 exams) *P1 Scientific methods (PMD 601) 6 students judged by Dr. Oliveri to have plagiarized writing assignment. Professional Integrity Committee informed. Plagiarism issue will be discussed in Dr. Gettman's ethics class & Dr. Hutcherson's Literature Evaluation class.
Evidence-Based Practice and Critical Thinking	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: j. Decision-making	10, 15	>75% on each outcome measure for P1, P2, and P3 years	Last 2012-2013 Every three	Curriculum Committee, Course Coordinators	11 targets were exceeded. One note:* P2 (Data-driven decisions) Dr. Gettman spoke to Dr. Heakal about his 2 biostats quizzes in PMD 708. There was need to address the issue of students not showing up to take

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Are students able to make decisions about drug therapy based on best evidence from practice or the literature, and do they possess a set of critical thinking skills that enable them to best serve the interests of their patients and communities?	k. Critical inquiry l. Use of literature m. Data-driven decisions			years		these two quizzes. Need to ↑ point value. Since P1 & P3 assessments on this are project-based there was need to incorp data-driven decision making also into quizzes in PMD 607 and PMD 810 too for better progression on this.
Patient-Centered Care and Medication Use Management *Are students prepared to take responsibility for the outcomes of drug therapy by acquiring the knowledge, skills and attitudes necessary for entry level practice?*	Scores on exams, quizzes and skills rubrics that measure abilities in the following areas: g. Care plan evaluation h. Care plan design i. Medication preparation & dispensing j. Disease management	10, 15	>75% on each outcome measure for P1, P2, and P3 years	Last 2012-2013 Every three years	Curriculum Committee, Course Coordinators	11 targets were exceeded. One note:* P3 (Medication prep & dispens) Dr. Gettman spoke to Dr. Alfonso in PMD 605 about incorp. capsule filling activity & to Dr. Chinwala in PMD 816 about incorp 'rapid review sessions' to improve progression on this & to help P3s perform better on NY State Part III exam. Rapid reviews ('boot camp') only pass/fail at this time & may need to give % grade.
§DYC Faculty Council Committees	DYCSoP faculty will have filled all of the DYC Faculty	7	100% of the positions are filled by DYCSOP faculty	Last 2013-2014	Leadership Team or	

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Do DYCSoP faculty participate in DYC governance?	Council committee places allocated to the SOP and permitted by Faculty Council bylaws.			Every two years	Faculty Council Committee Membership List	
Archived Questions & Outcomes						
Are our students performing pharmaceutical calculations proficiently, or do we need to increase the amount of exposure to provide additional experience?	Scores for calculations exams in PMD 709 Scores on calculations section of Kaplan exam Pass rate for NYS Part III licensing examination	10, 15	All students will achieve a score of ≥70% on calculations exams All students will achieve a score of ≥50% on the calculations portion of the Kaplan exam ≥85% of students will pass the NYS Part III licensing examinations (of those taking it)	2012-2013 (once)	Curriculum Committee	The Curriculum and Assessment Committees reviewed the data from the Class of 2014. In this cohort, 89.5% of students achieved ≥70% accuracy on calculations exams; 26% of students achieved a score of ≥50% on the calculations portion of the Kaplan preparatory exam; and the pass rate for the 8 students taking the NYS Part III exam thus far is 87.5%. Upon questioning students about the Kaplan exam, they reported technical problems with the exam. The Committees agreed that the results of this exam were not a reliable measure of proficiency in calculations this year. Based on a review of the data, it was decided that no changes to the curriculum are merited at this time. However, the Assessment Committee and the Curriculum Committee will continue to review this data over the next few years with a larger cohort.
‡Admission Criteria as a Predictor of Student Success	Correlation of admission criteria to academic performance in program • aggregated Admission Screening Score to program QPA	17	$r^2 \geq 0.80$	Archive after 2013-2014	Admissions Committee & Office of Student Affairs	No correlations was found when correlating "overall candidate score vs P1 GPA", "Candidate Math and Science Prerequisite GPA vs P1 GPA", "Candidate Prerequisite GPA vd P1 GPA", "Candidate Science GPA vs P1 GPA", "Candidate Math GPA vs P1 GPA", "PCAT Score vs P1 GPA" **Archive as no correlation has been found, since

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						2011
§Leadership Team Members Development Plans *Do leadership team members have development plans?*	Each member of the leadership team will have met with the dean to develop mutually agreeable goals and a personalized development plan with specific and measureable goals related to leadership.	7	100%	Every year	Leadership Team	Dean met with leadership to create plans. 2014-2015 will complete DRIVE training. **Archive 2013-2104 as leadership team reported this as completed.**
§Curriculum *Is the DYCSoP curriculum for all years of the program fully in place/ implemented?*	The curriculum for all years of the program will be fully in place and implemented.	15	100%	Every year	Curriculum Committee	Course syllabi completed. **Archive 2013-2014 as completed.**
§Full Accreditation *Has DYCSoP earned full ACPE accreditation?*	The SOP will be fully prepared for the spring 2014 full accreditation visit by the ACPE.	15	100%	???	Leadership Team	Completion of self-study document with compliance ratings for all 30 standards. **Archive 2013-2014 as completed**
§Programmatic Evaluation and Educational Assessment Plan *§Does DYCSoP have a programmatic evaluation and educational assessment plan?*	The faculty will have read, discussed, and approved a programmatic evaluation and educational assessment plan.	15	100%	Every two years	Assessment Committee	Development of plan; approval by the faculty at a faculty meeting on August 5, 2013 **Archive 2013-2014 as completed and the assessment committee functions off of the assessment girds or their plan.**
§Fundraising Plan	DYCSoP will have developed a fundraising plan.	30	100%	Every two years	Leadership Team	Funds are allocated at the college level. Unable to complete assessment.

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Does DYCSoP have a fundraising plan?						**Archive 2013-2014**
§Student Recruiting Plan *Does DYCSoP have a recruiting plan that addresses diversity?*	DYCSoP will have in place a recruiting plan that specifies the desired composition of students in the 2013 class.	17	100%	Every two years	Leadership Team	Recruiting plan created and implemented # early assurance students enrolled Class of 2014: 0% Class of 2015: 4.4% Class of 2016: 17.3% Class of 2017: 33.7% # in-state and out-of-state students enrolled (Fill in measures developed by Admission Cmttee) **Archive 2013-2014 as recruiting plan in place**
§Recruiting Fairs/Visits *How many college recruiting fairs has DYCSoP attended?*	DYCSoP will have attended 35 or more college recruiting fairs/visits.	17	100%	Every year	Leadership Team	Attended 40+ recruiting fairs **Archive 2013-2014 as recruiting plan in place**
§# Photocopies *Has DYCSoP reduced its volume of photocopies?*	Reduce number of photocopies by 20%.	30	100%	Every two years	Leadership Team	Unable to attain baseline data or number of copies. **Archive 2013-2014 as new copiers in place.**
§Recycle Bins *Is paper recycling a part of the DYCSoP culture?*	Recycle bins will be in every office suite and common area and paper recycling will be part of the culture of the SOP.	3	100%	Every year	Leadership Team	Week of 01/12/15 to 01/016/15 there is a comingled recycling of paper, cans, aluminum, glass campus wide; will occur every on QTue and QThurs. Comingled means all recyclable material in one bin that an outside company takes and sorts through. Will be made known to all DYC faculty, staff and students through DL Manager

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						**Archive as recycling plan in place at college level
§Faculty Directories *Are faculty directories installed and up-to-date?*	Faculty directories will be installed and updated.	5	100%	Every two years	Leadership Team	Received recent update 11/25/14 of all DYCSOP email addresses; also received in 11/14 update of directory with phone # and e-mails ****Archive 2013-2014**
§Departmental Research Plans *Does each DYCSoP department have a research plan?*	Each department will have developed a research plan with clear goals and objectives.	3	100%	Every two years	Department Chairs	
§Database of Research Collaborations *Does DYCSop have a database of research collaborations?*	We will have created a database/list of research collaborations.	6	100%	Every year	Associate Dean of Research	Associate Dean of Research created database of research collaborations. ****Archive 2013-2014 as completed, but continue to monitor growth of research collaborations.**
§Drug Information Center Operational *Does DYCSoP have an operational Drug Information Center?*	The Drug Information Center will be operational	3	100%	Every year	Director of DIC	Furnishings ordered and in place ****Archive 2013-2014**
How clear and concise is the stated purpose of	Students, faculty, and preceptors will be able to create a list of tasks performed	14	70% will include 2 of these: • Preceptor directed • Authentic assignments	Every 3 yrs	Office of EE	Purpose needs to be a part of IPPE and APPE orientation; students do not understand the role of experiential office

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the Experiential Education Office?	by the Office at a focus group meeting.		• Student-centered • Reflective • Progressive mastery of learning outcomes			**** Archive 2013-2014 as orientation is now in place for p1-p3 students**
How well does the office plan and execute programs and actions to address the future roles of pharmacists?	Faculty and preceptors will provide suggestions for future programs and actions at a focus group meeting.	14	Faculty and preceptors will generate two suggestions for the future	Annually	Office of EE	Each faculty preceptor was asked to provide 2 suggestions for the future to be taken into consideration by the Office of Experiential Education. Mike MacEvoy is working with PharmAcademic to improve communication; changes made in software to reduce number of e-mail messages ****Archive 2013-2014 as completed and measure does not align with the question.**
Is staffing adequate to meet the needs of students, faculty, preceptors, and other stakeholders	Review of benchmark data Unmet needs	14, 28	DYC will be staffed at a level that compares to 85% of comparable institutions Experiential education cmttee, Dir EE, Asst Dir EE will list unmet needs	Every 3 yrs	Office of EE	With the addition of two additional positions (4 total) DYC Experiential office staffing is comparable to other schools of pharmacy ****Archive 2013-2014 as office is fully staffed**
§Measurement of Student's Independent Thinking *Has DYCSoP measure student's independent thinking?*	DYCSoP Assessment Committee will have developed a plan and outcomes for measuring independent thinking for our students.	15	100%	Every year	Assessment Committee	****Archive 2013-2014 as will become part of CAPE assessment**
§Student Service Projects Have DYCSoP student organizations	Student organizations will develop and complete at least one service project annually.	3,23	100%	Every year	Office of Student Affairs	Each organization has completed at least one service project as this is a requirement to be an SA approved DYC organization. 100/136 (74%) students survey in P1-P3 class

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provided any service projects?						volunteered ****Archive 2013-2014 as all organizations must do a service project.**
§Faculty Development Plans *Do faculty have development plans?*	Each faculty member will have met with their department chair to develop mutually agreeable goals and a personalized development plan that will provide a clear path to promotion.	26	100% of faculty have an individualized development plan that was created in collaboration with their chair	Every year	Department Chairs	Practice Dept Chair reported 100% ****Archive 2013-2014 and as this is required annually.**

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