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I. Preamble

The purpose of these policies and procedures is to assist in the orderly conduct of the professional and graduate affairs of the Auburn University Harrison School of Pharmacy; to facilitate the performance of faculty duties and obligations. The intent is to supplement, not replace, the Auburn University Policies and Procedures where specific to the operation of the School of Pharmacy programs.

II. Organization

A. Name

The name of the organization will be the Harrison School of Pharmacy, Auburn University, hereafter referred to as HSOP.

B. Strategic Plan

“CARING IS THE CORE OF OUR CURRICULUM”

VISION STATEMENT

Auburn University’s Harrison School of Pharmacy is the State of Alabama’s only public institution charged to educate pharmacists in the treatment of human illnesses that focuses on the appropriate use of drug therapy. This responsibility also extends to educating other health care providers and the lay public in this area. In addition, the Harrison School of Pharmacy provides graduate education programs which focus on the creation of basic and applied knowledge in pharmaceutical sciences and in the delivery of patient care that ensures optimal medication outcomes.

Auburn University Harrison School of Pharmacy will provide a collaborative educational experience in which both student and faculty learning occurs. The educational program and experiences of students will be grounded in service-based, primary care focused, community practice that is collaborative with other health disciplines. Caring for others is a central theme for all endeavors within this academic community. Graduates will enter practice with the personal character, confidence, and competence to assume leadership positions in their communities and their pharmaceutical care practices. The School’s faculty will serve as educational innovators and advisors to help practitioners address the changing demands of health care.
Auburn University Harrison School of Pharmacy will provide leadership in the state of Alabama among health care providers and other stakeholders to advance pharmaceutical care for individual patients and populations of patients. The School will partner with pharmacists, other health care providers and health care organizations to improve the delivery of pharmaceutical care and patient outcomes through the continuous re-engineering of pharmacist training, practices, environments and systems.

Auburn University Harrison School of Pharmacy will serve as a catalyst for creative ideas for solving health-related problems in society, specifically through research in pharmacy. The School will engage in research which includes: pharmacology/toxicology; health outcomes and practice based research and; educational research. The School will foster economic development within the State through partnering with biotechnology and traditional pharmaceutical companies and assistance in attracting pharmaceutical industry to Alabama.
MISSION STATEMENT

The Harrison School of Pharmacy was established to serve the broad interests of the citizens of the State of Alabama which now extend into the global community.

The School pursues its mission in the Land Grant tradition through:

Teaching and learning, which prepares a diverse student body to be competent pharmacists and scientists who are able to provide and improve primary health care to Alabama's citizens by:

1. Collaborating with other health professionals to ensure optimal medication therapy outcomes;
2. Influencing the development of public health policy related to drug treatment;
3. Promoting wellness and assisting in improved access to cost effective, primary care;
4. Participating in health care research;
5. Engaging in specialized and general education throughout their professional careers;
6. Contributing to the professional education of students who are future health care providers.

Research that enhances the health and quality of life of Alabama's citizens by:

1. Participating in the development of new drugs;
2. Improving the use of existing drugs;
3. Creating innovative services and products;
4. Designing and evaluating the delivery of pharmaceutical care;
5. Improving the outcomes of pharmaceutical education;
6. Re-engineering pharmaceutical care delivery systems.

Outreach to Alabama's citizens, health care providers, businesses, industries and agencies by:

1. Delivering patient care that ensures optimal medication therapy outcomes;
2. Offering continuous professional development opportunities for current health care providers;
3. Disseminating medical information and results of research;
4. Applying knowledge and technologies;
5. Influencing public health policy regarding delivery of optimal medication outcomes.

The Harrison School of Pharmacy has a unique leadership responsibility: to enhance the education of health professionals; to inform the public about pharmacists and pharmaceutical care; to collaborate in solving health problems in Alabama communities; and to enhance the State’s economic development.
The educational philosophy is consistent with the HSOP’s Mission and Vision Statements and its strategic plan. The curriculum is consistent with the School’s educational philosophy, including its commitment to learner-centered instruction and mentoring processes which facilitate the development of professionalism, caring, and lifelong learning among our student pharmacists.

Faculty and Staff

The faculty and staff of the Harrison School of Pharmacy are members of a collegial, learning community dedicated to educating pharmacists who will (1) confidently embrace the responsibilities of a professional pharmacy general practitioner, (2) advance the profession of pharmacy, (3) be dedicated citizens and leaders in their respective communities, and (4) display the attitudes, behaviors and characteristics of role models. To achieve these four outcomes, the faculty collectively own and are responsible for the curriculum. Individual faculty members are entrusted as stewards over specific sections of that the curriculum. In essence, the pharmacy curriculum (established ability-based outcomes, specific content, desired skills and behaviors, instructional approach, evaluation and assessment) is the property of all pharmacy faculty members and single courses are led by individuals or groups of faculty members under the direction of the faculty as a whole through a critical, collegial, and consensual process. The staff plays a central role in supporting and integrating the work of the learning community.

Mentoring and learner-centered teaching incorporate innovative methods to integrate knowledge with current practices and foster creative ideas for individual and collective future pharmacy practice. Ample formative practice time enables student pharmacists to achieve a minimum level of competency in the outcome expectations.

The faculty and staff are expected to demonstrate through their teaching, practice, research and professional lives the highest standards of integrity, personal accountability, and professionalism. They exude a passion for the pharmacy profession and have high expectations of their students. Respect and caring for the individual student, patient, colleague or other person, guide their daily interactions.

Student Pharmacists

The HSOP student pharmacists are expected to enter the School with high expectations of self and the profession and demonstrate a commitment to developing life-long learning habits; the skills, abilities and knowledge required for a competent pharmacy practice, and; internalized behaviors and attitudes necessary for contemporary and future pharmacy practice. Respect and caring for the individual student, patient, colleague or any person, guide their daily interactions.
GOAL I

To create a culture within the School that promotes a sense of community and instills a life-long commitment to professional values and competencies.

1. **Develop longitudinal programs designed to enhance the emphasis on professional values, attitudes, behaviors, and ethics of all members of HSOP.**

   **Action Steps(s):**
   1.a. HSOP will utilize the professional coaching and evaluation program to enhance the professionalism of student pharmacists. **Target Date:** 2007-13. **Responsible Person(s):** Director OEL; Chair, Professional Education Committee (PEC); Director, Office of Teaching, Learning and Assessment (OTLA); Chair, Committee for Academic Requirements and Professionalism (CARP) (Associate Dean for Academic & Student Affairs) **Assessment Procedure and Administration:** Evaluation data will be collected by OTLA. **Planned Usage and Assessment Findings:** Data collected will be utilized by faculty and PEC to improve the outcomes of the coaching program.

   1.b Enhance educational experiences for students, faculty and staff designed to develop cultural competence and health literacy as it applies to pharmacy practice within the professional program for purposes of improving patient care. **Target Date:** October 2007-12. **Responsible Person(s):** Chair, Professional Education committee; Director, OTLA **Assessment Procedure and Administration:** N/A **Planned Usage of Assessment Findings:** N/A

   1.c. Increase faculty, student pharmacists and graduate student membership representing cultural diversity within the organization through employment and admission practices. Women and men representing diversity will be present in all aspects of HSOP’s student body, departments and administration. **Target Date:** 2007-12. **Responsible Person(s):** Dean; Associate Dean for Academic Affairs; Department Heads; Director of Student Recruitment **Assessment Procedure and Administration:** N/A **Planned Usage of Assessment Findings:** N/A

   1.d. Initiate student portfolios which stimulate formative development and provide a vehicle for summative assessment and artifact storage that could be used throughout the students’ careers beyond graduation. **Target Date:** August 1, 2012. **Responsible Persons(s):** Chair, PEC; Chair, Ad Hoc Committee for Development of Faculty/Student Pharmacist Portfolio **Assessment Procedure and Administration:** N/A **Planned Usage of Assessment Findings:** N/A

GOAL II

To continue improvement of the Doctor of Pharmacy program offered at AUHSOP. Throughout this program, students will provide patient care in the community with other health care providers and integrate education, research and outreach.

1. **Continue refinement of the Doctor of Pharmacy program which was last revised in 2005.**

   **Action Step(s):**

   1.a. Enhance faculty competence with School’s pedagogy (learner-centered instruction) in support of the professional curriculum. **Target Date:** 2008-15. **Responsible Person(s):** Director, OTLA (Associate Dean, Academic and Student Affairs; Department Heads; PEC Steering). **Assessment Procedure and Administration:** CQI course review. **Planned Use of Assessment Findings:** Directed assistance to individual faculty and course improvement.

   1.b. Improve quality test writing/assessment methods to increase congruence and align with specific learning objectives (content, skills, attitudes) that are linked to established ability based outcomes. **Target Date:** 2012-13. **Responsible Person(s):** Department Heads (Director, OTLA; Associate Dean Academic and Student Affairs) **Assessment Procedure and Administration:** CQI course review. **Planned Use of Assessment Findings:** Directed assistance to faculty and course improvement.
1.c. Maintain continuous curriculum mapping allowing more extensive evaluation of content/instructional and evaluation methods by all stakeholders (practitioners and employers) to further improve quality of the educational program. **Target Date:** 2008-12. **Responsible Person(s):** Chair, PEC (Director, OTLA; Associate Dean Academic and Student Affairs; Department Heads) **Assessment Procedure and Administration:** CQI course review. **Planned Use of Assessment Findings:** Directed assistance to faculty and course improvement.

1.d. Institute the use of “curriculum content teams” to assist the faculty in aligning and adjusting curricular content with entry level ability based outcomes established by the program to encourage life-long learning. **Target Date:** October 2011-13. **Responsible Person(s):** Associate Dean for Academic and Student Affairs (PEC; Department Heads) **Assessment Procedure and Administration:** N/A **Planned Usage of Assessment Findings:** N/A

1.e. Institute learner-centered learning approaches in all courses in years 1 & 2 of the curriculum. Incorporate more problem-solving materials for all students. **Target Date:** 2007-15 **Responsible Person(s):** Associate Dean for Academic and Student Affairs (PEC Chair; Department Heads; OTLA). **Assessment Procedure and Administration:** Course review results. **Planned Usage and Assessment Findings:** N/A

1.f. Increase the number of qualified preceptors in the state who will accept student pharmacists in a variety of practice environments. **Target Date:** October 2008-12. **Responsible Person(s):** Director, OEL; (Department Head, Pharmacy Practice). **Assessment Procedure and Administration:** N/A **Planned Usage of Assessment Findings:** N/A

1.g. Institute learner-centered learning approaches in all courses in years 1 & 2 of the curriculum. Incorporate more problem-solving materials for all students. **Target Date:** 2010-15. **Responsible Person(s):** Associate Dean for Academic and Student Affairs (Chair, PEC; Director, OTLA; Department Heads; Dean) **Assessment Procedure and Administration:** N/A **Planned Usage of Assessment Findings:** N/A

1.h. Enhance the availability of diverse patient care experiences in IPE, IPPE and APPE, including international experiences during APPE. **Target Date:** 2011-15 **Responsible Person(s):** Director of Experiential Learning (Dean; Associate Dean for Academic and Student Affairs; Department Heads) **Assessment Procedure and Administration:** N/A **Planned Usage of Assessment Findings:** N/A

1.i. Expand space for teaching laboratories and provide OSCE facilities to meet the instructional and assessment needs of the professional program. **Target Date:** 2011-12 **Responsible Person(s):** Dean **Assessment Procedure and Administration:** N/A **Planned Usage of Assessment Findings:** N/A

FY 2012 Budget Request

Sources:
- General Fund $600,000

1.j. Improve the consistency among IPPE mentors so that all student pharmacists are mentored appropriately including promoting participation in organizations and assuming proactive leadership roles. Approaches to off-site mentoring should be investigated which will improve relationships between coaches and assigned student pharmacists. **Target Date:** October 2011-13. **Responsible Person(s):** Director, OEL (Director, OTLA). **Assessment Procedure and Administration:** An annual evaluation designed to assess the impact of the program will be conducted by the Director of OTLA. **Planned Usage and Assessment Findings:** Results will be utilized to provide feedback to the faculty through the Professional Education Committee with the purpose of improving the program. The data will be distributed to respective Department Heads for use in merit evaluations and faculty workload assignments.

1.k. Assess student workload as it relates to the impact on students quality of life and professional engagement. **Target Date:** October 2011-13. **Responsible Person(s):** Chair, PEC (Associate Dean for Academic and Student Affairs; Department Heads). **Assessment Procedure and Administration:** Learn Team Reports; IPPE Coach Reports; CQI Course Review; Curricular Mapping. **Planned Usage of Assessment Findings:** CQI for Curriculum.

1.l. Investigate the applicability of delivering course content within the curriculum using technology; thereby enabling more learner-centered learning in face-to-face class meetings. **Target Date:** October 2011-13. **Responsible Persons:** Chair, PEC; (Associate Dean Academic and Student Affairs; Director, OTLA; Department Heads) **Assessment Procedure and Administration:** N/A **Planned Usage of Assessment Findings:** The information will be submitted from the Professional Education Committee and to the faculty for discussion and planning for implementation.
2. Increase the operations budget for the Harrison School of Pharmacy to levels of comparable benchmark schools.

*Benchmark* – The funding goal for FY 11 was $25,866 per student per year (calculated as of 2/16/11). Currently, the funding from university general fund appropriation and professional fees projection is $22,742 per student for FY 11. Comparative southern schools of pharmacy’s intramural funding level for FY10 was $15,068,489 compared to $13,050,522 for Auburn. FY 11 comparative data is not yet available.

**Action Step(s):**

2.a. As approved as a goal by the Board of Trustees in April 2001, provide funding goal for the School at $20,000 per student per year (2001 dollars = $25,866 in FY 11). **Target Date:** October 2001-15.  
**Responsible Person(s):** Dean  
**Assessment Procedure and Administration:** N/A  
**Planned Usage of Assessment Findings:** N/A  
**FY 2013 Budget Request**  
**Sources:**  
General Fund $2,000,000

2.b. Generate revenue from outreach, extramurally-funded scholarly activities and community services to supplement the School’s budget and enhance faculty salaries. **Target Date:** October 2008-15.  
**Responsible Person(s):** Dean; Assistant Dean for Health Services; Associate Dean for Research and Graduate Programs; Department Heads  
**Assessment Procedure and Administration:** N/A  
**Planned Usage of Assessment Findings:** N/A

3. Increase the use of distance-based communication to facilitate delivery of the professional curriculum.

**Action Step(s):**

3.a. Explore additional ways to utilize existing technology in delivering the professional curriculum. **Target Date:** 2008-12. **Responsible Person(s):** Chair, OIT Advisory Committee (Director of IT; Dean)  
**Assessment Procedure and Administration:** Faculty and staff who utilize the technologies will continually provide feedback to the Director of IT and the OIT Advisory Committee regarding challenges and potential improvements. **Planned Usage of Assessment Findings:** Anecdotal information gathered from users will be used to determine the improvement of the technology.

3.b. Upgrade and/or replace existing technology necessary for the professional curriculum. **Target Date:** 2011-15. **Responsible Person(s):** Chair, OIT Advisory Committee; (Director of IT; Dean).  
**Assessment Procedure and Administration:** N/A  
**Planned Usage of Assessment Findings:** N/A  
**FY 2013 Budget Request**  
**Sources:**  
General Fund (replace video conferencing equipment, install CMA) $1,000,000

4. Increase professional student on-time graduation.

**Action Step(s):**

4.a. Maintain ongoing interventions implemented to improve student retention and improve those activities based on assessment with the goal of 90% on-time graduation of all professional students. **Target Date:** 2007-15. **Responsible Person(s):** Chair, Committee for Academic Requirements and Professionalism (CARP) (Associate Dean for Academic and Student Affairs)  
**Assessment Procedure and Administration:** Attrition numbers will be assessed and evaluated for potential impact of plan. **Planned Usage and Assessment Findings:** Data will be used to further improve assistance to students with academic difficulty.
5. Assess (and if necessary, adjust) staffing for student supported activities.

Action Steps:
5. a. Assess need for additional staffing in support of student service functions. Target Dates: 2011-12. Responsible Person(s): Associate Dean for Academic and Student Affairs. Assessment Procedure and Administration: N/A. Planned Usage and Assessment Findings: N/A.

Preamble to Goal III: Research programs are essential for the development of new knowledge that generates solutions to health care problems. Perpetuation of these programs is tied to extramural funding in the following areas: elucidating the molecular and cellular mechanisms of disease pathology; exploring therapeutic and toxic mechanisms of action of drugs and chemicals; discovering and developing significant new drugs; translational research focused on driving important new drugs to clinical applications; developing dosage forms for new and existing conditions for human and veterinary application; improving the clinical use of existing drugs; discovering and applying solutions to improving delivery of health care, especially pharmaceutical care; and improving the outcomes of pharmaceutical education. This includes technology to insure the rapid, accurate and affordable distribution of drug therapy and skills and processes to assist patients in better managing their illnesses and treatments to produce better health outcomes.

GOAL III
To enhance the research programs by increasing extramural support from public and private sectors.

1. Build HSOP’s extramural funding to the level of comparative pharmacy schools in the region.

   Benchmark - In FY 10, the average extramural funding from grants, contracts and special projects of selected Southern Colleges/Schools of Pharmacy was $9.9 million (as compared to AUHSOP with $296,000). [AACP data public Southern Colleges/Schools of Pharmacy (KY, FL, TN, NC, VA, GA).]

Action Step(s):
1. a. Build modern state of the art research facilities to support the current and expanded research mission. Estimated space required is 100,000 GSF. Target Date: 2007-13. Responsible Persons: Dean (Associate Dean for Research; Director of Development). Assessment Procedure and Administration: None. Planned Usage and Assessment Findings: N/A.

   2013 Budget Request
   Source(s):
   Division I $18 million
   Gifts $12 million
   Total $30 million

1. b. Establish a critical nucleus of pharmaceutical sciences research faculty and infrastructure necessary to engage in a meaningful and targeted research program. The goal to achieve a critical nucleus includes a total 25 FTE in Pharmacal Sciences and 8 FTE in Pharmacy Care Systems. Workload adjustments, improved facilities and research equipment are needed. Target Date: October 2007-15. Responsible Person(s): Department Heads for Pharmacal Sciences and Pharmacy Care Systems; Associate Dean for Research; Dean. Assessment Procedure and Administration: Determine the increased productivity of faculty resultant to increasing research manpower. Planned Usage and Assessment Findings: Utilize faculty activity reports to determine increased productivity.

   2013 Budget Request
   Source(s):
   General Fund
   Research Faculty 2 FTE + Fringe $200,000
   Startup Funding $600,000
   Core Equipment $500,000
   Total $1,300,000
1.c. Achieve extramural funding goal by increasing number of submissions for extramural funding per FTE
Target Date: October 2011-15. Responsible Person(s): Department Heads (Dean; Associate Dean for Research and Graduate Programs) Assessment Procedure and Administration: The type and number of submitted and funded proposals are reported yearly. Faculty efforts in pursuing, obtaining and completing extramurally-funded projects are monitored by the faculty evaluation process (MBO). Planned Usage and Assessment Findings: Assessment will assist in identifying faculty and areas with greatest funding potential and will enable the promotion of these selected research programs. This information is a portion of the faculty evaluation process.

2. Enhance faculty research opportunities.

Action Step(s):
2.a. Increase visibility and availability of faculty members to produce and participate in scholarly and creative work through sustained numbers of grant submissions, publications, presentations and consultations. Target Date: October 2008-15. Responsible Person(s): Department Heads (Dean; Associate Dean for Research and Graduate Programs) Assessment Procedure and Administration: Record of peer-reviewed publications, presentations at national and international meetings, and participation on review panels and advisory boards. Planned Usage and Assessment Findings: Guide faculty development and support to enhance their success.

Preamble to Goal IV: A strong graduate program is essential to develop future researchers who focus on solving challenges with the health care of the world’s citizens. Synergy between graduate education and research is palpable; faculty are not successful as researchers without outstanding graduates students. Our graduates are critical resources for the pharmaceutical industry and pharmacy education and a major component necessary for the economic development within the State.

GOAL IV

To enhance graduate and post-graduate education.

1. Build a graduate/post graduate program comparable with benchmark institutions.

Action Step(s):
1.a. Determine which of the following graduate programs are feasible and initiate those possibilities: PharmD/PhD, PharmD/MBA/MPH, combined residency/MS/PhD program, non-thesis Master’s degree program, and graduate certificate programs. Consider partnering with other universities to offer the Pharm.D./MPH/MBA option. The use of distance learning in an asynchronous format must be explored. Target Date: 2007-15. Responsible Person(s): Associate Dean for Research; Associate Dean for Academic and Student Affairs (Department Heads; Dean). Assessment Procedure and Administration: N/A Planned Usage and Assessment Findings: N/A

1.b. Increase the number of graduate students to forty (40). Target Date: 2008-15. Responsible Persons: Department Heads for Pharmacal Sciences and Pharmacy Care Systems (Dean; Associate Dean for Research and Graduate Programs) Assessment Procedure and Administration: N/A Planned Usage and Assessment Findings: N/A

FY 2013 Budget Request Sources:
- General Fund $125,000
- Extramural Funding $125,000

1.c. Market HSOP graduate programs to student pharmacists in the program and to students in other University programs, i.e., Honors College. Target Date: October 2008-15, Continuous goal. Responsible Person(s): Director of Student Recruitment; (Department Heads; Associate Dean for Research) Assessment Procedure and Administration: The Department Heads will track individuals targeted through program inquiries and applications. Planned Usage and Assessment Findings: Data will be utilized to improve future recruitment efforts, i.e., special problems.
1.d. Fund post-graduate clinical research fellowships in support of HSOP’s ongoing clinical research programs.  **Target Date:** October 2007-15.  **Responsible Person(s):** Department Heads for Pharmacy Practice and Pharmacy Care Systems (Dean; Associate Dean for Research and Graduate Programs)  
**Assessment Procedure and Administration:** N/A  **Planned Usage and Assessment Findings:** N/A  
**FY 2013 Budget Request**  
**Sources:**  
General Fund $63,000  
Extramural Funding  

1.e. Alter the curricula of the graduate programs in pharmaceutical sciences to include course offerings consistent with the goals and desired outcomes of the graduate programs; improve course scheduling; develop and implement a grant writing requirement.  **Target Date:** 2011-15.  **Responsible Person(s):** Department Heads for Pharmacal Sciences and Pharmacy Care Systems  
**Assessment Procedure and Administration:** N/A  **Planned Usage and Assessment Findings:** N/A

**Preamble to Goal V:** An assessment plan is in place for the purpose of assessing all aspects of the curriculum and student achievement of outcomes and operations. Data collected through assessment will be utilized for curricular improvement and development, student progress, improvement of faculty instruction and operations. (Assessment of the overall professional degree program is school-wide with all three departments participating; therefore the Harrison School of Pharmacy departments do not have separate assessment plans. Ability-based outcomes and assessment plans are available upon request.)

**GOAL V**

To improve all aspects of Harrison School of Pharmacy through a continuous quality assessment program.

1. **Maintain a continuous quality improvement program focused on improving the professional curriculum and instruction.**

**Action Step(s):**

1.a. Improve the presentation and timeliness of the assessment data to improve CQI processes.  **Target Date:** May 2012.  **Responsible Person(s):** Director OTLA (OTLA Advisory Committee; Associate Dean for Academic and Student Affairs)  
**Assessment Procedure and Administration:** Annual report from OTLA.  
**Usage and Assessment Findings:** Data will be utilized by PEC and faculty.

1.b. Engage the student body in an effort to increase participation in assessment surveys.  **Target Date:** 2011 -15.  **Responsible Person(s):** Director, OTLA (Director OIT; Associate Dean for Academic and Student Affairs; Dean).  
**Assessment Procedure and Administration:** N/A  
**Usage and Assessment Findings:** Results will be utilized to plan for necessary infrastructure and manpower resources.

1.c. Assess the effectiveness of the existing progression and remediation programs and make necessary improvements.  **Target Date:** 2013.  **Responsible Person(s):** Director, OTLA (Associate Dean for Academic and Student Affairs)  
**Assessment Procedure and Administration:** Annual report from OTLA.  
**Usage and Assessment Findings:** Results will be utilized to modify the existing programs.

2. **Improve the quality of the graduate education programs.**

**Action Step(s):**

2.a. Establish programmatic outcome measures to be used in determining quality and improvement of graduate programs.  **Target Dates:** 2009-13.  **Responsible Person(s):** Associate Dean for Research and Graduate Programs (Department Heads; Director, OTLA)  
**Assessment Procedure and Administration:** Annual report.  
**Planned Usage and Assessment Findings:** Results will be utilized to modify existing program.

2.b. Establish and implement continuous quality improvement (CQI) plans for the graduate programs.  **Target Dates:** 2009-13.  **Responsible Person(s):** Associate Dean for Research and Graduate Programs (Department Heads; Director, OTLA)  
**Assessment Procedure and Administration:** Annual report.  
**Planned Usage and Assessment Findings:** Results will be utilized to modify existing program.
3. Design how effectiveness of research efforts will be measured.

Action Steps:
3.a. Identify appropriate outcomes measures for scholarly efforts (Discovery, Integration, Application, Instruction, Outreach). **Target Dates:** 2009-13. **Responsible Person(s):** Department Heads (Associate Dean for Research and Graduate Programs; Strategic Planning Committee; Director, OTLA.). **Assessment Procedure and Administration:** Annual report. **Planned Usage and Assessment Findings:** Results will be utilized to modify existing program.

**Preamble to Goal VI:** Adjusting to the current health care environment requires pharmacy educators to provide care models and education in a community setting. The School must establish practice settings in which patient care, education and research can be accomplished.

**GOAL VI**

To improve patient access to cost-effective, primary care in Alabama communities by delivering pharmaceutical care, promoting wellness, educating citizens about pharmaceutical care and pharmacist responsibilities in healthcare and partnering with managed healthcare organizations.

1. **Provide primary care services for citizens of Alabama supported by the HSOP faculty, students and staff.**

   **Action Step(s):**
   1.a. Identify opportunities and appropriate venues in the community to provide pharmaceutical services to target populations. **Target Date:** October 2007-15. **Responsible Person(s):** Assistant Dean for Health Services; Department Head Pharmacy Practice (Dean) **Assessment Procedure and Administration:** AUPCC and Department of Pharmacy Practice will identify health care needs in rural and local health care areas and develop plans to meet the health care needs. Reports will be developed. **Planned Usage and Assessment Findings:** Annual report will be utilized to redirect these efforts.
   1.b. Obtain extramural funding for conducting research and developing projects that assess effectiveness and economic feasibility of pharmaceutical care provision and to help healthcare organizations increase Alabama citizens’ access to pharmaceutical care. **Target Date:** October 2007-13. **Responsible Person(s):** Department Heads for Pharmacy Practice and Pharmacy Care Systems; Assistant Dean for Health Services (Associate Dean for Research and Graduate Programs) **Assessment Procedure and Administration:** Current efforts will be evaluated regarding impact. **Planned Usage and Assessment Findings:** Data will be utilized to redirect efforts in the coming year.
   1.c. Develop reimbursement mechanisms for pharmaceutical care for the population served by pharmacists. **Target Date:** October 2007-11. **Responsible Person(s):** Assistant Dean for Health Services; (Dean; Department Heads for Pharmacy Practice and Pharmacy Care Systems) **Assessment Procedure and Administration:** Annual progress report will be submitted. **Planned Usage and Assessment Findings:** Data will be utilized to redirect efforts in the coming year.

2. **Stimulate the development of Post Graduate Years 1 and 2 (PGYI & PGYII) Residency Programs.**

   **Action Step(s):**
   2.a. Faculty will promote the development of PGYI & PGYII residencies at respective practice sites in Alabama. HSOP will stimulate establishment of new residency programs by providing initial financial support for periods not to exceed one year. **Target Date:** 2007-15. **Responsible Person(s):** Department Head for Pharmacy Practice (Dean). **Assessment Procedure and Administration:** Annual Report. **Planned Usage and Assessment of Findings:** Data will be utilized to redirect efforts in the coming year.

**FY 2013 Budget Request**
Sources:
General Fund $80,000
Extramural Funding $80,000

2. b. Increase the number of graduates who pursue post-graduate residencies to exceed 30% by increasing the visibility of pharmacy residency opportunities throughout the professional program and the dialogue with faculty coaches. **Target Date:** October 2007-13. **Responsible Person(s):** Department Head Pharmacy Practice  
**Assessment Procedure and Administration:** Success rates will be assessed and evaluated for potential impact of plan. **Planned Usage and Assessment Findings:** Data will be used to further improve the percentage of graduates entering residencies.

**GOAL VII**

To enhance faculty recruitment and retention.

1. **Develop initiatives to support faculty in delivering instruction within the professional and graduate programs.**
   
   **Action Step(s):**
   1.a. Encourage faculty members to participate in sabbaticals and workshops that will enhance their research, professional development and funding viability. **Target Date:** October 2007-15 (a continuous activity) **Responsible Person(s):** Department Heads; Associate Dean for Research and Graduate Programs (Dean). **Assessment Procedure and Administration:** Each year, attendance of faculty at workshops is recorded in annual reports. **Planned Usage and Assessment Findings:** Data collected will be used to direct efforts at increasing faculty participation in faculty development.
   1.b. Initiate a formal faculty mentoring program in each department. **Target Date:** October 2011-13, **Responsible Person(s):** Department Heads **Assessment Procedure and Administration:** N/A **Planned Usage and Assessment Findings:** N/A
   1.c. Initiate formative faculty portfolio which would assist in development and evaluation. **Target Date:** October 2011-13. **Responsible Person(s):** Department Heads (Dean) **Assessment Procedure and Administration:** N/A **Planned Usage and Assessment Findings:** N/A
   1.d. Formalize peer-review teaching processes to be utilized in faculty development and promotion procedures. **Target Date:** October 2011-13 (a continuous activity) **Responsible Person(s):** Department Heads (Director, OTLA). **Assessment Procedure and Administration:** N/A **Planned Usage and Assessment Findings:** N/A

2. **Increase faculty compensation through professional service and salary supplementation plans.**
   
   **Action Step(s):**
   2.a. Develop a professional practice plan or 501(c)(3) designed for salary supplementation for presentation to the Provost. **Target Date:** 2007-13. **Responsible Person(s):** Department Head, Pharmacy Practice; Assistant Dean for Health Services; Dean. **Assessment Procedure and Administration:** N/A **Planned Usage and Assessment Findings:** N/A
   2.b. Implement a Scholarship Incentive Plan based on salary savings generated from extramural funding. **Target Date:** 2011-12. **Responsible Person(s):** Associate Dean for Research and Graduate Programs; Dean; Department Heads **Assessment Procedure and Administration:** N/A **Planned Usage and Assessment Findings:** N/A

**GOAL VIII**

To establish a partnership with pharmacist practitioners in the State to strengthen their ownership in the School's vision, mission, and programs and to encourage their assistance in addressing the School's needs.

1. **Communicate the School’s vision, mission, and programs to alumni, students, health professional associations and public officials.**
**Action Step(s):**

1.a. HSOP will enhance its presence through published materials, the internet and social media. **Target Date:** October 2007-13. **Responsible Person(s):** HSOP Communicator (Director of Development and Alumni Affairs; Dean). **Assessment Procedure and Administration:** This is a continuous effort. An annual progress report will be submitted. **Planned Usage and Assessment Findings:** Publication plan will be updated.

1.b. Make public assessment reports regarding outcomes of professional education program. **Target Date:** October 2008-12. **Responsible Person(s):** Director, OTLA; Associate Dean for Academic and Student Affairs (Dean) **Assessment Procedure and Administration:** This is a continuous effort. An annual progress report will be submitted. **Planned Usage and Assessment Findings:** N/A

1.c HSOP will develop an abbreviated mission statement (slogan) intended to be easier to remember. **Target Date:** October 2012. **Responsible Person(s):** Dean **Assessment Procedure and Administration:** N/A **Planned usage and Assessment Findings:** N/A

**GOAL IX**

Expand post graduate educational offerings to assist competent pharmacist learners in maintaining and enhancing the skills and knowledge necessary to provide exceptional pharmaceutical care.

1. **Provide a continuing education program that supports life-long learning.**

   **Action Step(s):**
   
   1.a. The use of self-directed learning as an educational methodology for continuing professional development will be phased in as the audience accepts and demands this approach. The use of distance learning methodology will be increased. **Target Date:** 2007-13. **Responsible Person(s):** Chair, PEC; (Director, OTLA; Associate Dean for Academic and Student Affairs) **Assessment Procedure and Administration:** Market demand analysis will be conducted periodically during this period to determine viability. An annual report will be provided. **Planned Usage and Assessment Findings:** Information will enable us to determine where to focus our continuing education efforts.

2. **Engage in periodic assessment of practitioners’ needs and relate it to professional continuing education programming.**

   **Action Step(s):**
   
   2.a. The Office of Post-graduate Education will develop and administer questionnaires or other assessment methods every three years to determine how well the HSOP is assisting practitioners with their continuing education, certification and practice requirements. **Target Date:** October 2012. **Responsible Person(s):** Associate Dean for Academic and Student Affairs; Director, OTLA **Assessment Procedure and Administration:** Redesign the current continuing education assessment document to determine client preferences and measure satisfaction with current offerings. **Planned Usage and Assessment Findings:** Information will be used to determine programming for each three year period following completion of the questionnaire or alternative assessment method.

**GOAL X**

To address the pharmacy manpower issues in Alabama.

1. **Development of MS educated professional to provide assistance to the pharmacists and pharmacy operations.**

   **Action Step(s):**
   
   1.a. Design and implement a Masters program to meet the needs of the practice community. **Target Date:** 2012 **Responsible Person(s):** Chair, Task Force on Pharmacy Support Personnel (Associate Dean for Academic and Student Affairs; Associate Dean for Research and Graduate Programs; Dean; Department Heads) **Assessment Procedure and Administration:** N/A **Planned Usage and Assessment Findings:** N/A
B. Covenant

A COVENANT BETWEEN STUDENTS AND FACULTY OF THE HARRISON SCHOOL OF PHARMACY

Pledge

Faculty

☐ We pledge our best effort to ensure a high quality educational program for our students.
☐ As mentors, we will maintain high professional standards in our interactions with students, our colleagues, and staff.
☐ We respect all students regardless of gender, race, national origin, religion, or sexual orientation; we will not tolerate anyone who disrespects students because of biased attitudes or beliefs and will take appropriate actions against such individuals.
☐ We pledge to be cognizant when students are having personal or academic problems and seek appropriate resources to provide help.
☐ In encouraging and nurturing the intellectual, personal, and professional growth of our students, we celebrate expressions of professional attitudes and behaviors, as well as academic achievement.
☐ We do not tolerate any abuse or exploitation of our students (or faculty).
☐ We encourage any student who experiences mistreatment or who witnesses mistreatment or unprofessional behavior to report the facts (preferably in writing) immediately to appropriate faculty or staff; we treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind.

Students

☐ We pledge our utmost effort to acquire the knowledge, skills, attitudes, and behaviors required to fulfill all educational objectives established by the faculty AND our obligations to patients.
☐ We hold the professional virtues of honesty, compassion, integrity, fidelity, and dependability as standards to conduct in a profession.
☐ We respect all faculty members, staff, and fellow students regardless of gender, race, national origin, religion, or sexual orientation; we will not tolerate anyone who disrespects faculty, students, or staff because of biased attitudes or beliefs and will take appropriate actions against such individuals.
☐ We pledge to conduct ourselves as professionals, demonstrating respect for faculty, colleagues, and staff.
☐ In meeting our professional obligations, we pledge to assist our fellow students in meeting their professional obligations as well.

* Adapted from, Cohen, JJ. Our compact with tomorrow’s doctors. Academic Medicine. 77;6: 475-480.
C. Management Philosophy

The Harrison School of Pharmacy conducts all business with the philosophy that input from everyone is important. While the Dean has the responsibility for making many final decisions, the input of the executive committee, department heads, faculty, staff and students is sought prior to a decision being made. The HSOP uses L4 meetings where faculty report to their respective administrators how they are meeting the needs of their stakeholders, i.e., students, patients, peers and department heads and in return the Department Heads report down to the faculty members regarding meeting the needs of their stakeholders. Administrators and faculty feel free to express what they are doing to decrease the gap between what they want to be doing and what is actually occurring without fear of a punitive response.

All administrators, faculty and staff regard each other as people and are responsive to each other’s needs. Regarding someone as a person, means that they are an individual with cares, concerns, wants, needs, desires, passions, strengths and weaknesses, which are just as valid and important as your own. This produces a workplace atmosphere that is less adversarial, more cooperative and collegial, and more trusting.
D. HSOP Organizational Chart
F. Diversity Plan

Note: The Harrison School of Pharmacy’s strategic planning process operates on a School-wide basis. The School’s Doctor of Pharmacy Program is an interdepartmental program operating across all 3 departments and its Ph.D. program is interdepartmental across 2 of the 3 departments. Given its structure, the School does not believe that the provision of individual departmental diversity plans provides additional benefit from a strategic planning process.

Goal 1: Foster a total campus environment that respects differences among individuals and encourages inclusiveness

The Harrison School of Pharmacy (HSOP) strives to be an inclusive community within the limits of appropriate professional standards, including the recruitment and retention of a diverse population of faculty and staff members, as well as student pharmacists. Our goal is to influence our student pharmacists to develop as professionals; a key component of this is the development of a commitment to provide patient care to diverse populations. The HSOP continues to pursue this goal on an ongoing basis.

Goal 2: Increase the recruitment, retention, and representation of people of color, ethnic minorities, women, people with disabilities, and other underrepresented students, faculty, administrators, and staff at Auburn University to a level that reflects the appropriate relevant pool of availability for the target population.

Strategy 1: Senior Administrative Levels, Department Heads and Chair: Seek to include all University constituencies including people of color, ethnic minorities, women, and members of other underrepresented groups in positions of President, Vice President, Dean, Provost, Assistant Provost, Department Head, and or/Chair, Directors of Programs and other non-academic departments.

Accomplishment: A woman was recently hired Head of the Pharmacal Sciences Department.

Tactic 1: Develop and implement requirements of a diverse search committee by including an individual trained to ensure an inclusive process in job searches, and ensure minorities are represented on search committees.

The HSOP appoints search committees to with the goal of achieving inclusive representation among the stakeholder groups relevant to each position being hired. The Dean’s administrative assistant serves as a member of, or administrative liaison to, all HSOP search Committees. She is trained to assure that all searches are conducted in compliance with EOE practices, including appropriate advertising in publications likely to attract minority applications.

Strategy 2: Faculty Retention: Increase the retention of women, people of color, ethnic minorities, people with disabilities, and other underrepresented groups in our faculty.

The HSOP strategies focus on success and retention of all faculty members, including a focus on specific individual needs. The HSOP operates a Faculty College, which is one of the School’s components to assist faculty members in their development. This is an ongoing commitment of the School.
Strategy 3: Student Retention: Increase the graduation rates of students of color, ethnic minority students, women, students with disabilities, and other underrepresented groups to the same level as non-minority students who enter the university with comparable preparation.

The HSOP addresses this in the context of its programs to enhance retention of all students. Programs include supplemental instruction, mentoring by faculty, and special plans of study developed by the School’s Committee on Academic Requirements and Professionalism. The School evaluates the outcomes of these programs on a continuous basis, making changes and improvements based on our findings.

Strategy 4: Faculty Recruitment: Increase the recruitment of women, people of color, ethnic minorities, and other underrepresented groups to faculty positions.

Accomplishment: A woman from an underrepresented minority group was recently hired to a faculty position in the Department of Pharmacal Sciences.

The HSOP continues to seek such applicants using search strategies described above. Shortages of qualified applicants in the various pharmaceutical disciplines often limit the number of potential applicants from diverse populations.

For faculty members in the discipline of pharmacy practice men, rather than women, can now be considered as an underrepresented group. Currently filled non-administrative faculty positions in the Department of Pharmacy Practice include 23 women and 6 men.

Strategy 5: Student Recruitment: Increase the recruitment, retention, and thus representation of people of color, ethnic minorities, women and other underrepresented students.

The HSOP makes ongoing efforts to recruit professional and graduate students from diverse groups. This includes recruitment events on campuses of Historically Black Colleges and Universities (HBCUs). A memorandum of understanding (MOU) has been signed with Tennessee State University but, to date, this has not resulted in enrollment of students from this institution. A similar MOU is currently being explored with Alcorn State University.

As stated in its Strategic Plan, the HSOP goal for minority student enrollment is 15% of its total student body. Enrollment data for Fall Semester 2008 indicated that 7.3% of the student body was from underrepresented minorities.

The HSOP plans to intensify its recruitment efforts on HBCU campuses, including schools in Atlanta (Spellman, Morehouse, and Clark Atlanta), Tennessee State University, and Alcorn State University. Georgia State University has a very diverse undergraduate student population and is being actively recruited.

Over the past few years, the HSOP has enrolled a significant number of students from regions outside the SE United States, which adds a significant diversity to our student body. The HSOP continues to seek and enroll qualified students from throughout the United States.
Men can now be considered as an underrepresented population for professional students in schools of pharmacy, and they represent only 35% of our student body.

**Strategy 6: Staff Recruitment and Retention: Seek to increase employee diversity, including women, people of color, ethnic minorities, and other underrepresented groups.**

**Tactic 1: Increase the recruitment of people of color, ethnic minorities, women, and other underrepresented groups in higher level staff positions.**

Accomplishment: During the past 2 years, the HSOP has hired two African American women to staff positions.

The HSOP continues to actively seek diversity in hiring individuals to staff positions, subject to the limitations imposed by AU’s current HR practices.

**Goal 3: Develop and implement a comprehensive system of education and training focused on effectively managing and leveraging diversity for students, faculty, and staff.**

**Strategy 2: Conduct diversity training, specific to a college campus environment for students, faculty, and staff.**

Accomplishment: The HSOP operates according to Arbinger Institute’s Way of Working (WOW) principles, which focuses on viewing all HSOP members as people with specific characteristics and needs. Most faculty and staff members have been trained in Arbinger principles, as are all entering students during their mandatory orientation. The HSOP continuously works to structure its organizational culture around Arbinger principles.

**Tactic 1: Implement a mandatory all employees plan with direct reports to include diversity, sensitivity, and affirmative action/equal employment opportunity.**

Accomplishment: All HSOP employees with supervisory responsibilities have completed the “Just Be Fair” training.

**Goal 4: Build and strengthen partnerships with diverse communities, businesses, and civic and community organizations to support diversity and multiculturalism in the university and in external communities.**

Accomplishments: The HSOP is involved in providing patient care to a variety of diverse populations including:

- Community-based patients in the Auburn-Opelika and Mobile-Baldwin County communities
- HIV Clinics in Mobile, Montgomery and Opelika
- Moundville Medical Clinic (underserved, rural community)
- Good Samaritan Clinic in Tuscaloosa (serving people of color and ethnic minorities)
• Central Alabama Veteran’s Administration Health Care System in Tuskegee (serving people of color and ethnic minorities)

The above practices serve as educational sites for our student pharmacists, providing them with patient care experiences in diverse populations.

The HSOP is currently exploring interprofessional educational/patient care opportunities in Northern and Southwest Alabama that will be offered in partnership with other health professions programs. These patient care and educational experiences will primarily impact underserved patient populations.

**Goal 5: Develop and execute a comprehensive Diversity Communications Plan.**

As the HSOP’s publications and communications are revised and updated, particular attention will be given to assure that they promote and market the School’s diversity as well as the School’s commitment to diversity as a core value.

### III. Reference to Auburn University Faculty Handbook & Employment and Benefits

#### A. Academic Freedom

[http://www.auburn.edu/academic/provost/facultyHandbook/chapter%203-personnel_policies.html#secthreeone](http://www.auburn.edu/academic/provost/facultyHandbook/chapter%203-personnel_policies.html#secthreeone)

#### B. Promotion and Tenure Policies and Procedures

The criteria and considerations for promotion and tenure can be found in the Auburn University Faculty Handbook ([http://www.auburn.edu/academic/provost/facultyHandbook/](http://www.auburn.edu/academic/provost/facultyHandbook/)). Examples of activities that may be considered in decisions for HSOP faculty are found in Tables 1-3.
Table 1
Examples of Instructional Activities That May Be Considered For Evaluation of Promotion and Tenure

<table>
<thead>
<tr>
<th>Teaching</th>
<th>Sources of evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Teaching regular course offerings</td>
<td>• Student evaluations of teaching</td>
</tr>
<tr>
<td>• Developing course material</td>
<td>• Peer evaluations</td>
</tr>
<tr>
<td>• Developing new courses/labs</td>
<td>• Self-evaluation</td>
</tr>
<tr>
<td>• Coordinating a team taught course</td>
<td>• Department head assessment</td>
</tr>
<tr>
<td>• Teaching in a team taught course</td>
<td>• Adoption of curricular or teaching material by other institutions.</td>
</tr>
<tr>
<td>• Clinical teaching/independent studies/tutorials</td>
<td>• Special honors or recognition for teaching excellence or innovation</td>
</tr>
<tr>
<td>• Supervising independent study/undergraduate, graduate or clinical research</td>
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<tr>
<td>• Implementing innovative technology for instruction</td>
<td></td>
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<tr>
<td>• Developing and applying educational innovations in the classroom</td>
<td></td>
</tr>
<tr>
<td>• Providing meaningful feed to students on their work</td>
<td></td>
</tr>
</tbody>
</table>

Advising

- Advising professional or graduate students on programs of study
- Advising student groups
- Serving on master’s or doctoral committees
- Advising/mentoring graduate students
- Advising/mentoring fellows/residents
- Advising in clinical training programs
- Advising about career planning
### Table 2
Examples of Research/Scholarship Activities That May Be Considered For Evaluation of Promotion and Tenure

<table>
<thead>
<tr>
<th>Scholarly/Research Activities</th>
<th>Sources of Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Books</td>
<td>- Faculty review committee</td>
</tr>
<tr>
<td>- Book chapters</td>
<td>- External peer reviews of activities</td>
</tr>
<tr>
<td>- Refereed journal articles</td>
<td>- Self evaluation</td>
</tr>
<tr>
<td>- Monographs, technical reports, etc</td>
<td>- Department/unit head assessment</td>
</tr>
<tr>
<td>- Reviews</td>
<td>- Agencies supporting the activity</td>
</tr>
<tr>
<td>- Abstracts</td>
<td>- Collaborators</td>
</tr>
<tr>
<td>- Non-referred publications</td>
<td>- Awards/honors</td>
</tr>
<tr>
<td>- Citation counts</td>
<td>- Achieving advanced degree/certifications, etc.</td>
</tr>
<tr>
<td>- Invited presentations/seminars</td>
<td>- Special recognitions for professional accomplishments</td>
</tr>
<tr>
<td>- Contributed presentations</td>
<td></td>
</tr>
<tr>
<td>- Poster presentations</td>
<td></td>
</tr>
<tr>
<td>- Producing deliverable systems</td>
<td></td>
</tr>
<tr>
<td>- Patents</td>
<td></td>
</tr>
<tr>
<td>- Editing of books</td>
<td></td>
</tr>
<tr>
<td>- Editing of journals</td>
<td></td>
</tr>
</tbody>
</table>

**Ongoing research**

- Basic investigations (theoretical/applied) in progress
- Clinical research in progress
- Investigations of educationally related problems
- Obtaining extramural support for projects, especially peer-reviewed
- Patents and technology transfer
- Grants, contracts
Table 3
Examples of Service/Outreach Activities That May Be Considered For Evaluation of Promotion and Tenure

<table>
<thead>
<tr>
<th>Faculty Service</th>
<th>Sources of Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Serving on department, school and/or university committees</td>
<td>• Faculty review committee</td>
</tr>
<tr>
<td>• Serving in the Faculty Senate</td>
<td>• External peer reviews</td>
</tr>
<tr>
<td>• Chairing any committee (student, faculty, etc.)</td>
<td>• Self-evaluation</td>
</tr>
<tr>
<td>• Serving as a sponsor for student activities and/or groups</td>
<td>• Department/unit head assessment</td>
</tr>
<tr>
<td>• Administrative assignments</td>
<td>• Faculty and staff colleagues</td>
</tr>
<tr>
<td>• Mentoring other faculty</td>
<td>• Awards and recognitions</td>
</tr>
<tr>
<td>• Serving as a sponsor for student activities and/or groups</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Professional Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Activity in professional organizations</td>
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<tr>
<td>• Consulting to organizations/corporations</td>
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<tr>
<td>• Providing clinical care</td>
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<td>• Editing of journals</td>
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<td>• Organization of conferences and symposia</td>
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<tr>
<td>• Serving on committees for federal and state government agencies or on boards</td>
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<tr>
<td>• Public or Community Service/Outreach</td>
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<tr>
<td>• Participating in local, state, or national civic activities and organizations</td>
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<tr>
<td>• Applying one's academic expertise in the local, state, or national community</td>
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C. Scholarship Definitions

D. Intellectual Property
   http://www.ott.auburn.edu/IP-FAQ.htm#WhatIsIP

E. Appointment – Section 3.3
   https://sites.auburn.edu/admin/universitypolicies/Policies/AuburnUniversityFacultyHandbookPolicies.pdf

F. Grievances - Section 1.2, Article 6
   https://sites.auburn.edu/admin/universitypolicies/Policies/AuburnUniversityFacultyHandbookPolicies.pdf

G. Leave
   http://www.auburn.edu/administration/human_resources/manual/sect05.htm

IV. Administration

A. Dean
   The dean is the chief administrative and academic officer for HSOP and reports to the Provost. The dean does have
direct access to the university president and other university officials delegated with final responsibility for the school. The dean bears final responsibility for the conduct of all programs of pharmacy professional education and practice, including research, scholarly activities, and service carried out by faculty and staff in the respective college or school. The dean is responsible for ensuring:
   • representation on behalf of HSOP to all constituencies
   • development, articulation, and implementation of the vision, mission and goals
   • acceptance of the vision, mission and goals by the stakeholders
   • development, implementation, evaluation, and enhancement of the educational, research, service, and pharmacy practice programs
   • development and progress of the strategic plan and the evaluation plan, including assessment of outcomes
   • recruitment, development, and retention of competent faculty and staff
   • initiation, implementation, and management of programs for the recruitment
   • establishment and implementation of standards for academic performance and progression
   • resource acquisition and mission-based allocation
   • continuous enhancement of the visibility of the college or school on campus and to external stakeholders
   • compliance with ACPE’s accreditation standards, policies, and procedures.

B. Associate/Assistant Deans
   These shall be administrative officers appointed by the Dean. Associate and Assistant Deans all serve at the discretion of the Dean. All appointments of Associate and Assistant Deans will be
conducted according to University Guidelines. The Associate and Assistant Deans of the School, at present, include the Associate Dean for Academic and Student Affairs, Associate Dean for Research and Graduate Programs and Assistant Dean for Health Services. The performance of each Associate and Assistant Dean shall be reviewed yearly by the Dean with input from the faculty, staff, and any committee(s) especially appointed for administrative review. All Associate and Assistant Deans shall be reviewed according to current University policy.

**Associate Dean for Academic and Student Affairs** serves as the CEO and school representative in the absence of the Dean. The Associate Dean also serves as an advisor to the Dean on matters related to academic affairs, admissions, student affairs and is responsible for implementation of the professional curriculum, curriculum outcomes assessment, and accreditation activities. This individual also is responsible for promoting uniform faculty instructional approach. This Associate Dean is specifically responsible for: recruitment; application and admission processing; college-based financial aid and awards selection and processing; handling individuals with chemical impairment, illness, or other circumstances that interfere with normal academic progression and professional development; registration of pharmacy students; classroom scheduling; student advisement and professional development; communicating policies and procedures to student organizations; communicating and enforcing university and school policies that impact student life; preparation of reports to AACP on student enrollment and progression; and, coordination and implementation of college events such as Orientation, Open House, Parents and Family Day, Professional Coating Ceremony, and Commencement Ceremonies. In the area of academic affairs the Associate Dean has the following responsibilities: *ex-officio* to the school professionalism, post graduate education, and admissions and academic requirements committees; representative to the university curriculum committee; assists in the coordination of regular and final examinations; academic performance monitoring and processing of petitions; development and maintenance of policies; new course number processing and approval; summaries of instructor and course evaluations; monitors student performance on NAPLEX and MPJE; assists in handling academic dishonesty cases; communication of policies and procedures affecting academic standards to students and faculty; and serves on the university’s academic affairs committee.

**Associate Dean for Research and Graduate Programs** is responsible for the promotion, coordination, and improvement of research activities within the school, as well as assists departmental graduate coordinators and graduate educators in recruiting new graduate students. This individual also serves as chair of the school’s Graduate Studies Committee, advisor to the Graduate Student Council and graduate student ombudsman. This person coordinates all research and graduate education matters and serves as the liaison between the School of Pharmacy and the University’s Office for Sponsored Research and the Graduate School.

**Assistant Dean and Associate Department Head Pharmacy Practice for Mobile Campus** has the responsibility of assisting in implementing and managing a synchronous program for Pharm.D. students located on the Mobile campus; assisting in the development of clinical education sites in the Mobile region; management of daily operations including collaborative relationships with University of South Alabama; and management of student affairs. This individual also has a reporting responsibility to the Department Head for Pharmacy Practice and is charged with assisting with faculty recruitment for the satellite campus, and addressing faculty retention and development of those located in Mobile.

**Assistant Dean for Health Services** has the responsibility of providing oversight and direction for the development, implementation, operation, and monitoring of all patient care services programs provided by HSOP. This individual represents HSOP in all efforts to establish services. In addition, this administrator will be responsible for clinical, humanistic, and economic
outcomes evaluation of all services. He/she works with contracting entities to improve medical benefits to improve patient care outcomes; decrease overall cost of health care; and when appropriate intervene on behalf of the contractor with third party insurers.

C. Department Heads

The Department shall be the fundamental academic and administrative organization unit within the school. The three departments of the school are:

- Pharmacal Sciences
- Pharmacy Care Systems
- Pharmacy Practice

As with Associate/Assistant Deans, Department Heads serve at the pleasure of the Dean. All appointments of Department Head will be conducted according to University Guidelines. The performance of each Department Head shall be reviewed yearly by the Dean according to current University policy.

The Department Head serves as senior faculty member and administrator of the academic department. At the departmental level, this person is responsible for faculty recruitment and development, instructional program development and quality, coordination of research and service programs, evaluation of personnel, workload assignments and coordination of budgets. As a member of the executive team the Department Head is responsible for the following: ensuring bi-directional communication with his/her respective departments regarding discussions, decisions, and policies undertaken by the Executive Committee that affect the Department and School; supporting the programmatic directions undertaken by the School, including those initiated collectively by the Executive Committee; providing constructive input and feedback to the Dean regarding overall administration issues; participate in faculty assignment to school and university committees.

D. Center Directors

Centers and Institutes are established and abolished according to specific funding and program needs. The Auburn University policies governing the establishment and review of Centers require evaluation every 5 years. New Centers will be established only after college wide discussions on the specific research mission of the Center.

The administrative officers of these Centers are Directors. Directors are responsible to the Dean of the College with all educational, research, service and fiscal matters related to the center. Center Directors are responsible to their Department Chairs for academic and educational activities.

The purpose of Centers is to attract external funding to enhance multidisciplinary teaching, research, and service. The Directors will be involved in fund raising to support the research missions of the specific center through training and program project grants. The Director also represents the center to federal, state and private funding agencies. Center Directors are responsible for the fiscal operations of Centers and fulfillment of their designated research mission. Center Directors are responsible to their Department Chair and the Dean for their annual evaluation of academic activities.
E. Directors
Directors are responsible for managing cross-department programs involving multiple faculty in collaborative efforts. These individuals operate service/education administration offices which are part of an organizational matrix. Individual faculty members serving as Directors report to an academic department.

Director of Office of Experiential Learning reports to the Department Head for Pharmacy Practice. This person directs and is responsible for all activities within the school’s Office of Experiential Learning. The Office of Experiential Programs is responsible for the recruitment, maintenance, and evaluation of experiential training sites, advisement of students on rotation selection and procedures, scheduling of experiential rotations. This office is also involved with the recruitment of external clinical faculty and with their training. The office works closely with the Alabama Board of Pharmacy in helping students comply with licensing requirements. This individual is the overall course coordinator for all experiential courses in professional degree program, supervises the Director of Introductory Experiential Programs, and other staff of the OEL, and serves as the point person for experiential coursework as related to other courses in the curriculum. This individual is responsible for the supervision of the content and delivery of all preceptor and student training regarding experiential education courses. This individual acts as an advisor to the Committee on Academic Requirements & Professionalism (CARP) and other committees, departments, or organizations which make decisions regarding student pharmacist behaviors/problems while in experiential education courses. The Director of the Office of Experiential Learning has responsibilities in the Experiential Program through the following activities: registration of student pharmacists in advanced pharmacy practice experience coursework (APPE’s); handling petitions for changes in APPE’s; communicating policies and procedures and coordinating the collection and organization of pre-clinical requirements for introductory pharmacy practice experiences (IPPE’s) and APPE’s; and, assisting students who encounter difficulty in meeting standards for IPPE’s and APPE’s.

F. Administrative Services
Accounting supports the administration of HSOP fiscal resources. This office manages budgeting, payroll, accounting, purchasing, contracts, payables processing, receivables processing, banking relations and investments, accounting and financial statement preparation for the office of the dean and academic departments. Individual research accounts generated by extramural funding are managed by academic departments in which the researcher is appointed. Administrative Assistant to the Dean serves as an information resource and point of accountability to the University in the areas of academic and nonacademic personnel, and property control. This individual directly supports the areas of space utilization, construction and renovation, building maintenance. The position provides administrative support for the executive committee and is responsible for special projects which engage all departments and administration.

G. Office of Academic and Student Affairs
The Office of Academic and Student Affairs is responsible for all aspects of academic and student life for the School of Pharmacy. The office is responsible for processing applications for
admission, facilitating the work of the admissions committee, recruitment of prospective students, academic advising and counseling services. It is also responsible for supporting the work of faculty committees addressing academic requirements and professionalism. All functions within this office respond to the Associate Dean for Academic and Student Affairs.

The Office of Post-Graduate Education is responsible for the Harrison School of Pharmacy's continuing professional education programs including the Non-Traditional Doctor of Pharmacy Program. The Office is under the direction of the Associate Dean for Academic and Student Affairs and interfaces with the Professional Education Committee - Subcommittee 4, which is responsible for the development of educational offerings.

H. Office of Teaching, Learning and Assessment

OTLA is responsible for the comprehensive assessment of all of the School’s academic programs. It is staffed by a Director, Scholar in Residence and support staff. In addition, OTLA is responsible for coordinating cross discipline and integrated coursework (i.e. Integrated Pharmacotherapy) and supervising course facilitators. OTLA provides both intensive and extensive faculty development and assist faculty in developing personal teaching and assessment skills.

I. Director of Development and Alumni Affairs

The Development and Alumni Affairs Office, under the direction of the Director of Development, in consultation with the Dean, develops private gift fund-raising objectives for the college, oversees all college fund-raising activities including major gifts, planned gifts and annual gifts. The Development Office acts as a liaison between the School and Auburn University Foundation. The Director also manages the alumni activities and provides staff support for the School’s Dean’s Advisory Council.

J. Office of Information Technology

The Office of Information Technology provides services to all School academic and administrative departments and offices related to computerization, implementation of upgrades to the resource base of hardware and software, maintenance of the resource base, trouble shooting of operational problems with hardware and software, software design and implementation, and information and instructional technology training for faculty, staff and students. It has additional responsibilities for Web development, Internet resources maintenance and support, LAN development and control, distance learning technology development and support, in-house print and electronic publications, photographic and video services, server implementation, and maintenance and development of resources to maintain the School’s investment in state of the art technology. The Director of the Office of Information Technology serves as a resource to the School faculty and staff regarding software design, strategic planning for future Information Technology (IT) needs, curriculum implementation and support related to IT, and server maintenance and design issues. The Director reports to the Dean.

V. Space Policy

The Dean is responsible for ensuring that School facilities are utilized and allocated in a balance that ensures a quality curriculum and provides an optimum learning, research and work environment for students, faculty, and staff. While the facilities as a whole are the responsibility of the Dean, blocks are allocated to departments to be utilized and assigned as needed.
VI. Staff

Operationally the School functions with the assistance of a professional and support staff-extender model. Staff members are a valued component of the organization, and are expected to perform their responsibilities under limited supervision. Each department conducts periodic staff meetings and school-wide meetings are held with the Dean monthly. Staff members are also included in departmental meetings, and are invited to attend faculty meetings. Basic human resource issues are covered by the University Policies and Procedures Manual at both the Staff and Admin/Professional level.

VII. Operational Policies for School

A. Academic and Student Affairs

*Note: The policies below supersede AU Student Policy eHandbook policies.*

http://www.auburn.edu/student_info/student_policies/

1) **Team Room Storage Bin Key Replacement Policy** Issued August 2, 2007

Each member of the student pharmacist body has a storage bin assigned that is uniquely theirs. Key’s to their bin are issued to each student pharmacist at the beginning of each academic year. Key’s must be surrendered at the end of the academic year. Individuals who are enrolled in courses taught at the HSOP building during the summer semester may check out a key for the semester.

Beginning with the 2006-07 academic year, lost keys may be replaced at any time. The fee for replacements is $25 which will be charged to the student’s bursar’s bill. If keys are not surrendered at the end of the academic year a bursar charge will be generated automatically to insure availability of a key for the following fall.

2) **Policy on curricular and student life operations between Auburn and Mobile Campuses**

Revised September 25, 2014

In order to maximize the effectiveness of the distance learning technology, the following policies will be observed on both campuses.

**LAPTOPS**

Students are required to bring their laptops to all distance learning classes. The computers should be used to take notes and as a backup should the transmission from a distance fail to be received. Student pharmacists should use their computers during class *only* for activities directly related to the purpose of the class.

**ATTENDANCE**
Attendance policies are those stated in the approved course syllabus and will be administered by the instructor of record for each course. Attendance is required for all PPE, APE, PSS and CAPP sessions.

OFFICE HOURS
Faculty members should establish electronic office hours at times mutually convenient to the students and faculty member. Mobile students may contact faculty during office hours via videoconferencing, or telephone. Desktop videoconferencing software is available for faculty members to use on their office computers. Mobile-based students will also be able to contact Auburn-based faculty and vice versa via email or Canvas to have questions answered concerning specific course material. The course syllabus will reflect specific faculty member’s desires regarding their preferred method for interacting directly with students.

COURSE MATERIALS
Faculty need to electronically post all course materials on course websites. Materials needed in preparation for a particular class should be posted at least 48 hours in advance of the class meeting so that students have sufficient time to review the necessary materials.

EXAMINATIONS
Examinations will be conducted in Mobile at the same time they are held in Auburn. Faculty members or assigned staff members on each campus will proctor each examination. In order to ensure minimal disruption as well as equitable experiences for all students, students are not to ask questions during examinations.

For ExamSoft: Students are directed to document in the designated areas in ExamSoft concerns about specific questions, should the need arise.

For Paper/Scantron Exams: Students are directed to document on the examination itself their concerns about specific questions, should the need arise.

For ExamSoft: Examinations and instructions must be loaded into ExamSoft at least 48 hours in advance of examinations. The passcode and universal resume code must be provided to all proctors at least 48 hours prior to the exam. (Please see ExamSoft Policies and Procedures for further information).

For Paper/Scantron Exams: Examinations and instructions must be transmitted between campuses at least 48 hours in advance of examinations, to allow sufficient time for copying.
Copies of all completed exams and Scantrons will be made at the Mobile campus prior to sending them to Auburn via overnight mail.

TELECOMMUNICATION
Should the Polycom Video Connection disconnect or substantially lose quality, students will obtain the lecture content through the DejaView system. Each student can access the lecture content using their personal computer. In the event the system goes down for one class, students are expected to attend their subsequent classes and not to assume that classes are cancelled for the rest of the day.

Students may also remain in audio contact with their instructor or facilitator by using the telephones in each room. Facilitators and instructors should be prepared to accept a call if students utilize this option. The phone numbers for each room can be located at the following link (also available on the Polycom Quick Reference Guide)
http://pharmacy.auburn.edu/intranet/it/pdf/hsop_room_phone_list.pdf

Please notify the HSOP’s Office of Information Technology of any Polycom issues immediately.

SCHEDULING
All room reservation and video conferences between Auburn, Mobile and all other sites must be scheduled using the Room Reservation and Video Connection Standard Operating Procedures located on the HSOP’s Intranet. This includes all classes, committee meetings, PPE, platform presentations, organization meetings, candidate interviews, electronic office hours, SI, faculty meetings, learn team, etc. Any changes to existing reservations or cancellations must follow the Room Reservation and Video Connection Standard Operating Procedures.

3) **Family Educational Rights and Privacy Act (FERPA)**
As an institution that receives funds from the U.S. Department of Education, Auburn University complies with the Family Educational Rights and Privacy Act (FERPA), a federal law that protects the privacy of student educational records. To ensure compliance with FERPA, the Harrison School of Pharmacy (HSOP), a professional school within Auburn University, has established the following policies and procedures. These policies and procedures are not necessarily inclusive of all possible situations governed by FERPA. Questions concerning FERPA can be addressed to the Family Policy Compliance Office, U.S. Department of Education, 400 Maryland Avenue, SW, Washington, D.C. 20202-4605.

**Definition of Student Education Records** – FERPA defines student educational records as those records that are directly related to a student and maintained by an educational agency or institution. For purposes of the HSOP, student records shall include, but shall not necessarily be limited to, the following:
• Student files maintained in the Office of Academic and Student Affairs
• University student records maintained on the OASIS System
• Course records maintained by individual instructors including copies of graded examinations or other assignments, including records that are maintained on WebCT
• Pharmaceutical Care Ability Profiles for students completing advanced practice experience rotations

Access to Student Educational Records – FERPA regulations restrict student educational records access to only those University officials with a legitimate educational interest as related to their position within the institution. For purposes of the HSOP, the following individuals are deemed to have a legitimate educational interest, and authorized to have access to student records for the specific purposes described below:

• Faculty and Staff in the Dean’s Office, Office of Academic and Student Affairs, Office of Teaching Learning and Assessment, and Office of Experiential Learning – These individuals shall have access to student educational records to the extent necessary for effective performance of their assigned responsibilities. The Dean or Associate Dean for Academic and Student Affairs may authorize access to student records for faculty members and faculty committees who have a legitimate need to review and evaluate such records.

• Members of the Committee on Academic Requirements and Professionalism - Members of this Committee may have access to student records pursuant to the Committee’s responsibility to review and make decisions on students being considered for admission to the HSOP and those students that the Committee is reviewing related to their academic standing in the HSOP. At the end of a Committee meeting, Committee members must return all written materials to personnel from the Office of Academic and Student Affairs. Such material will be returned to the students’ records or shredded as appropriate.

• Faculty (PPE) Mentors – Faculty mentors may have access to educational records of assigned students as necessary to facilitate mentoring and advising of students. The Office of Academic and Student Affairs may proactively provide information from student education records as deemed necessary to facilitate success of students.

• Faculty Precepting Students in Advanced Practice Experiences – Experiential faculty (full-time and volunteer) may have access to Pharmaceutical Care Ability Profiles from previous rotations for those students who they are precepting. Such information is provided to assist preceptors in tailoring rotations to the needs of each student. Such faculty
members are not allowed access to other portions of the student’s educational record.

- **Students** – Students may have access to their own educational records. They may review their records in the Office of Academic and Students Affairs, and may make copies of their record in the Dean’s Office.

- **Other Situations** – Although a complete list could likely not be compiled, there are numerous other situations when a faculty or staff member may have a legitimate reason to have access to a student’s educational records. Examples of such situations would include faculty members who have been asked by specific students to prepare letters of recommendation or faculty and staff members who are serving on the Scholarship and Awards Committee. In questionable cases, the Associate Dean for Academic and Student Affairs will make decisions as to whether a particular faculty or staff member has a legitimate reason for such access.

**Confidentiality** – All individuals with authorized access to student educational records are required to maintain student confidentiality as dictated by these policies and procedures. All HSOP faculty (including volunteer faculty) and staff must sign an affidavit agreeing to adhere to this confidentiality standard (see Attachment A). Students, who through their service on HSOP committees (e.g., Committee on Admissions and Academic Requirements) are authorized to have access to student educational records, must also sign the affidavit. All signed affidavits will be placed on file in the Office of Academic and Student Affairs.

**Disclosure of Student Information to Outside Parties** – The HSOP will not disclose student educational records to outside parties without prior authorization of the student, except as allowed by FERPA. Instances where such disclosure is permitted without student prior authorization include the following:

- School officials with a legitimate educational interest
- Other schools to which a student is transferring
- Specified officials for audit or evaluation purposes
- Appropriate parties in connection with financial aid to a student
- Organizations conducting certain studies for, or on behalf of the school
- Accrediting organizations
- To comply with a judicial order or lawfully issued subpoena
- Appropriate officials in cases of health and safety emergencies

Students may authorize disclosure of their educational records to other parties by signing a written consent (see Attachment B). The written consent must include the following: 1) the specific records to be disclosed, 2) the purpose of the disclosure, and 3) the party or class of parties to whom the disclosure may be made.

**Release of Personal Information** – It is the policy of the HSOP to not disclose student information (e.g., Address, Phone Number, Email Address) to outside parties.
**Faculty Procedures** – The following actions are considered to be violations of FERPA, and prohibited:

- Using at any time the entire social security number of a student in a public posting of grades
- Linking the name of a student with that student’s social security number in any public manner
- Leaving graded tests or other written assignments in a stack for students to pick up by sorting through the graded materials of other students
- Circulating a printed class list with students names and social security numbers, or grades, as an attendance roster
- Discussing the progress of any student with anyone other than the student (including parents) without the consent of the student
- Providing anyone with lists of students enrolled in your classes for any commercial purposes
- Providing anyone with student schedules or assisting anyone other than University employees in finding a student on campus.
Attachment A
Auburn University Harrison School of Pharmacy
FERPA Confidentiality Agreement

In my official capacity as _____________________________ in the Auburn University (insert position title or role)
Harrison School of Pharmacy, I acknowledge that I will have access to student educational records as defined in the School’s Policies and Procedures Related to the Family Educational Rights and Privacy Act (FERPA). I agree to maintain strict confidentiality of all student educational records information to which I have access and to adhere to FERPA and to all of the School’s Policies and Procedures related to FERPA.

Name (Printed) ________________________________
Signature ________________________________ Date __________________
Witness ________________________________ Date __________________
Attachment B
Auburn University Harrison School of Pharmacy
Student Authorization for Disclosure of Educational Records to Outside Parties

I ____________________________________, authorize the disclosure of my educational records to __________________________________________.

(party or parties to whom disclosure is authorized)

The purpose for such disclosure is as follows:

The specific portions of my educational records authorized for the disclosure to the above party or parties are:

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4) Honor Code

1.00 PREAMBLE

1.01 A student pharmacist holds the health and safety of patients to be of primary importance. The student renders to each patient the full measure of his/her ability as an essential health care practitioner.

1.02 A student pharmacist strives to gain professional knowledge and to render the best professional judgment.

1.03 A student pharmacist is required to obey the law, to uphold the dignity and honor of the profession, and to accept its ethical principles. The student shall not engage in any activity that will discredit the profession. The student shall expose, without fear or favor, illegal and unethical conduct in the profession.

1.04 The principles of professional conduct for students of the Harrison School of Pharmacy (HSOP hereafter) have been established to guide the student in his/her relationship with fellow students, faculty, staff, health care professionals and the public. Toward this end, the students and faculty of HSOP have adopted this Code of Ethical and Professional Conduct, hereafter referred to as the “Code”.

2.00 PLEDGE

2.01 As a condition of acceptance to HSOP, the applicant shall be required to sign a pledge that shall read as follows:

I ACCEPT the position reserved for me in the Pharm.D. class entering in XXX on the XXX Campus. In accepting a position in Harrison School of Pharmacy, I agree to adhere to all Harrison School of Pharmacy Standards and Codes of Conduct.

During the HSOP P1 orientation period, all students will sign a reaffirmation pledge that shall read as follows:

This is to certify that I have read and understand the Code of Ethical and Professional Conduct of the Auburn University Harrison School of Pharmacy and further, I agree to uphold and abide by the provisions contained therein, effective immediately and until my enrollment in HSOP is terminated.
3.00 VIOLATIONS

3.01 Violations of HSOP Code of Ethical and Professional Conduct pertaining to academic honesty include but are not limited to:

3.01.1 The receipt, possession or use of any material or assistance not authorized by the instructor in the preparation of papers, reports, examinations, or any class assignment to be submitted for credit as a part of a course or to be submitted to fulfill HSOP requirements. The receipt, possession or use of any aid or material prohibited by the instructor while an examination or quiz is in progress.

3.01.2 Knowingly giving assistance not authorized by the instructor to another in the preparation of papers, reports, or laboratory data and products.

3.01.3 Knowingly giving assistance not authorized by the instructor to another while an examination or quiz is in progress.

3.01.4 Lending, giving, selling or otherwise furnishing to another any material or information not authorized by the instructor which can be shown to contain the questions or answers to any examination or quiz scheduled to be given at a subsequent date.

3.01.5 The submission of papers, reports, projects or similar course requirements, or parts thereof, that is not the work of the student submitting them. Also, the use of direct quotations or ideas of another in materials to be submitted for credit without appropriate acknowledgment.

3.01.6 Knowingly submitting a paper, report, examination or any class assignment that has been altered or corrected, in part or in whole, for reevaluation or regrading.

3.01.7 Altering or attempting to alter an assigned grade on any official HSOP or University record.

3.01.8 The instructor may delineate in advance other actions he/she considers to be a violation of the Code.
3.02 Violations of HSOP Code of Professional Conduct pertaining to professional conduct include:

3.02.1 Purposely falsifying applications, forms or records prior to admission to HSOP, or while enrolled in the School’s professional programs. This includes, but is not limited to: falsifying pharmacy practice experience (PPE) visits, falsifying clinical information in PPE documents, and/or falsifying clinical information in any patient record.

3.02.2 Knowingly producing false evidence (or rumors) against another or providing false statements or charges in bad faith against another. Knowingly publishing or circulating false information concerning any member of the University faculty, student body, staff or community.

3.02.3 Contributing to, or engaging in, any activity which disrupts or obstructs the teaching, research or extension programs of HSOP or the University, either on the University’s campus or at affiliated training sites.

3.02.4 Threatening or purposely committing physical violence against any member of the University faculty, student body, staff or community.

3.02.5 Misusing or misrepresenting one’s status as a student pharmacist or the right to use any University property and facilities.

3.02.6 Stealing, damaging, defacing, or unauthorized use of any property of HSOP or University. Diversion of any HSOP or University property to one’s own use.

3.02.7 Engaging in any facet of pharmacy practice prior to graduation unless under the direct supervision of a licensed practitioner or otherwise allowed by law.

3.02.8 Intentionally revealing the names of the charging party, accused, witnesses or the facts involved in an alleged violation except in accordance with the provisions of this Code or revealing the confidential proceedings of an Honor Board hearing.

3.02.9 Failure to report known violations of HSOP’s Code of Ethical and Professional Conduct.

3.02.10 Use, possession, or participating in the trafficking of illegal drugs or substances.

3.02.11 Unauthorized accessing of information about faculty, staff, or students of HSOP, or patients/clients, that is private or confidential.

3.02.12 Unauthorized revealing of information about faculty, staff or students of HSOP, or patients/clients, that is private or confidential.
3.02.13 Any violation of university policy as specified in the Auburn University Student Academic Grievance Policy

3.02.14 Any violation of the "Faculty Student Covenant" including treating faculty, staff, students and employees of HSOP and Auburn University with disrespect through inappropriate behavior or communication.

3.02.15 Treating patients with disrespect.

4.00 SANCTIONS AND RECORDS

4.01 The following sanctions, alone or in combination, may be imposed for violation of the Code by the Dean of HSOP upon recommendation by the Board of Ethical and Professional Conduct:

4.01.1 Reprimand with inclusion of a letter of reprimand in the student's file that is maintained in the Dean's Office for a period of time designated by the Dean. This letter will remain in the student's file for not less than the following two academic terms of residence.

It will be the responsibility of the student to request removal of the letter of reprimand from his/her file after the designated time period. Such requests must be submitted in writing to the Dean of HSOP.

4.01.2 Assignment of a grade of "F" in the course in which the violation(s) occurred.

4.01.3 Assignment of a grade of "F" in the course in which the violation(s) occurred and a notation of "assigned for academic dishonesty" placed on the student's transcript for a designated period of time.

It will be the responsibility of the student to request removal of the notation of sanction associated with the assignment of a grade of "F" after the designated time period. Such requests must be submitted in writing to the Dean of HSOP.

4.01.4 Disciplinary probation for a stated period of time which will include loss of privilege to represent HSOP, hold an elected office or appointment to any HSOP committee or participation in HSOP’s extracurricular activities. A notation of the conditions of probation will be included in the student's record. A student who fails to abide by the conditions of his or her probation will be subject to further disciplinary action, including suspension or expulsion.
It will be the responsibility of the student to request removal of the notation of probation after this sanction has expired. Such requests must be submitted in writing to the Dean of HSOP.

4.01.5 Suspension from HSOP for a stated period of time during which the student will not be allowed to take any courses in HSOP. Furthermore, HSOP will not accept credit for any coursework that was completed by the student at Auburn University or any other institution while he/she was suspended from HSOP. The appropriate notation of "suspension for academic dishonesty" or "suspension for violation of the Code of Ethical and Professional Conduct" will be placed on the student's transcript.

It will be the responsibility of the student to request removal of the notation of suspension after this sanction has expired. Such requests must be submitted in writing to the Dean of HSOP.

4.01.6 Expulsion from HSOP. Expulsion for violation of the Code will be noted permanently on the student's transcript.

4.02 If a student has been subjected to sanctions for violation of the Code previously, the minimum sanction for the current violation will be suspension.

4.03 Sanctions including probation, suspension and expulsion will apply only to HSOP and its academic programs.

5.00 THE BOARD OF ETHICAL AND PROFESSIONAL CONDUCT

5.01 Composition of the Board of Ethical and Professional Conduct hereafter referred to as the "Board."

5.01.1 The Board will consist of four student pharmacist members, one from each class, and three faculty members. One faculty member will be appointed by the Dean to represent each of the three academic departments of HSOP. The Dean will also appoint one alternate member from each of the three academic departments of HSOP

5.01.2 The student members and student alternates of the Board will be elected as Class Justices each year by the Student Council of HSOP by the process described below. These elections will occur individually at both the Auburn and Mobile campuses of HSOP. The representatives will be elected by classmates of their respective campus and
will represent their individual class and campus as Class Justice and on the Student Council.

The results of the elections will be forwarded to the Dean by the President or Vice-President of the Student Council within one week. Subsequent to these elections, the Dean will name a P1 student, a P2 student, a P3 student, and a P4 student from the elected Class Justices to be the four primary student members of the Board. The Dean will also name four alternate student Board members, one representing each class, from the elected Class Justices.

Each student member and alternate elected will serve a one-year term to begin immediately following the election. If a vacancy occurs during the year, the Dean will appoint a replacement to complete the term.

PROFESSIONAL YEAR P1: Within the fall semester, the Student Council will call for nominations of P1 students to represent their class as Class Justice with the understanding that the Class Justices will serve on the Board. After the nominations are closed, the President or Vice-President of the Council will contact each nominee to determine their willingness to serve on the Board. The Council will then prepare a ballot listing the names of all nominees willing to serve and conduct an election in which only members of the P1 class are eligible to vote. On the Auburn Campus, the nominees who receive the first and second highest number of votes will be elected as the P1 Class Justices. On the Mobile Campus, the nominee who receives the highest number of votes will be elected as the P1 Class Justice. The Dean will then select one primary member and one alternative member to serve on the Board from the 3 Class Justices elected across both campuses.

PROFESSIONAL YEAR P2: Within the spring semester, the Student Council will call for nominations of P1 students to represent their class as Class Justice with the understanding that the Class Justices will serve on the Board during their P2 year. Two weeks will be allowed for placement of names in nomination. After the nominations are closed, the President or Vice-President of the Council will contact each nominee to determine their willingness to serve on the Board. The Council will then prepare a ballot listing the names of all nominees willing to serve and conduct an election in which only members of the P1 class are eligible to vote. On the Auburn Campus, the nominees who receive the first and second highest number of votes will be elected as the P2 Class Justices. On the Mobile Campus, the nominee who receives the highest number of votes will be elected as the P2 Class Justice. The Dean will then select one primary member and one alternative member to serve on the Board from the 3 Class Justices elected across both campuses.
PROFESSIONAL YEAR P3: Within the spring semester, the Council will call for nominations of P2 students to represent their class as Class Justice with the understanding that the Class Justices will serve on the Board during their P3 year. Two weeks will be allowed for placement of names in nomination. After the nominations are closed, the President or Vice-President of the Council will contact each nominee to determine their willingness to serve on the Board. The Council will then prepare a ballot listing the names of all nominees willing to serve and conduct an election in which only members of the P2 class are eligible to vote. On the Auburn Campus, the nominees who receive the first and second highest number of votes will be elected as the P3 Class Justices. On the Mobile Campus, the nominee who receives the highest number of votes will be elected as the P3 Class Justice. The Dean will then select one primary member and one alternative member to serve on the Board from the 3 Class Justices elected across both campuses.

PROFESSIONAL YEAR P4: Within the spring semester, the Council will call for nominations of P3 students to represent their class as Class Justice with the understanding that the Class Justices will serve on the Board during their P4 year. Two weeks will be allowed for placement of names in nomination. After the nominations are closed, the President or Vice-President of the Council will contact each nominee to determine their willingness to serve and conduct an election in which only members of the P3 class are eligible to vote. The nominees who receive the first and second highest number of votes will be elected as the P4 Class Justices. The Dean will then select one primary member and one alternative member to serve on the Board from the 2 Class Justices elected.

5.01.3 The faculty members and faculty alternates will be appointed to three-year, staggered terms by the Dean. All necessary faculty appointments will be made by the end of January.

5.01.4 Each year the Dean will appoint one of the student members as Chairperson and one of the faculty as Vice-Chairperson.

5.01.5 In the event that any member or alternate cannot complete his/her term, the Dean will make the appointments necessary to fill the vacancies.

5.02 The duties of the Board Chairperson:

5.02.1 To call all regular and special meetings of the Board and to preside at all meetings.
5.02.2 To receive and review, with the Vice-Chairperson, all notifications of alleged violations of the Code, and to notify all parties involved in the alleged violation as described in Section 11.00 and 12.00.

5.02.3 To submit to the Dean in a timely manner, a written report of all findings and recommendations of the Board.

5.02.4 To assist the Office of the Dean in the dissemination of information concerning the provisions of the Code.

5.03 The duties of the Vice-Chairperson will include:

5.03.1 Notification of Board members of all regular and special meetings called.

5.03.2 To record the minutes of all regular and special meetings held by the Board.

5.03.3 To receive and review, with the Chairperson, all notifications of alleged violations of the Code, and to assist the Chairperson in the notification of all parties involved in the alleged violation as described in Sections 11.00 and 12.00.

5.03.4 To assist the Chairperson of the Board and the Office of the Dean in the notification of witnesses who are to be present at a hearing.

5.04 The functions and responsibilities of the Board:

5.04.1 All members and alternates may assist the Chairperson, Vice-Chairperson and Office of the Dean with the dissemination of information concerning the provisions of the Code.

5.04.2 All members and alternates may attend and participate in all called meetings of the Board, excluding hearings (Section 5.04.3).

5.04.3 To hear cases of alleged violations of the Code:

5.04.3.1 Hearings requested by students charged with violation of the Code will be heard by a Board Hearing Committee which will consist of the Chairperson, Vice-Chairperson, and the primary student and faculty members of the Board.

5.04.3.2 In the event that a member Board Hearing Committee is excused or cannot be present to hear a case, the Chairperson may appoint the alternate member to represent the appropriate pharmacy class or department as a member of the Board in place of the excused or absent member.
5.04.3.3 In the event that a member of the Board Hearing Committee is involved as a charging party or witness in the violation to be heard by the committee, the Chairperson will excuse that member and may appoint the alternate member to represent the appropriate pharmacy class or department as a member in place of the excused member.

5.04.3.4 In the event the Chairperson is involved as a charging party or witness, or is the accused in the violation to be heard by the committee, the Vice-Chairperson will excuse the Chairperson and will appoint an alternative Board representative from the class in which the Chairperson was a member of. In this case, the Dean will appoint a temporary Chairperson.

5.04.3.5 In the event the Vice-Chairperson is involved as a charging party or witness, or is the accused in the violation to be heard by the committee, the Chairperson will excuse the Vice-Chairperson and will appoint an alternative Board representative from the department in which the Vice-Chairperson was a member of. In this case, the Dean will appoint a temporary Vice-Chairperson.

5.04.3.6 If neither a member nor alternate member of the Board can be present to hear a case, the Board Hearing Committee may proceed provided the Chairperson, Vice-Chairperson and three other members, or duly appointed alternates are present.

5.04.3.7 Board Hearing Committee members or duly appointed alternates must be present during the entire hearing process to participate in subsequent deliberations.

5.04.3.8 All recommendations of the Board Hearing Committee will be determined by simple majority vote. Each member present will cast a vote of guilty or not guilty. The Chairperson will vote only in the event of a tie.

5.04.3.9 All recommendations and findings of the Board Hearing Committee will be forwarded to the Office of the Dean in a timely manner by the Chairperson.

6.00 RESPONSIBILITIES OF THE OFFICE OF THE DEAN

6.01 To administer the pledge (Section 2.01) to all students entering the professional programs of HSOP.

6.02 To provide information concerning the provisions of the Code and modifications of the Code to faculty, students and staff of HSOP.
6.03 To assist the Board Hearing Committee and any party involved in cases of alleged violation of the Code if such assistance is requested at a reasonable time prior to the scheduled hearing (Section 13.02).

6.04 To maintain confidential files regarding violations of the Code and all records concerning the findings and recommendations of the Board Hearing Committee.

6.04.1 All records concerning violations of the Code will be filed for a period of six (6) years following hearing the case. Access to these records will be limited as indicated by applicable law, University Policy concerning student records, and the provisions of the Code.

6.05 To notify the accused party and the charging party of the Board Hearing Committee’s recommendations and to implement sanctions as described in Section 16.00.

6.06 To hear all appeals as described in Section 16.00.

6.07 To implement all sanctions as described in Section 4.00.

7.00 COMMUNICATION

7.01 Auburn University has designated student email addresses as the official means of communication; all written communication regarding violations of the Code shall be through the Auburn University email system.

8.00 HEARING

8.01 A student has the right to a hearing for any charge of violation of the Code. If the student desires a hearing, he/she must file a written request with the Chairperson or Vice-Chairperson of the Board as set forth in Section 12.02. The right of a student to be heard will be waived if such a request is not filed within the time required by Section 12.02.

9.00 RIGHTS OF THE ACCUSED PARTY

9.01 The party accused of a violation of the Code has the following rights:
9.01.1 The right to be informed in writing of the specific charge or charges made against him/her and of any sanctions recommended by the charging party.

9.01.2 The right to be informed in writing of the right of hearing, procedures involved in the hearing and the names of known witnesses.

9.01.3 The right to receive written notice of the time and place of the hearing regarding the charge or charges if a hearing is requested by the student.

9.01.4 The right to present witnesses and evidence and to be present throughout the presentation of all witnesses and evidence at the hearing, if a hearing is requested by the student.

9.01.5 The right to have sanctions deferred until completion of the process described herein, including appeals to the Dean of HSOP and the Provost and Vice-President for Academic Affairs of Auburn University.

10.00 RIGHTS OF THE CHARGING PARTY

A member of the faculty, staff or student body who has submitted a written notice of an alleged violation (Section 12.00) is the charging party and as such has all the rights guaranteed the accused, including the right of appeal (Section 9.00).

11.00 PROCEDURES FOR FILING CHARGES

11.01 When an instructor detects or witnesses a violation of the Code pertaining to academic honesty, he/she shall provide a written notice of the alleged violation and any recommended sanctions to the Chairperson or Vice-Chairperson of the Board within ten (10) working-days of the time the alleged violation becomes known. Under no circumstances shall any accusation be made in public.

11.02 When a student or person other than an instructor detects or witnesses a violation of the Code pertaining to academic honesty he/she is advised to consult with the instructor in charge of the course in which the alleged violation occurred. Under these circumstances the instructor will then prepare a written notice and file the notice as described in Section 11.01 if he/she determines that the facts warrant such action. A student or person other than an instructor who detects or witnesses a violation of the Code pertaining to academic honesty may file written notice of the alleged violation directly to the Chairperson or Vice-Chairperson of the Board within ten (10) working
days of the time the alleged violation becomes known. Under no circumstances shall any accusation be made in public.

11.03 Any person who detects or witnesses a violation of the Code pertaining to professional conduct shall provide written notice of the alleged violation to the Chairperson or Vice-Chairperson of the Board within ten (10) working days of the time the alleged violation becomes known. Under no circumstances shall any accusation be made in public.

12.00 PROCEDURES FOR PROCESSING CHARGES

12.01 The Chairperson and/or Vice-Chairperson of the Board will receive all written notices of alleged violations of the Code, and they shall prepare a written notice of charges which includes a specific listing of the charge or charges, the names of any known witnesses and a statement of the student’s right to a hearing as well as the procedures involved in the hearing. Copies of this written notice are to be provided to the student accused of the violation, the charging party and the instructor in charge of the course in which the alleged violation occurred within five (5) working days.

12.02 If the student charged with violation of the Code desires a hearing before the Board, he/she must file a written request for a hearing to the Chairperson or Vice-Chairperson of the board within five (5) working days after receipt of notice of the charge(s) (Section 12.01). This request should include any reply or response the accused student wishes to make to the charges and the names of witnesses willing to testify on his/her behalf. The Chairperson or Vice-Chairperson will then send a copy of the request for hearing to all parties who received a copy of the written notice described in Section 11.01.

12.03 If the student charged with a violation of the Code does not request a hearing or fails to request a hearing within the time allowed (Section 12.02), the Board Hearing Committee will consider the case based on the presentation of evidence brought by the charging party and will submit its findings and recommendations to the Dean. Such deliberations will follow hearing procedures outlined in section 14.00 and shall be completed no later than fifteen (15) working days after the student charged has received the notice of the charge(s) (Section 12.01).

12.04 If the student charged with a violation of the Code requests a hearing, a date shall be set for a hearing and all parties involved notified by the Board of the date, time and place.
The hearing shall not be scheduled less than five (5) working days from date of the request for hearing (Section 12.02).

13.00 PRESENTATION OF EVIDENCE AND WITNESSES

13.01 Each party shall have the right to present evidence and witnesses at the hearing and to be present throughout the presentation of all witnesses and evidence.

13.02 Each party shall arrange for the attendance of their own witnesses. The Office of the Dean may assist in securing the attendance of witnesses if a written request for such assistance is submitted to the office a reasonable time in advance of the hearing date. If either party requests that additional witnesses be present for good cause as determined by the Chairperson of the Board, the Board Hearing Committee may defer the hearing until such time that the witnesses may appear and be questioned.

13.03 The Board Hearing Committee may request the appearance of additional witnesses if the Board determines that such witnesses could present relevant information.

13.04 Any witness who wishes or needs to be excused should, in advance of the hearing, confer with the Office of the Dean. The decision reached during this conference will be communicated immediately by the Dean to the Chairperson or Vice-Chairperson of the Board who will then promptly relay any such information to all parties.

13.05 If a witness fails or refuses to appear, the Board Hearing Committee shall first determine whether or not to proceed on the basis of other evidence or witnesses available. If it is the decision of the Board Hearing Committee to proceed, the challenged portions of any written statements that may have been made by the absent witness shall be disregarded.

14.00 HEARING PROCEDURES

14.01 The Board Hearing Committee will conduct the hearing and all of its deliberations in closed and confidential session.

14.02 The hearing will be called to order by the Chairperson who will then identify by name members of the Board Hearing Committee who are present for the record.
14.03 The Chairperson will then identify by name the student charged with the alleged violation of the Code and his/her witnesses and the charging party and his/her witnesses.

14.03.1 In the event the student charged with the alleged violation of the Code or any of his/her witnesses or the charging party or any of his/her witnesses fail to appear, the Board Hearing Committee shall determine whether or not to proceed based on the witnesses and evidence available.

14.04 The Chairperson will read the charge and poll each member of the Board Hearing Committee to determine if any member has a prior opinion of guilt or innocence.

14.04.1 Any member of the Board Hearing Committee who has a prior opinion of guilt or innocence will be excused and the alternate member will hear the charge and a prior opinion of guilt or innocence will be determined.

14.05 The presentation of all evidence and witnesses to the Board Hearing Committee and questioning by the members of the Board Hearing Committee will proceed generally as described by the following:

14.05.1 The charging party will present his/her evidence and witnesses.

14.05.2 The student charged with an alleged violation of the Code will present his/her evidence and witnesses.

14.05.3 The members of the Board Hearing Committee will ask questions of all parties to the Board's satisfaction.

14.05.4 The Chairperson may recognize others present to speak if the Chairperson believes that the information provided is needed for the Board Hearing Committee to discharge their duties.

14.05.5 Following the presentation of all evidence and witnesses to the Board Hearing Committee and questioning by the members of the Board Hearing Committee, all parties will be excused while the Board Hearing Committee deliberates.

14.05.5.1 The parties will remain available in the event that they are recalled as described in Section 14.05.6.

14.05.6 The Chairperson may recall the parties for further questioning if it is deemed necessary for the Board Hearing Committee to discharge their duty. All parties have the right to be present during further questioning.
14.06 The Chairperson may grant a recess at the request of members of the Board Hearing Committee or the parties involved to allow time for further preparation.

14.07 The Chairperson and members of the Board Hearing Committee shall not discuss the evidence or testimony in the presence of the parties.

15.00 BOARD HEARING COMMITTEE DELIBERATIONS

15.01 The burden of proof rests with the charging party and will be satisfied by any clear and convincing evidence in the record when considered as a whole.

15.02 The failure of the student charged with an alleged violation of the Code to make a statement or to answer any or all questions shall not be considered in the determination of guilt or innocence by the Board Hearing Committee.

15.03 The Board Hearing Committee will begin deliberation immediately following the hearing and continue their deliberations until verdict of guilty or not guilty is reached. The verdict will be determined by simple majority vote as stipulated in Section 5.04.3.8.

15.04 A student's prior record of sanctions shall be inadmissible as evidence to provide innocence or guilt. The student's prior record of sanctions must be considered by the Board Hearing Committee in the determination of the appropriate sanctions if the student is judged guilty of the present violation.

15.05 In the event a verdict of guilty is reached, the Board Hearing Committee will consider recommended sanctions as stipulated in Section 4.00.

15.06 In the event a verdict of guilty is reached, the Board Hearing Committee will submit its findings and recommended sanctions to the Office of the Dean as stipulated in Section 16.00.

15.06.1 The findings and recommendations of the Board Hearing Committee shall be submitted to the Office of the Dean in a timely manner by the Chairperson.

16.00 ACTIONS IN RESPONSE TO BOARD HEARING COMMITTEE'S FINDINGS

16.01 The Dean will receive the findings and recommendations of the Board Hearing Committee, and notify the parties involved of the action to be taken by HSOP.
16.01.1 The Dean will notify the student charged, in writing, of the findings and, in the case of a guilty verdict, any sanctions to be imposed. Copies of this notification of action shall be sent to all parties.

16.02 Upon notification of action, either party may appeal to the Office of the Dean as stipulated below:

16.02.1 The appeal must be filed in writing within five working days after receipt of notification of the action described in Section 16.01. The appeal must include a statement of the asserted facts and the argument concerning appeal.

16.02.2 The Office of the Dean shall send a copy of the appeal to all parties who received the notification of action described in Section 16.01.

16.02.3 The other parties may submit a written response to the appeal within five working days of receipt of the appeal described in Section 16.02.1.

16.03 The Dean shall consider the appeal and any responses by the other parties.

16.03.1 The Dean may return the case to the Board Hearing Committee if additional evidence is brought to his/her attention which was not presented during the hearing and which could affect his/her decision regarding the case. In this event the Board Hearing Committee will consider the additional evidence and report its findings and recommendations to the Dean.

16.03.2 Prior to any change in recommendation or sanction, the Dean will confer with the Board Hearing Committee.

16.04 The Office of the Dean shall notify all parties of his/her decision(s) regarding the appeal. This notification shall represent HSOP's final action.

16.05 Upon notification of final action (Section 16.04), either party may appeal to the Provost and Vice President for Academic Affairs of Auburn University.

16.05.1 Such appeals must be made in writing within five (5) working days after receipt of notification from the Office of the Dean regarding the preliminary appeal (Section 16.04). Appeals to the Provost and Vice President for Academic Affairs of Auburn University must include a full statement of asserted facts and the argument concerning appeal. The appealing party shall send a copy of the appeal to the Office of the Dean of HSOP, and that office will send a notice of appeal to all parties who received notice of the actions to be taken by HSOP as stipulated in Section 16.01. The other party may submit a written response within five (5) working days of notification of appeal to the Provost and Vice President for Academic Affairs. The Provost and Vice President for
Academic Affairs will consider the appeal and any response. The Provost and Vice President for Academic Affairs will then respond in writing to the appealing party and send notification of this response to all parties who received notice of this appeal. The Provost and Vice President for Academic Affairs’ decision will constitute the final action of Auburn University.

16.06 The Dean shall notify the Registrar in writing when the notation "assigned for academic dishonesty" is to be placed on a transcript and/or when suspension or expulsion is assigned. Such notification shall not be given for five (5) working days after the Dean's notification of findings and sanctions (Section 16.01) or until after completion of all appeals (Sections 16.02 and 16.05), whichever is later.

16.07 The Office of the Dean shall monitor probation.

16.08 A student may not graduate during the appeal process.

16.09 The student shall be responsible for requesting removal of any notation of sanction from his/her record (Section 4.00) when the period of sanction has expired. Such requests must be made in writing to the Office of the Dean, who will notify the Registrar in writing to remove the notation of sanction from the student's record.

16.10 A student returning after completion of a suspension will follow the same procedure of registration as any other returning student.

17.00 AMENDMENTS AND REVISIONS

17.01 Proposed amendments and revisions shall be submitted to the faculty and student body of HSOP through the Board of Ethical and Professional Conduct. A majority vote of the student body and a majority vote of the faculty is necessary for the adoption of amendments, with a majority defined as greater than 50% of those voting. Amendments and revisions so adopted are then subject to the approval of the Dean of HSOP and the Provost and Vice President for Academic Affairs of Auburn University.

Revised August 2013

Revision Approved by the Provost and Vice President for Academic Affairs, September 2013
5) **Student Assignment to Groups** – Revised 7/12/2012

The courses and curriculum of the Auburn University Harrison School of Pharmacy’s (AUHSOP) Doctor of Pharmacy Program require student pharmacists to be assigned to groups and teams and share small and large team rooms with colleagues. Student pharmacists are randomly assigned, and changes are made only as a result of conditions which cannot be resolved or situations that compromise the operation of the AUHSOP or severely jeopardize the education and/or welfare of student pharmacists.

**Rationale:**

To be effective health professionals, pharmacists must possess the ability to work with patients and colleagues whose selection is beyond their control. This ability is not innate, and a particularly important facet of the Doctor of Pharmacy program is for student pharmacists to develop the ability to work in teams. An important component of professional maturity is the development of the ability to resolve issues among members of groups and teams to facilitate functioning of the group and successful completion of necessary work and tasks.

**Procedure:**

1. Student pharmacist assignments to groups, teams and team rooms are made on a random basis for the first and third year. In the second year, students are allowed to select their roommates, but the rooms will be assigned. Students are not allowed to request a specific room.

2. P3 Student pharmacists who experience difficulty functioning in their groups should contact the Integrated Pharmacotherapy (IP) Course Coordinator through the Office of Teaching, Learning and Assessment (OTLA) to resolve the issue. P1 and P2 Student pharmacist groups or teams who experience difficulty in functioning are expected to contact the Office of Academic and Student Affairs (OASA) for assistance in resolving problems or issues. The OASA, in conjunction with the involved student pharmacists, faculty, and staff, will assess the situation and provide assistance with the resolution of problems and issues that might exist.

3. After a sincere effort by all parties to resolve identified issues, student pharmacist(s) may request in writing to the Associate Dean for Academic and Student Affairs a reassignment to a different group, team and/or team room. The request must include the following information:

   A. A description of the problem or issue that exists;

   B. Attempts that have been made to resolve the problem or issue including assistance that has been requested and received (including contacting OASA first);

   C. An explanation of why the student pharmacist(s) believe(s) the problem cannot be resolved;
D. A plan to prevent this same problem in subsequent groups, teams or team rooms, should the reassignment request be approved.

4. The Associate Dean for Academic and Student Affairs will review the request and documentation in a timely manner, gather further information from all involved parties (i.e., student pharmacists, faculty, and staff), and make appropriate reassignments, if deemed necessary. Reassignments will only be made after thorough discussions with all parties that are or will be involved. As a condition of reassignment, student pharmacists may be required to engage in programs designed to improve their functioning in groups (e.g., team building, individual counseling, etc.).

6) Standards of Professional Attire
Upon acceptance and entry into Auburn University's Harrison School of Pharmacy, students begin a process of developing the knowledge, skills and attitudes that comprise the fundamental core of the profession of Pharmacy. Although assimilation of competencies and transformation to Doctoral Pharmacy Practitioners takes several years, early initiation of professional behaviors facilitates the developmental and professionalization process.

Pharmacy is one of the oldest and most respected professions. Patients trust their pharmacist as a source of medical information and depend upon them to act in their best interest while providing safe and accurate pharmaceutical services. Each student and graduate pharmacist inherits this time-honored legacy as part of their profession and is obligated by oath to its preservation and enhancement.

Throughout history, health professions have adopted standards of attire for their practitioners to collectively identify themselves as professionals and provide assurance to patients that they are interacting with individuals who can be trusted in performing services. In today's health care system, the concept of pharmaceutical care has introduced pharmacists as providers of care. Pharmacists are assuming a greater responsibility and a more active role in maintaining the health of the population they serve. Image alone will not assure the desired excellence in pharmaceutical care; however, it often provides the basis for the public's perception of the profession and particularly guides first impressions.

Just as all obligations and responsibilities of the profession require some effort and sacrifice, assumption of a professional image requires an active individual resolution and may necessitate modification of life-style practice upon entering the professional program. By entering the Harrison School of Pharmacy, students willingly accept the obligations of the
profession and are expected to act accordingly. Abiding by the standards of attire at the Harrison School of Pharmacy is a component of the educational process that internalizes esteem and emphasizes professionalization.

A set of accepted standards of attire for Auburn University Harrison School of Pharmacy students is also of particular importance since various patient care activities are being delivered within the Walker Building as well as the Auburn community, and in health care facilities across the state and nation.
APPROPRIATE ATTIRE FOR STUDENTS AT THE AUBURN UNIVERSITY
HARRISON SCHOOL OF PHARMACY

The following standards for attire apply to all professional students enrolled in Auburn University’s Harrison School of Pharmacy’s Doctor of Pharmacy Program.

These standards should be followed during all hours in which the School is open to the public (generally 7:45 a.m. to 5:00 p.m., Monday through Friday).

Part I

General Personal Care Standards:

1. Adequate precautions should be taken to maintain good personal hygiene. These precautions include regular bathing, use of deodorants and regular dental hygiene.

2. Hair maintenance

   2.1 Women: neat and clean, styled off the face and out of the eyes. If close contact with patients occurs (e.g. physical assessment procedures), hair longer than shoulder length should be secured.

   2.2 Men: neat and clean, styled off the face and out of the eyes. If close contact with patients occurs (e.g. physical assessment procedures), hair longer than shoulder length should be secured. Beards and mustaches should be clean and well groomed.

3. Other personal care considerations

   3.1 Cologne, perfume or aftershave is not recommended in the patient care setting due to patient allergies and sensitivities.
3.2. Cosmetics should be used in moderation.

3.3. Nails should be well groomed, manicured and of short to medium length to facilitate patient care activities.

3.4. Jewelry and accessories should be non-distracting.

**Part II**

**Appropriate Attire Standards for Routine Harrison School of Pharmacy Attendance**

1. **Attire:**

   1.1 **Women:** Clean, business casual *styled* clothing and shoes.

   1.1.1 Dresses/Skirts should be no shorter than 1 inch above the knee. Blouses/shirts should fit so that cleavage coverage is maintained.

   1.1.2 Leggings can only be worn with a dress or skirt that comes down to 1 inch above the knee and can only be neutral color-beige, white, black, gray, beige or navy.

   1.2 **Men:** Clean, business casual *styled* clothing and shoes. Shirts must be collared and tucked in.

   1.3 An approved identification badge must be worn *on the student's person* and visible at all times. Identification badges must be worn around the chest pocket level or on a professional lanyard around the neck. Badges should never be worn on backpacks, around the belt, or below the waist.

2. **Items specifically not permitted under any condition:**

   2.1 Hats or caps (except head coverings considered a part of religious or cultural dress).

   2.2 Denim clothing or jeans of any color;
2.3 Shorts, cargo pants, culottes, skorts or mini-skirts or Bermuda shorts that are above mid-calf;

2.4 Sweatpants, sweatshirts, non-collared T-shirts or T-shirts with lettering, or cropped tops that expose the midriff (business casual styled turtlenecks and mock turtlenecks may be worn, and sweaters/fleeces should be worn if necessary due to cool building temperatures);

2.5 Athletic shoes, casual sandals without back straps, flip-flops, clogs, or beach shoes. Open toed shoes are discouraged and are not permitted in patient care areas.

2.6 Scrubs (tops or pants);

2.7 Buttons, large jewelry or accessories that could interfere with patient care or safety should be avoided.

2.8 Jewelry in pierced noses, lips, tongues or other exposed body areas, other than ears.

2.9 Visible tattoos.

3. Exceptions

3.1 After Hours and Weekend Attire: Students should dress neatly at all times while in the Walker Pharmacy Building. Care should be taken not to wear clothing that might be deemed inappropriate for a professional.

3.2 Activities in specific laboratories and patient areas in which the instructors or institutional policy supersedes this policy.

3.3 Any medical conditions that inhibit adherence should be discussed with the Associate Dean for Academic and Student Affairs.

Part III
Appropriate Attire Standards in the Context of Patient Care or Public Interactions:

Defined to include but not limited to the following situations:

a) Advanced Practice Experiences (APE)  
b) Pharmacy Practice Experiences (PPE)*  
c) Professional Seminar Series (PSS)**  
d) Auburn University Pharmacy Care Clinic (AUPCC)  
e) Professional meeting functions  
f) End-of-year exams  
g) When prior notification is given (i.e. a patient will be in class)  
h) Any context where the student is representing the School in Public

1. An approved identification badge must be worn on the student's person and visible at all times. (All students are expected to conform to this standard at all times.)

2. Attire:

2.1 Women: Clean, professionally styled clothing and shoes (i.e. dresses or skirts of medium length, non-denim tailored slacks, and appropriate tops). A clean, white, long sleeved waist-length pharmacy jacket is required in appropriate contextual settings.

2.2 Men: Clean, professionally styled clothing and shoes including a collared dress shirt with an appropriately knotted/secured necktie. A clean, white, long sleeved waist-length pharmacy jacket is required in appropriate contextual settings.

* In the event of a discrepancy between these standards and the PPE Manual, the PPE Manual shall supersede this standard.

** In the case of PSS, students are encouraged to dress according to the standards set for the context of public interactions. However, at a minimum they must dress in accordance with the standards of attire set for routine attendance.

Part IV

Enforcement Standards:
1) Standards of Attire are intended to be self-regulated.

2) Students inappropriately dressed or groomed may be dismissed (from classes) and requested to comply with the standards set forth in this document.

3) Questionable or disputed cases of dress or grooming shall be presented to the Board of Ethical and Professional Conduct (Honor Board).

4) Repeated actions judged to be violations by the Board of Ethical and Professional Conduct will be considered improper professional behavior and may result in disciplinary action.

5) Other policies may be implemented as warranted to ensure adherence to these standards.
Appendix I. Violation of the Standards of Professional Attire Warning Letter

Student’s Name ____________________________

This letter indicates that you have been observed by
_____________________________________ to be in violation of the Harrison School of
(faculty, student, or staff name)
Pharmacy’s Standards of Professional Attire. The violation is reported to have
occurred on _____________________ at ___________________. Specifically,
(date and time) (location)
you were wearing
_________________. This directly violates the Standards of Professional Attire,
Section_________. Abiding by the Standards of Professional Attire was a condition of your
admission contract. We took your signature on this contract very seriously. We expect you to
take the Standards of Professional Attire very seriously and abide by it.

I would encourage you to schedule an appointment to meet with me should you wish to discuss
this matter. You may schedule an appointment by calling 844-8348.

Associate Dean Academic and Student Affairs
Appendix II. Violations of the Standards of Professional Attire Warning and Understanding

I, ____________________________________________, have been warned in writing and
(print name)
in a personal meeting with the Associate Dean for Academic and Student Affairs, that if I should
violate the Standards of Professional Attire again I will be immediately suspended from the
Harrison School of Pharmacy for the current semester and the one immediately following.
Signing this document indicates that I understand the seriousness of the warnings and the
consequences.

___________________________________________
(student’s signature)

___________________________________________
(date)

___________________________________________
(Associate Dean’s signature)

___________________________________________
(date)
7) **Food and Beverages, Issued June 28, 2011**

In an effort to maintain the aesthetics of our professional home, I am asking everyone to adhere to the following guidelines concerning food and beverages:

- Sodas may be consumed in the building (except auditoriums) only if they are in screw capped containers. Coffee and other hot drinks must be in sturdy containers with lids.
- No beverages allowed in the auditoriums except for lecturing professors during class, who may have containers of water.
- Special events in which food is served in the Atrium or Flat Auditorium require authorization in writing from the OASA (i.e., Dr. Maple or, in his absence, Dr. Jungnickel). Faculty advisors from respective organizations must approve these requests before they are submitted to the OASA and the faculty advisor must be present at the event. The organization will be required to thoroughly clean the event location afterwards.
- If there is an accidental spill, the responsible person is expected to clean it up. Supplies are maintained in the restrooms on every floor along with instructions for materials for carpet cleaning. Do not leave any spills for housekeeping or for the next person. Timing for cleanup is critical for some liquids, especially if they contain sugar. If the spill is beyond the scope of supplies provided, please contact the Dean’s Office for assistance between 7:45 am to 4:45 pm or see the custodian in the building before 1:00 pm.
- Eating in the student Lounge is encouraged. However, if meals are eaten in Team Rooms, tables must be cleaned with the appropriate cleaning materials. Excessive trash such as pizza boxes must be taken to the dumpster behind the building immediately. Please do not overfill the trash containers within the Team Rooms.
- No coffee pots, small refrigerators or other small appliances may be utilized in Team Rooms.
- Please report damages to the Team Rooms to the OASA to insure that the spaces are maintained.
- No food or beverages are allowed in laboratories under any circumstances.

Any questions or concerns may be directed to the Office of Academic and Student Affairs.

8) **Student Travel**

The Harrison School of Pharmacy strongly supports student pharmacist’s participation in professional pharmacy organizations. This activity is an important part of professional education and development. In support of this philosophy this policy is being established to support travel activities financially. All student pharmacists participating in sanctioned HSOP activities are eligible to receive funding to the professional meetings. Points which may be redeemed for financial support to attend meetings are earned by participation. Funds that are distributed have been raised by the students and donations specifically directed to the travel fund. None of the funds that are distributed are given by the university, but rather are funds raised by student pharmacists for student pharmacists.

Each year the executive committee of the Student Council is responsible for establishing the maximum value of point based on the total funds raised.
Please Note: All point values are subject to reevaluation each year and can be reallocated based on experiences as the travel fund matures.

An Ad Hoc Points Committee will be appointed by the Student Council President. Proposals for changes in point values can be submitted by the Points Committee and presented to the Executive Committee for approval.

Points Responsibilities

♦ Harrison School of Pharmacy Student Council President and Vice-President:  
  Responsible for the following:  
  1. Allocation of the dollar amount per point based on the funds available - This will take place no later than April 9 of each year  
  2. Determine ceiling placed on reimbursement amount

♦ Recording Secretary: Responsible for the following:  
  1. Student Council attendance points  
  2. Totaling points accrued by each student pharmacist  
  3. Reporting point totals to the Harrison School of Pharmacy treasurer no later than April 1 of each year

♦ Treasurer: Responsible for the following:  
  1. Distribution of points reimbursement checks  
  2. Distribution of checks no later than April 15 of each year  
  3. Issuance of one reimbursement check per member per year

♦ Committee Heads/Chairs: Responsible for the following:  
  1. Recording attendance of committee members for activities within their respected organization.  
     1. Giving copies of event reports to the Student Council President once a semester. The Director of Committees will make a copy and give original to Recording Secretary.

Awarding of Points

1. Redemption of Points: Recording of accumulated points is the responsibility of each student pharmacists on their honor. VIOLATIONS WILL BE THE PURVIEW OF THE HONOR CODE.

2. Exception to the Awarding of Points: If a student wishes to submit that an exception be made to any of the following, the explanation should be made in writing to the executive committee prior to the event.
3. **Point Cut-off:** April 1 of each year will be the last date to earn points for the present academic year.

4. **Travel expenses:** Will be reimbursed to students who attend 1 of the following meetings: APhA Annual, ASHP Mid-Year, NCPA Annual, or any other national meeting approved by the Executive Committee. Also included are state meetings such as AISHP and APA.

5. **Distribution of Funds:** The Executive Committee will establish a cap on allocated funds (2007-2008: 100 pts = $250.00). As funds become available this can be readjusted based on the decision of the Executive committee, interest in the student body, expected expenses to conferences/meetings, etc.

6. **Executive Committee:** 90 Points

   Student Council President  
   Student Council Vice-President  
   Student Council Secretary  
   Student Council Treasurer  
   President AUSSHP/ASHP  
   AUSSHP/ASHP President- Elect  
   President APhA/ASP  
   President-elect APhA/ASP  
   SNPhA President  
   SNPha President-Elect  
   NCPA President  
   NCPA President-elect

   This point allocation was chosen due to the following:  
   a) These are elected positions  
   b) The Executive Committee members are responsible for running the organization  
   c) Do not receive additional points for attendance at Executive Committee Meetings  
   d) Do not receive additional points for completing their responsibilities as an officer.

7. **Committee Participation:** Committee Heads (possible 60 points cap)

<table>
<thead>
<tr>
<th>Committee</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operation Diabetes</td>
<td>60</td>
</tr>
<tr>
<td>Operation Immunization</td>
<td>60</td>
</tr>
<tr>
<td>Heartburn Awareness</td>
<td>60</td>
</tr>
<tr>
<td>PSS Committee</td>
<td>50</td>
</tr>
</tbody>
</table>

   a) Committee Participation Points will be earned by committee members on a *per hour* participation basis, NOT on a *per event* basis.
   b) Committee Chair must **organize events per semester** in accordance with the parent organization to earn points.
c) Committee Chair does not have to be present at events, but must appoint a responsible member of the committee to take attendance for points.
d) Committee Chairs are not limited to one committee; they may earn points by participation in other committees.
e) Committee Heads are to involve all committee members, therefore this requires the delegation of work among members.
f) Committee Heads are **required** to attend two meetings per semester with the Executive Committee. No points will be awarded for attending these meetings.
g) Committee Co-Chairs will be allocated ¾ the amount of points stated above.

8. **Bi-Weekly Student Council Meetings:** 1 Point  
   a) Attendance sheets circulate each Wednesday  
   b) **All** student pharmacists are entitled to these points, unless this is previously part of your elected position (i.e. Organization/Fraternity President or SGA representative)

9. **Universal Activities:** 1 Point per Hour of Participation  
   a) Health Fairs  
   b) Student Council Activities  
   c) Lee County Pharmacists Association Meetings (Meetings are generally held on Tuesdays at 7:00 pm)  
   d) APA district meetings  
   e) Special Projects (i.e. quilt raffle, ball drop: 2 tickets= 1 point)  
   f) School Tailgates (clean up, talking with sponsor representatives, etc.)  
   g) Harrison School of Pharmacy Annual Golf Tournament (participation, clean-up, set-up)  
   h) **All** student pharmacists are entitled to these points  
      • Must be attended in order to receive participation points.  
      • Therefore, this is an **all or nothing** concept.

10. **Professional Meeting Attendance:**  
    • For each meeting, the student must attend 4 to 5 specific sessions as predetermined by the Executive Committee for students in order to secure points.  
    • No points will be awarded if all sessions are not attended.  
    • Therefore, this is an **all or nothing** concept.  
      a) APhA Annual meeting: 7 Points  
      b) APhA-ASP Mid-Year Meeting (MRM): 5 Points  
      c) ASHP Mid-Year Clinical Meeting: 7 Points  
      d) NCPA National Meeting: 7 Points  
      e) ASHP Annual meeting: 5 Points  
      f) ACCP Meeting: 7 points  
      g) APA Annual Meetings: 10 points  
      h) AISHP Meetings: 10 points  
      i) All meetings: participation in presentation of posters, etc. : 10 points.  
      j) Other meeting may have points assigned at the discretion of the Executive committee.

11. **Professional Organization Offices:**
a) Run for Regional Office: 3 Points: If elected will receive additional 3 points for holding office due to partial reimbursement by APhA
b) Regional or National Chapter Delegate: 2 Points
c) National Standing Committee Representative: 10 Points
d) Run for National Office: 5 Points, if elected will receive additional 5 points for holding office.
e) State Standing Committee Representative: 10 Points

9) Chemical Impairment

Health care professionals have a responsibility to their patients to practice their professions free from chemical impairment or dependency. Student pharmacists in the Harrison School of Pharmacy (HSOP) begin providing care to patients from the time they enter the HSOP and, thus, are viewed as members of the pharmacy profession who are in training. Since providing patient care while impaired by chemical substances has the potential for harming patients, it is the responsibility of faculty, staff and student pharmacists to intervene at times when it appears that a student pharmacist may be chemically impaired. Furthermore, the HSOP supports the prerogative of health care entities that serve as training sites for our students to require drug testing of students prior to the start of clinical experiences.

Both substance abuse and chemical dependency can impair one’s ability to provide appropriate care to patients. Substance abuse refers to harmful use of a psychoactive substance where the use continues despite continuing negative consequences such as failure to meet home, work or school obligations; hazardous behaviors such as driving while intoxicated; or reoccurring legal difficulties. Chemical dependency is defined as psychological or physiological dependence on a psychoactive substance. Potential substances include alcohol, prescription and OTC drugs (obtained legally or illegally), and street drugs.

Within the HSOP, substance abuse and chemical dependency are viewed as diseases with physiological, psychosocial, and behavioral components. Both are amenable to treatment, and recovery is possible for individuals who complete appropriate treatment programs and assume personal responsibility for management of their disease.

This purpose of this policy is to facilitate the identification of student pharmacists who may be chemically impaired, to promote appropriate treatment and recovery of these individuals, and to prevent patient harm from occurring. At least 10 percent of pharmacists will become chemically impaired at least some time during their careers. Professional organizations and licensing boards have become increasingly concerned about the problem of impaired pharmacists and have developed effective assistance programs. Pharmacists who are successful in treatment and recovery programs often have the opportunity to reenter practice as long as they continue to be successful in their recovery. The treatment and recovery process for pharmacists must assure appropriate long term monitoring to provide appropriate accountability and safeguards for patients. This same principle applies to student pharmacists where follow up and monitoring must extend beyond their years in pharmacy school and into at least the first several years of practice as a licensed practitioner. Since earlier treatment of substance abuse or dependence is associated with a more favorable outcome, student pharmacists who suspect that they or their colleagues may be chemically impaired are encouraged to report themselves or
others so that treatment can begin before their disease progresses. Student pharmacists who are chemically impaired will be assisted with treatment, but suspended from the HSOP and not allowed to return until such time as they have demonstrated recovery to the point where patient care will not be endangered.

All HSOP student pharmacists are required to be licensed as interns by the Alabama Board of Pharmacy and are accountable to the Board of Pharmacy’s Standards through the Recovering Impaired Pharmacist (RIP) program. Moreover, the RIP program is specifically designed for the specific needs of impaired pharmacists and student pharmacists. Therefore, all treatment, recovery, and long-term monitoring of HSOP student pharmacists will be conducted by the RIP program. Student pharmacists who are found to be chemically impaired will be asked to voluntarily surrender their internship licenses and will have their license revoked if they fail to surrender it voluntarily. Student pharmacists with revoked internship licenses will not be allowed to reenter the HSOP until such time as the Board of Pharmacy reinstates their license. The HSOP also supports the Board and law enforcement agencies in taking appropriate action in cases where student pharmacists may have violated federal or state laws.

**Procedures:**

1. HSOP student pharmacists who suspect they may be chemically impaired are encouraged to voluntarily report themselves to the Associate Dean for Academic and Student Affairs, so that appropriate evaluation and treatment may be begun.

2. It is the professional responsibility of all HSOP faculty, staff, and student pharmacists to report or intervene in cases where they suspect a student pharmacist to be chemically impaired. The Associate Dean for Academic and Student Affairs should be notified in those cases where student pharmacist impairment is suspected. Conduct which may suggest chemical impairment includes: a decline in academic performance, changes in behavior, failure to carry out professional responsibilities, repeated tardiness or absenteeism, psychomotor deficiencies, and observed intoxication.

3. The Associate Dean for Academic and Student Affairs will investigate student pharmacists who are suspected of being chemically impaired. The Associate Dean will meet with each suspected student pharmacist and present the findings that support possible chemical impairment. At this meeting, student pharmacists will be provided the opportunity to respond to the Associate Dean’s findings related to chemical impairment and to present other information pertinent to this matter. The HSOP reserves the right to require student pharmacists to undergo drug screening as part of this initial evaluation, when findings exist that are suggestive of chemical impairment.

4. After the Associate Dean’s initial evaluation, student pharmacists who are suspected to be chemically impaired will be referred to the administrator of the Board of Pharmacy’s RIP program for further evaluation. Student pharmacists who refuse to report voluntarily to the RIP program’s administrator will be referred directly to the Board’s Executive Director.
Student pharmacists may be requested by the Board to surrender their internship license at this time.

5. After the student pharmacist is evaluated by the RIP program, the RIP program administrator will report his findings to the Board of Pharmacy and the Associate Dean of the HSOP. This will include a recommendation that includes an appropriate treatment and recovery program as well as a recommendation concerning revocation of internship license. After the Board of Pharmacy’s decision, the RIP program administrator will notify the HSOP concerning the student pharmacist’s internship licensure status.

6. Depending on the circumstances, the HSOP may suspend a student pharmacist from the HSOP during the time when he/she is being evaluated. The Associate Dean will notify the student pharmacist of the suspension and the reasons why this action is being taken. Student pharmacists will at this time be provided the opportunity to respond to this action by providing the Associate Dean with additional information pertaining to this matter.

7. If a student pharmacist’s internship license is suspended, revoked, or voluntarily surrendered, he/she will be immediately suspended from the HSOP.

8. Student pharmacists may be reinstated into the HSOP after the School is notified by the Board that the student pharmacist’s internship license has been reinstated on a probational basis. At the time of returning to the HSOP, the student pharmacist will be required to acknowledge in writing their recognition of appropriate professional behavior that includes adherence to all RIP program stipulations.

9. The RIP program will monitor the student pharmacist’s ongoing recovery and the administrator will notify the HSOP’s Associate Dean immediately should a student pharmacist fail to comply with any aspect of his/her recovery and monitoring program. Ongoing monitoring will continue until such time as the student pharmacist graduates or otherwise leaves the HSOP. Should a student pharmacist fall out of compliance, the HSOP will take appropriate action based on discussions between the RIP program administrator and the Associate Dean. Potential actions could include additional suspensions from the HSOP and subsequent expulsion from the School in cases of repeated noncompliance during recovery and monitoring. Revocation of a student pharmacist’s internship license by the Board will result in a minimum action of suspension from the HSOP. The Associate Dean will communicate to the student pharmacist all disciplinary actions taken by the HSOP against him/her and provide the student pharmacist the opportunity to respond with pertinent information.

10. Students who are arrested or convicted for violation of federal or state laws related to drug diversion are subject to appropriate disciplinary action.

10) Student Computer Policy
HSOP students must have a current laptop computer to satisfy the laptop requirement. You are not required to purchase from the vendors below. HSOP OIT fully supports Windows-based systems, and provides limited support for Apple/Mac hardware and applications.
The laptops are used for a variety of tasks, including: on-line research, website development, email contact with faculty and other students, course evaluations, on-line testing, pharmacotherapeutics, presentation design and development, on-line course material access and download, Rx software installation, electronic medical records, portfolio applications, general coursework documentation, database development, assignment submissions, etc. Each year new uses are integrated into the curriculum.

NOTE: Incoming students are NOT required to have their laptops set up by HSOP OIT this year. Most resources are now online. You can download free AntiVirus software (Sophos/Microsoft Security Essentials, AVG) from AU Install once you have your username and password established for login. You should also install Tiger Print software for printing to the local printers in the Walker Bldg. prior to your arrival for the Foundations course. Go to: www.auburn.edu/download

**Laptop Minimum Requirements:** Most current laptop models will meet basic minimum hardware requirements with little or no configuration upgrades. If you own a laptop that is currently running XP or Vista, you should be able to use it for the foreseeable future. You are not required to have Windows 7; however, most new systems will come with Windows 7, so that is why the minimum requirements list as such.

- Operating System: Windows 7 Professional (XP or Vista are also acceptable)
- Microsoft Office 2007/2010 (Pro/Ultimate recommended)
- Processor: Dual-Core (or comparable) Processor 2.0 GHz or better
- RAM: 2 GB (3-4 GB recommended)
- Hard Drive: 80 GB or more
- Optical Drive: DVD/CD+/-R/RW Recorder
- Networking: integrated 802.11 b/g/n compatible wireless and 10/100 ethernet port

**Suggested Additions or Upgrades**

- Windows 7 Media Center
- USB Flash Drive 1 GB or more
- Color Printer - laser or inkjet
- Webcam - built-in or USB

Auburn University Office of Information Technology has negotiated with various vendors to provide our students with the latest technology at a considerable discount. Each program is a bit different, and several makes and models of laptops will be available. Please review the information and on the vendor websites to make the best purchase decision. Go HERE for more information.

Some considerations to take into account:

- Make and Model of the hardware (Sony, Dell, HP, Apple, Lenovo, and many others)
- Price (from about $500 and up)
- Features (consider processor speed (minimum Dual-Core (or compatible) 2.0 GHz), screen size, weight, memory/RAM (2GB minimum - recommend 4GB), hard drive size (80GB minimum), etc.)
- Networking (integrated wired and wireless preferred - 802.11b/g compatible)
- Webcam - used for connecting to faculty via videoconferencing.
• Pre-Installed Software & Applications (we strongly recommend Windows 7 and MS Office 2007/2010 Professional or Ultimate - includes Access)
  NOTE: Academic versions are okay - check with the AU Bookstore for availability and pricing
• AU provides antivirus software to all students free of charge, so you do not need to purchase an antivirus application
• AU provides Outlook email and scheduling application
• HSOP provides several Rx applications via direct install or network
• Warranty (1 year is typically standard, with multi-year at additional cost)
• Repair and Damage Options (fast turnaround, local service)
• Peripherals (such as PDAs, printers, memory sticks, CD-RW, DVD, etc.)
• Financing Availability and Terms (multi-year options available)

Wireless access (802.11b/g/n) is available throughout HSOP. However, you will continue to need a standard 10/100 ethernet port - either integrated or via PCMCIA card.

If you have an existing laptop that meets or exceeds minimum specifications, or can be upgraded to meet specs, you do not need to purchase an additional laptop. Apple Macintosh laptops are acceptable, but not all applications are compatible with Macs. There is limited support for Mac on campus.

HSOP policy requires that you have a laptop available for your use.
Contact the Office of Academic and Student Affairs for more information.
You are not required to purchase selected models or from the vendors on this page.

If you have any questions or concerns regarding your laptop purchase, contact the vendor for specific hardware and financing information, or HSOP OIT for general information on issues relating to software, networking requirements, etc. You may contact any of the team:

Barry McConatha  334-844-8362  
Chuck Bolivar     251-445-9323  
Dennis Duty      334-844-8308  
Don Davino       334-844-8361  

Remember, this is a purchase, not a lease. This will be your computer. All hardware and software are your responsibility. Warranty service and repair must be handled through the vendor. HSOP OIT will be available to diagnose problems and handle networking issues.


The purpose of the Pharmacy Seminar Series (PSS) is to provide you with exposure to important pharmacy topics and issues, via presentations made by local and national leaders in pharmacy, and to provide exposure to clinical cases and other pharmacy related topics. I am always interested in finding thought provoking speakers and would appreciate any suggestions you might provide.
PSS is an important component of your pharmacy education and attendance is **MANDATORY**. The following policies will govern PSS attendance during 2011-2012 academic year.

1. Up to 14 Professional Seminars will be scheduled during each academic semester.

2. Professional Seminars will generally be scheduled at 1:00 PM on Fridays. Some may be scheduled at other times if this is necessary to accommodate a particular speaker’s schedule.

3. Student Pharmacists in the P1 through P3 classes are required to attend **ALL** scheduled Pharmacy Seminars. Student Pharmacists who require an excused absence from any PSS must notify Mrs. Charlotte Cheatham (ccc0010@auburn.edu) by email prior to the given week’s PSS and request an excused absence. Requests for excused absences must state the reason for an excused absence being needed. Mrs. Cheatham will notify you regarding the approval/disapproval of your request for an excused absence.

4. PSS will be viewed in the following venues:
   - Auburn: Tiered Auditorium, Flat Auditorium, Rooms 1101, 1114, 1116, 2109 and 2125
   - Mobile: Rooms 240 and 254

5. Student Pharmacists will be assigned to these venues according to their PPE teams, and **MUST** participate in their assigned rooms. A schedule of room assignments by PPE Teams will be provided at the beginning of each semester. **All student pharmacists are expected to attend PSS in their assigned rooms. Failure to attend PSS in your assigned room may result in you counted as being absent.** Faculty members are encouraged to participate in PSS with their assigned teams. P3 Team leaders are encouraged to engage their teams in discussion of the materials presented in PSS.

6. P4 Student Pharmacists and off site faculty members are also encouraged to participate in PSS and may view live and previously recorded PSS presentations via the Polycom system.

7. **Student Pharmacists are required to demonstrate appropriate professional behavior at all PSS presentations. Talking, reading or studying materials from other classes; using laptop computers; and other distracting, disruptive or disrespectful behaviors will not be permitted. Engaging in such behaviors violates the Harrison School of Pharmacy’s Professionalism Standards, and appropriate actions will be taken in the case of violations. This applies to all venues where student pharmacists are viewing PSS.**

8. The P3s for each PPE team are responsible for submitting an attendance report for the members of their team. For those teams that are Mobile Campus/Auburn Campus split teams, separate reports will be submitted for the team members on each campus.
Please note that an attendance sheet has been prepared for each PPE team. These attendance sheets are to be picked up at the receptionist desk (at the Auburn and Mobile Campuses) on the Thursday and Friday prior to each Seminar. At the conclusion of the Seminar they are to be returned to the reception desks no later than 3 PM.

Record only those team members who are present, even if you are aware that they have been approved for an excused absence.

9. Please note that falsifying PSS attendance records is a violation of the HSOP’s Honor Code.

10. Student Pharmacists who have been granted excused absences for a particular Pharmacy Seminar are required to view the recording on the HSOP’s Polycom system. (Please review Polycom instructions that have previously been provided to you by Mr. Davino from the Office of Information Technology). After viewing the seminar, students with excused absences are required to notify Ms. Cheatham via email.

11. Student Pharmacists who have not completed all PSS by the end of an academic semester, or have unexcused absences, will be reviewed by the Committee on Academic Requirements and Professionalism.

12) Student E-mail Account – Memo from Dean Evans dated November 8, 2010

Email is recognized by Auburn University and the Harrison School of Pharmacy (HSOP) as an official means of communication. The following policies and procedures govern the use of email and email accounts within the HSOP.

1. All members of the HSOP (faculty, staff, graduate students, and student pharmacists) are expected to check their email accounts regularly and respond to emails in a timely fashion. HSOP members may be held accountable for consequences that occur as a result of not regularly reading and responding to email.

2. Auburn University email accounts are to be used for University/HSOP purposes. HSOP members must adhere to University policies regarding email accounts and their usage.

3. HSOP members must adhere to appropriate courtesy and etiquette when using email, and must recognize that, at times, email may not be the most appropriate way to communicate with others in the organization.

4. HSOP members that wish to use their email account to buy, sell, or trade items to other members of the HSOP community must adhere to the following guidelines for the subject lines of such emails. Individuals NOT wanting to receive these types of emails can create rules (i.e., filters) to move any email with the following subject lines to their Trash (or similar) folder. Any deviations from these requirements in an effort to evade established rules/filters will be viewed as a breach of professionalism.

   1. “For Sale: <Item><Cost>”
2. “Wanted: <Item><Cost>”
3. “For Trade: <Item>”
4. Example: “For Sale: 2 Student Football Tickets $100”

13) Student Pledge of Professionalism

As a student of pharmacy, I believe there is a need to build and reinforce a professional identity founded on integrity, ethical behavior, and honor. This development, a vital process in my education, will help ensure that I am true to the professional relationship I establish between myself and society as I become a member of the pharmacy community. Integrity must be an essential part of my everyday life and I must practice pharmacy with honesty and commitment to service.

To accomplish this goal of professional development, I as a student of pharmacy should:

DEVELOP a sense of loyalty and duty to the profession of pharmacy by being a builder of community, one able and willing to contribute to the well being of others and one who enthusiastically accepts the responsibility and accountability for membership in the profession.

FOSTER professional competence through life long learning. I must strive for high ideals, teamwork and unity within the profession in order to provide optimal patient care.

SUPPORT my colleagues by actively encouraging personal commitment to the oath of Maimonides and a Code of Ethics as set forth by the profession.

INCORPORATE into my life and practice, dedication to excellence. This will require an ongoing reassessment of personal and professional values.

MAINTAIN the highest ideals and professional attributes to ensure and facilitate the covenantal relationship required of the pharmaceutical care giver.

The professional of pharmacy is one that demands adherence to a set of rigid ethical standards. These high ideals are necessary to ensure the quality of care extended to the patients I serve. As a student of pharmacy, I believe this does not start with graduation; rather it begins with my membership in the professional college community. Therefore, I must strive to uphold these standards as I advance toward full membership in the profession of pharmacy.

Professionalism Assessment Policy:
http://pharmacy.auburn.edu/prospective_students/professional_degree/professionalism_assessment_policies.pdf.

14) Hargreaves Faculty Mentor Award

In the professions, mentors are usually faculty or practitioners who are there when you need them; who assist you to explore solutions to your problems; who help you develop a professional philosophy; who challenge you to think about issues; who may simply listen without inflicting judgment; who are students' advocates while in School and maybe throughout their career. Mentors usually share of themselves freely and enjoy their role. You may not like them all of the time, but there is always a viable connection that is safe and nurturing. It is not likely that you would consider them your best friend but that too is possible.
Preamble

As a professional school, the Harrison School of Pharmacy (HSOP) functions as a community of colleagues (faculty members, staff members, graduate students, and student pharmacists) who work together to advance the HSOP’s mission, vision and goals. These collegial relationships are embodied in the Covenant between Faculty and Students of the Harrison School of Pharmacy (Appendix A), which describes the commitments that faculty members and student pharmacists make to each other in the context of a health professions school.

In the context of a professional school, it is important that all members take responsibility for holding their colleagues accountable for maintaining professional behavior and in treating one another appropriately. At times it becomes necessary for students to have appropriate channels and procedures for reporting perceived violations by faculty and staff members of Auburn University (AU) and HSOP policies and procedures, as well as violations of the School’s Covenant. As professionals in training, student pharmacists must recognize that they have a responsibility to the HSOP and the profession of pharmacy to report violations that may be occurring. This same responsibility applies to graduate students who are pursuing education in the context of a health professions school. Students are often hesitant to report such matters, fearing retaliation from faculty and staff members. However, students are protected by University and HSOP policies, which prohibit retaliation towards those filing grievance reports. It is also important for students to understand that if student complaints and grievances are to be appropriately addressed by the HSOP’s faculty and administration, it is often not possible to keep student identity anonymous.

This document summarizes the various AU and HSOP policies governing student grievances and complaints, including their reporting, handling and disposition. A brief summary related to each type of grievance/complaint is provided along with a reference to the relevant AU or HSOP policy.

I. Student Academic Grievances

Student academic grievances are heard and resolved via the Auburn University Student Academic Grievances Policy which is available at:

https://sites.auburn.edu/admin/universitypolicies/Policies/StudentAcademicGrievancePolicy.pdf

As indicated in the policy, student academic grievances are to be resolved at the lowest possible level. Student pharmacists with academic grievance issues should initially try to resolve such issues with the pertinent faculty member. If the student is not satisfied that a fair and equitable outcome has been obtained, he or she may subsequently take the grievance in the following order to the Director of Experiential Learning (if a practice experience course), Department Head, Associate Dean for Academic and Student Affairs, Dean, and University Student Academic Grievance Committee.

II. Harassment and Discrimination against Students:
As a unit within Auburn University, the HSOP complies with all regulations regarding unlawful discrimination against or harassment of its students. The Auburn University Student Anti-Harassment Policy is available at:

https://sites.auburn.edu/admin/universitypolicies/Policies/PolicyRegardingtheProhibitedHarassmentofStudents.pdf

This policy describes prohibited forms of discrimination or harassment related to a student’s race, color, sex, religion, national origin, age, sexual orientation, or disability (protected classes) by other students, employees, or university agents.

Students who believe they have been illegally harassed or discriminated against on the basis of their race, color, sex, religion, national origin, age, sexual orientation, or disability, should report incidents to the Office of Affirmative Action/Equal Employment Opportunity (AA/EEO), as outlined in the Anti-Harassment Policy. HSOP faculty, staff, and administrators should assist students in directing their harassment and/or discrimination complaints to the Office of AA/EEO.

III. Grievances and Complaints due to Violations of the Covenant between Faculty and Students of the Harrison School of Pharmacy

As previously stated, the Covenant between Faculty and Students of the Harrison School of Pharmacy (Appendix A) describes the commitments that faculty members and students make to each other in the context of a health professions school. Situations may arise where faculty members’ actions are contradictory to the Covenant, but do not violate specific Auburn University Policies. Examples include, but are not limited to, the following: 1) behavior that violates the HSOP’s Tenets of Professionalism, 2) harassment or discrimination which is not of a sexual nature or related to members of a protected class, 3) failure to meet commitments to student pharmacists or respond to legitimate student requests, 4) academic misconduct, and 5) retaliation against students who have voiced legitimate complaints concerning faculty members.

Whenever possible, students should try to resolve issues they have with faculty members on an informal basis. If informal resolution is not possible, the student(s) should report complaints and grievances regarding a faculty member’s violation of the Covenant to the faculty member’s immediate supervisor (this will usually be a department head). If the student wishes to file a formal complaint or grievance, the report should be made in writing and include all pertinent facts surrounding the matter. The supervisor will investigate the matter and work in conjunction with the Dean and Associate Dean for Academic and Student Affairs to resolve the issue between the student pharmacist and the faculty member. In cases where students believe their grievance or complaint has not been sufficiently addressed, they may present their concerns (as appropriate) to the Associate Dean for Academic and Student Affairs or Associate Dean for Research and Graduate Education, and subsequently to the Dean.

All complaints and grievances will be handled in a confidential manner, which means that information reported will only be shared with others on a need to know basis. Students must understand that complaints and grievances can seldom be effectively addressed if they remain anonymous. Furthermore, professionals have the responsibility to hold others in their profession accountable in cases where professional standards are violated.
Faculty members will be provided sufficient opportunity to respond to student complaints and grievances at each step in the process.

Written documentation related to each student complaint or grievance will be maintained in the Office of the appropriate Associate Dean. Such documentation will include a copy of the written complaint or grievance, supporting documentation surrounding the complaint or grievance, and a response as to how the grievance has been addressed and/or resolved. Written communication will be provided to the student(s) filing a complaint/grievance describing how the grievance has been addressed and/or resolved.

IV. Grievances Related to Violations of ACPE Standards

Student Pharmacists with grievances alleging that the HSOP is violating the Standards of the Accreditation Council for Pharmacy Education (ACPE) should report them in writing to the Associate Dean for Academic and Student Affairs. The Associate Dean will investigate the violations alleged and manage them in accordance with the HSOP’s approved policy (Appendix B).

APPENDIX A
A Covenant between Faculty and Students of the Harrison School of Pharmacy

FACULTY

• We pledge our best effort to ensure a high quality educational program for our students.
• As mentors, we will maintain high professional standards in our interactions with students, our colleagues, and staff.
• We respect all students regardless of gender, race, national origin, religion, or sexual orientation; we will not tolerate anyone who disrespects students because of biased attitudes or beliefs and will take appropriate actions against such individuals.
• We pledge to be cognizant when students are having personal or academic problems and seek appropriate resources to provide help.
• In encouraging and nurturing the intellectual, personal, and professional growth of our students, we celebrate expressions of professional attitudes and behaviors, as well as academic achievement.
• We do not tolerate any abuse or exploitation of our students (or faculty).
• We encourage any student who experiences mistreatment or who witnesses mistreatment or unprofessional behavior to report the facts (preferably in writing) immediately to appropriate faculty or staff; we treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind.

STUDENTS

• We pledge our utmost effort to acquire the knowledge, skills, attitudes, and behaviors required to fulfill all educational objectives established by the faculty AND our obligations to patients.
• We hold the professional virtues of honesty, compassion, integrity, fidelity, and dependability as standards to conduct in a profession.
• We respect all faculty members, staff, and fellow students regardless of gender, race, national origin, religion, or sexual orientation; we will not tolerate anyone who disrespects faculty, students,
or staff because of biased attitudes or beliefs and will take appropriate actions against such individuals.

- We pledge to conduct ourselves as professionals, demonstrating respect for faculty, colleagues, and staff.
- In meeting our professional obligations, we pledge to assist our fellow students in meeting their professional obligations as well.

* Adapted from, Cohen, JJ. Our compact with tomorrow’s doctors. Academic Medicine. 77;6: 475-480.
Appendix B
Auburn University Harrison School of Pharmacy Policy on Reporting Grievances Related to Violations of ACPE Standards

The Accreditation Council for Pharmacy Education (ACPE) is the accrediting body for schools and colleges of pharmacy. The ACPE requires each college/school of pharmacy to have a policy for handling student complaints in cases where such schools or colleges are alleged to be in violation of ACPE Accreditation Standards. This policy governs only those instances where students allege that one or more ACPE Standards have been violated; the standards are available at https://www.acpe-accredit.org/pharmacists/standards.asp. Students with academic grievances may have such grievances addressed according to established Auburn University policies maintained on the website of the Auburn University’s General Council at https://sites.auburn.edu/admin/universitypolicies/default.aspx.

Policy:

The faculty, staff, and administration of the HSOP are committed to maintaining a pharmacy education program that meets and exceeds accreditation standards. The School is committed to correcting those areas where standards are not being met and encourages student participation in this process. Students are encouraged to voice and discuss concerns they have about the School’s adherence to accreditation standards. In cases where a formal complaint is deemed necessary, the following procedure will be followed.

Procedure:

1. Students with complaints alleging that the HSOP is not adhering to ACPE Standards must present their complaints in writing. Complaints must identify the specific standards that are not being adhered to and include evidence to support the complaint.
2. Written complaints should be submitted to the HSOP’s Associate Dean for Academic and Student Affairs.
3. The HSOP’s Associate Dean for Academic and Student Affairs will investigate the complaint and provide a report to the HSOP’s Dean and Executive Committee. The Dean and Executive Committee will make a determination on the validity of the complaint and provide a written response to the student or students making the complaint.
4. Complaints and responses that are determined to be of a substantive nature with regard to accreditation matters will be shared with the HSOP’s faculty and the student body.
5. The Associate Dean for Academic and Student Affairs will maintain a complete file of all complaints received and their disposition. ACPE has access to this information as part of the routine accreditation review process.

16) Team Room Usage – Revised 7/11/12

1) The team rooms assigned to P3s are designated for P3 use only. No other students are allowed to use these rooms for any reasons other than if they are accompanied by a P3 assigned to that room.
2) PPE session proceedings are highly confidential, and patient health information privacy must be maintained. If you must interrupt a PPE team meeting to retrieve something out of your team room, please honor the confidentially of the discussions and minimally disrupt the proceedings.

3) It is not permissible for any student to be asked or coerced into leaving his/her assigned team room by other students. However, if a student is not in his/her assigned team room, and is causing a disturbance to others studying, that person may be asked to return to his/her own team room.

4) Priority for the use of P1 and P2 team rooms will be as follows:

   1. Students with scheduled PPE meetings
   2. Assigned student groups working on projects that are part of courses
   3. Students who are studying in their assigned room
   4. Ad hoc study groups
   5. Individual students who are studying in a room not assigned to them
   6. Students desiring leisure time (if others are studying in your room please use the lounge)

5. Students should be aware that team rooms may at times be reserved for HSOP activities. Such use of team rooms is limited to only those HSOP activities that cannot be accommodated by other space on the Auburn and Mobile campuses, for example, admissions interview activities. Instructional use of team rooms is limited to IP, PPE Team Meetings, PSS, and other educational activities that require assigned team room members to work as a group.

   Should team rooms be required for the aforementioned purposes, students will be notified of the reservation and be directed to a new room for PPE and/or IP meetings. The students assigned to any team room that is being reserved should find an alternate study room during the period of time the room is reserved. Students should then follow the before mentioned policies regarding team room use.

6. The Drug Information Center, Tiered Auditorium, Flat Auditorium, and Seminar Room 1206 shall be designated as quiet study spaces when not being used for scheduled classes, meetings, or any other event listed on the Master Schedule.

7. For every team room, no one may erase any portion of the dry-erase boards except for a student assigned to that room. Easels may be available for student use as an alternative to using a dry-erase board.
18) Student Medical Insurance

Student pharmacists are subject to continuous health risks secondary to patient care activities. The impact of paying for medical illnesses privately can be devastating to personal health, financial security and academic success. It is therefore in the best interest of all student pharmacists to have medical insurance coverage. Starting in the Fall Semester of 2004, all student pharmacists in the Doctor of Pharmacy program are required to maintain medical insurance coverage throughout the time they are enrolled in the Harrison School of Pharmacy (HSOP). Proof of insurance must be provided at the beginning of each academic year. HSOP officials must be notified if insurance coverage is changed or lost.

 Procedures:

1. At the beginning of each academic year, and prior to the start of the advanced practice rotations, all student pharmacists will be required to submit documentation of medical insurance that is currently in force. In the cases where the insurance policy covers members of a family unit, the documentation must clearly specify the student pharmacist as one of the individuals who is insured. It must also clearly show the dates in which the insurance coverage is in effect.
2. All documentation will be submitted to designated personnel in the Office of Experiential Learning (OEL).
3. All documentation must be submitted by the third class day of Fall Semester or, in the case of student pharmacists in the 4th professional year, prior to beginning of the first advanced practice rotation.
4. Student pharmacists will be required to enroll in the medical insurance program sponsored by the Auburn University Student Government Association if they lose medical insurance coverage or do not have medical insurance coverage from another policy.
5. Student pharmacists are required to notify designated OEL personnel at any time when their medical insurance changes or when coverage is lost.
6. Student pharmacists who do not maintain valid medical insurance will be disenrolled from the HSOP.
7. Student pharmacists are advised to carefully evaluate their health insurance coverage to assure that it is adequate to cover high cost clinical conditions. The Office of Academic and Student Affairs will be glad to assist students with questions about the adequacy of their coverage.

19) Facility Work Orders

Issued June 9, 2009

In an effort to coordinate and consolidate work that is required for HSOP physical facilities the following policy is being implemented. Improvements will be facilitated through the use of a single contact person with facilities.

Policy: All facilities work orders for normal building maintenance issues such as plumbing, ceiling lights outage, etc should be called in to the Work Order Desk at 844-4357 (4-help).

Work orders requiring funding, installation, or special arrangements or handling should be routed through the Dean’s Office after receiving approval by the Department Head. Departmental support personnel are to complete the appropriate request forms with funding sources prior to forwarding it to the Dean’s Office. It will be the responsibility of the Dean’s office to submit all these requests to facilities.
20) Academic Guidelines

1. The Implementation of all guidelines will be in addition to that of existing policies and standards of the University as published in the Current AU Bulletin.

2. Admission to the Harrison School of Pharmacy (HSOP) is contingent on maintaining a cumulative GPA of at least 2.5 in prepharmacy course work. A student may not enter the HSOP while on academic warning status or academic suspension. To be eligible for enrollment, students must complete all prerequisite coursework with grades of C or better.

3. Early Identification of Academic Difficulty

3.1. During the P1 year, P2 year, and the first phase of the P3 year, students’ academic performance will be monitored by the Office of Academic and Student Affairs throughout the semester.

3.2. Anyone identified as having less than C performance in any required HSOP course will receive written communication indicating the need for improvement and the need to meet soon with the Coordinator of Student Services to obtain assistance. Commonly suggested sources of aid include: the course instructor(s), the Auburn University Office of Academic Support, the HSOP Counselor, PPE faculty mentor(s), and the Coordinator of Student Services. PPE faculty mentors will be notified of those students on their PPE teams who are experiencing academic difficulty.

4. Students must maintain a cumulative and per semester HSOP GPA of at least 2.25 in all professional course work. A student who fails to attain a 2.25 HSOP GPA in any academic semester will be placed on academic probation.

4.1. The Office of Academic and Student Affairs may request letters of evaluation regarding the student entering academic probation from selected faculty members (i.e., instructors, PPE mentors, etc.). These letters will be placed in the student’s file, will be presented to Committee on Admissions and Academic Requirements (CAAR) in academic appeal cases, and may be used to develop an academic recovery contract for the student.

4.2. To be removed from probation the student must achieve at least a 2.25 semester GPA in each of the next two academic semesters, and the student’s cumulative GPA must be at or above 2.25 within one academic year after the probationary semester. Students who fail to achieve this will be subject to being dropped from the rolls of the HSOP.

4.3. During the probationary period, the student must successfully complete an academic recovery contract developed with the Associate Dean for Academic and Student Affairs and approved by CAAR. The contract will be the result of an evaluation of the student to determine the possible reasons for academic difficulty and development of a plan to address the areas contributing to academic difficulty. Academic recovery contracts will include, as appropriate, 1) a revised plan of academic study including courses to be repeated, 2) a statement of academic performance expectations, 3) description of other remedial work required, and 4) description of other actions to be taken by the student to facilitate academic success. All students will also be required to
take the Pharmacy Practice Experience (PPE) Course each semester they are enrolled in the HSOP except for their P4 year.

4.4. Students will have a cumulative GPA of 2.25 or higher prior to beginning the Advanced Practice Experience portion of the curriculum.

4.5. A minimum cumulative GPA of 2.25 is required for graduation from the HSOP.

5. A student who receives a failing grade (F or U) in any professional course work must successfully complete an academic recovery contract developed with the Associate Dean for Academic and Student Affairs and approved by the Committee on Admissions and Academic Requirements (CAAR).

5.1. If a student receives two or more failing grades (F or U) in any professional course work, the student’s name will be removed from the rolls of the HSOP for scholastic deficiency.

6. A student who receives a D in any professional course work will receive a notice of Academic Warning from the Office of Academic and Student Affairs and will be required to meet with the Coordinator of Student Services to review his or her academic progress. The letter will outline the expectation that the student’s academic performance will improve and include a list of resources for assistance as stated in 3.2. Students receiving more than one D throughout the curriculum will be reviewed by CAAR. Such students may be required to complete an academic recovery contract developed with the Associate Dean for Academic and Student Affairs and approved by CAAR.

7. Periodically students will be required to take examinations to assess their ability to integrate the knowledge, skills, and attitudes learned to date. Students with unsatisfactory performance on these examinations will be reviewed by CAAR and may be required to complete remedial course work.

8. The following policies will be applied to repeating courses in the professional curriculum of the HSOP:

8.1. All F or U graded course work must be successfully repeated as soon as the course is offered again.

8.2. Students are encouraged to repeat courses in which they received a grade of D, and may be required to do so as a condition of an academic recovery contract.

8.3. A course in which a student receives a grade of C may be repeated only with written permission of the student’s academic dean.

8.4. A course in which a student receives a grade of B or A may not be repeated under any conditions. Courses specifically designated as repeatable in the Auburn University Bulletin are exempt from this standard.

8.5. No required course in the professional curriculum may be repeated more than once unless approved by the Office of Academic and Student Affairs.
9. Students on academic probation may not be appointed to any School committee or elected to any office in any School organization during the period of probation. Students holding such appointed or elected positions on School committees must resign the position by the first class day of the semester in which they are placed on probation or dropped from the rolls of the HSOP.

10. Students dropped from the rolls of the HSOP may appeal to CAAR. Students may also appeal the terms of any academic recovery contract developed by CAAR. Appeals must be submitted in writing within 10 working days (defined as days that the University is open for business) of notification via e-mail of probation, termination, or other CAAR action. Students are encouraged to contact the Coordinator of Student Services for advice concerning the appeal process. They are also encouraged to contact their PPE mentors for letters of evaluation. Students may appeal decisions of CAAR to the Dean of the HSOP. Such appeals must be made in writing no later than 10 working days after notification via e-mail of a CAAR decision.

11. Any student who receives a grade of "IN" (incomplete) at the end of an academic semester, must develop an academic plan with the coordinator of the course in which the “IN” was received. The instructor must report the “IN” grade to the Registrar’s Office on the approved University form and notify the Associate Dean for Academic and Student Affairs. The plan must be in place at the start of the next semester with dates specified for the completion of incomplete work. It is expected that incomplete coursework will be completed in a timely manner (generally no later than the 5th class day of the next semester); however, “IN”s in certain courses (i.e., PPE) may require a longer time for completion as outlined in the academic plan. While the Auburn University Policy on Incomplete Grades allows for students to be assigned grades that are calculated with scores of zero assigned for the incomplete portions of the course, this is not an option for HSOP courses. All required components of the course must be completed before a grade of IN can be converted to a letter grade or S/U. A student who does not finish work as stated in the specified plan may have his or her class schedule canceled. The Associate Dean for Academic and Student Affairs will consult with the coordinators of courses for which the “IN” course is a prerequisite and make decisions regarding student enrollment in these courses.

12. Any student with a grade of “IN”, “IP”, or “NR” (grade not reported) may not proceed to the advanced practice experience portion of the curriculum until the grade is recorded or the course completed.

21) Rationale and Protocol for Room scheduling and Audio & Visual conferencing

http://pharmacy.auburn.edu/oit/rationale.htm

22) Influenza Policy for Harrison School of Pharmacy (HSOP) Student Pharmacists and Graduate Students
The purpose of the policy is to outline the procedure to be followed by students (this includes both student pharmacists and graduate students) who have contracted influenza or have developed influenza-like symptoms. This policy considers the current high prevalence of both seasonal and H1N1 influenza and the likelihood of a much higher level of infection for the 2009-2010 influenza season. These policies build upon
the policies of Auburn University with specific modifications to address the HSOP’s unique circumstances.

Influenza continues to be a significant health care burden resulting in absenteeism and is particularly concerning because of the risk of transfer of the virus from one person to another. Influenza infections include seasonal influenza and the current pandemic of H1N1 influenza.

The HSOP’s faculty, staff, and administration are committed to working in conjunction with the Auburn University administration to facilitate completion of the doctor of pharmacy and graduate degrees by the students in our school. This includes using as much flexibility as possible regarding procedures by which students can make up work.

**Prevention procedures**

Students are strongly encouraged to receive an annual seasonal influenza vaccination. Students are also strongly encouraged to receive the H1N1 vaccination or other influenza vaccinations that may become available.

Influenza vaccination will be the student’s responsibility including any associated cost of vaccination.

Students should also exercise appropriate prevention measures as outlined by the Centers for Disease Control (CDC) including frequent hand washing, covering mouth and nose during coughing or sneezing, and avoiding, whenever possible, persons that are known or suspected of having influenza.

It is the professional responsibility of students to take those actions that will minimize the spread of influenza to other members of the Auburn University community, and particularly to patients. Students are asked to self-isolate should they develop influenza-like symptoms.

**Infection control and management**

**Policies related to class attendance**

Students with influenza or influenza-like symptoms (fever, cough, sore throat, headache, muscle aches, extreme tiredness, and possibly diarrhea and/or vomiting) should self-isolate and not attend classes or participate in other activities within the HSOP. Students with influenza-like symptoms should not return to class and other school activities until they have been afebrile for at least 24 hours without the use of fever-reducing medications. Students are to notify their course instructors of their
illness and absence at the earliest possible time. HSOP faculty and staff members may ask students with influenza-like symptoms to leave the building and return to their place of residence; student pharmacists are expected to comply with such requests.

Given the severity of the current influenza outbreak, students are strongly encouraged to seek medical care should they develop influenza-like symptoms. This will facilitate proper evaluation and the timely provision of antiviral medications to appropriate individuals. Any medical evaluation and treatment will be the student's responsibility.

During the current pandemic, it is possible that the demand for medical services will greatly outstrip the supply. Given this, HSOP students will not be required to provide physician excuses in order to receive excused absences for classes, yet medical care is strongly recommended. However, faculty members have the prerogative to require excuses from individual students who have repeated absences.

**Policies related to Pharmacy Practice Experience (PPE)**

Student pharmacists with influenza or influenza-like symptoms (fever, cough, sore throat, headache, muscle aches, extreme tiredness, and possibly diarrhea and/or vomiting) should immediately notify their faculty mentor(s) and the Director of Experiential Learning/PPE Course Coordinator. The Director of Experiential Learning/PPE Course Coordinator will provide further instruction and guidance to the student with regards to isolation from the PPE program and other students, including guidance on whether the student should seek further medical evaluation and possible treatment. Student pharmacists with known or suspected influenza infection should not conduct any patient visits until cleared to do so by Office of Experiential Learning (OEL) staff. OEL staff will notify the faculty mentors regarding status of any affected student pharmacists on their particular teams. Student isolation from and return to the PPE program/patient visits will be based on the CDC recommendations regarding length of time away from a practice site/patients for health care workers.

**Policies related to Introductory and Advanced Pharmacy Practice Experiences in Training Sites**

Student pharmacists with influenza or influenza-like symptoms (fever, cough, sore throat, headache, muscle aches, extreme tiredness, and possibly diarrhea and/or vomiting) should immediately notify their preceptor and regional coordinator. The preceptor and/or regional coordinator will provide further instruction and guidance to the student with regards to isolation from the practice site and other students including guidance on whether the student should seek further medical evaluation and possible treatment. Student decisions regarding medical evaluation and possible treatment should be based on severity of symptoms and/or underlying medical conditions.
Student removal from the practice site will be based on the specific policies and procedures of the practice site. Return to the practice site will follow practice site policies and procedures, which should be based on CDC recommendations regarding length of time away from the health care setting.

Any medical evaluation and treatment related to suspected influenza infection will be the student’s responsibility.

**Policies related to Integrated Pharmacotherapy**

Student pharmacists with influenza or influenza-like symptoms (fever, cough, sore throat, headache, muscle aches, extreme tiredness, and possibly diarrhea and/or vomiting) should immediately notify the Course Coordinator. The Course Coordinator will provide further instructions and guidance with regards to attendance and recommendations for further medical evaluation and treatment. Student pharmacists with known or suspected influenza infection should not attend class (facilitation or large group).

In the case of absence due to suspected or confirmed influenza, the Course Coordinator will notify the respective facilitator and group. Students with influenza-like symptoms should not return to class and other school activities until they have been afebrile for at least 24 hours without the use of fever-reducing medications. Every effort will be made to provide access to missed information; however, given the nature of the course, this may not always be possible. The Course Coordinator will discuss available options with students on a case by case basis.

**Policy Maintenance**

This policy will be reviewed annually and updated as necessary to ensure current standards and procedures are adhered to and that current CDC recommendations are being followed. The Director of Experiential Learning and HSOP administration will continue to work with University administration to ensure appropriate compliance with this policy.

**Contact information**

Director of Experiential Learning & PPE Course Coordinator  
Lynn Stevenson, PharmD, BCPS  
Office phone: 334-844-4329  
Cell phone: 706-718-3596

Course Coordinator for Integrated Pharmacotherapy Sequence  
Kristen Helms, PharmD
23) Immunization Policy
All student pharmacists are required to provide proof of the following immunizations to the Office of Experiential Learning (OEL):
- Measles, mumps, rubella (MMR)
- Varicella (chicken pox)
- Hepatitis B; vaccine series and documentation of antibody titer required
- Tetanus, diphtheria, pertussis (Tdap); Booster with tetanus/diptheria (Td) required every 10 years

Proof of immunity, as appropriate, may be provided in lieu of vaccination records
Additional information regarding immunizations can be found on the Center for Disease Control and Prevention website at www.cdc.gov under Health Topics A-Z.

24) Transfer of Credit Policy
The following policies and procedures govern the transfer of pre-professional and professional academic credit to the Auburn University Harrison School of Pharmacy (HSOP).

Pre-professional Coursework

1. Students may complete prerequisite requirements at Auburn University or at other colleges and universities accredited by the recognized U.S regional accreditation agencies.
2. The HSOP’s prerequisite professional requirements have been approved based on the courses available to undergraduate students at Auburn University. The HSOP’s Office of Academic and Student Affairs (OASA) has reviewed undergraduate courses at many colleges and universities in the Southeastern United States, and has prepared course equivalency lists for these institutions. Current course equivalents for these institutions are available at: http://www.pharmacy.auburn.edu/prospective_students/professional_degree/admission_requirements.htm
3. Prerequisite coursework may also be accepted from foreign colleges and universities, pursuant to review of a transcript evaluation provided by a nationally recognized
international transcript evaluation service, review of the particular foreign institution(s) and approval by the Associate Dean for Academic and Student Affairs.

4. During the admissions process, as well as prior to matriculation, staff in the OASA reviews each applicant’s completion of prerequisite requirements.

5. Those cases where the equivalency of prerequisite academic work requires further evaluation are referred to the Associate Dean for Academic and Student Affairs for his/her review and decision. As appropriate, the Associate Dean solicits additional information and recommendations from the Admissions Committee prior to making final decisions.

**Coursework for Transfer from Other Pharm.D. Programs**

1. Students from other Doctor of Pharmacy programs may transfer to the HSOP upon application and approval by the HSOP’s Admissions Committee.

2. The Associate Dean for Academic and Student Affairs will review the academic records for those students desiring to transfer to the HSOP and make a determination of those courses in the HSOP’s curriculum for which transfer credit can be awarded, consulting with HSOP faculty members as appropriate.

3. Based on decisions regarding transferable credit, the Associate Dean will prepare a plan of study for each student applying for transfer to the HSOP. The plan of study may, as appropriate, contain pre-professional prerequisite coursework that has not been completed.

4. The plan of study will be provided to the HSOP’s Admissions Committee for consideration and approval as part of the review and admission decision for transfer applicants.

5. The HSOP will provide the approved plan of study to each transfer student prior to matriculation.

**25) New Student Organizations**

**Preamble and Policy:**

Participation of student pharmacists in professional organizations is an important part of professional development and is strongly supported by the Harrison School of Pharmacy (HSOP). The HSOP supports the establishment of student organizations to foster the School’s Mission and meet the professional needs of our students, but also recognizes that an excessive number of student organizations may be counterproductive and dilute the effectiveness of those core organizations that support the profession of pharmacy.

The HSOP’s primary interest is to limit approved student organizations to only those pharmacy organizations that have a process for establishing official student chapters; however in exceptional cases recognition of other types of organizations may be allowed if there is sufficient justification. It should be noted that lack of a formally recognized student organization does not prevent groups of student pharmacists, along with faculty and/or staff members to meet informally regarding mutual professional interests. Student pharmacists are encouraged to become members of professional organizations that are relevant to their interests even if there is not an established HSOP chapter.
Procedure for Establishing a New Student Organization:

1. Any group of students and/or faculty members who are interested in establishing a new student organization should first contact the Associate Dean for Academic and Student to discuss the rationale for the new organization and how the proposed organization may impact the HSOP.

2. A formal written application must be prepared and submitted to the Associate Dean for Academic and Student Affairs. The application must clearly state the need for the new organization and its contribution to the achievement of the HSOP’s Mission and Vision, as well as the names of faculty members who are interested in serving as advisors. The relationships to parent pharmacy organizations (e.g., national, regional, etc.) must also be stated.

3. The written application will be forwarded to the HSOP’s Executive Committee for review and a decision.

4. Following approval, the officers or advisors for the new organization must provide the Associate Dean for Academic and Student Affairs copies of all forms and documentation received from the parent organization that related to the newly established chapter.

5. Once approved, the new organization may apply for membership in the HSOP’s Student Council according to the Council’s Constitution and Bylaws.

26) Student ePortfolio Requirements Policy

Student Learning Portfolios document learning, growth, and achievement through the use of artifacts and reflective statements. ACPE recommends the use of portfolios for this purpose. Student Learning Portfolios also provide an archive useful for the creation of Career Portfolios. Career Portfolios communicate achievements and student skills in a written and visual way and enhance communication of these achievements and skills to prospective employers.

Objectives and explanation of the REQUIRED assignments

Curriculum vitae development and maintenance

- To develop a CV and document professional education and activities for use in pursuit of training positions in pharmacy and professional positions post-graduation

Short term and Long term goals development and maintenance

- To instill Self-Directed Learning and Continuous Professional Development
• To help students reflect on achievements
• To learn to respond to self and outside critique through establishing self-improvement goals and document that improvement

Outcomes Portfolio purpose:
• To document learning through the process of reflection, documentation, and mentoring
• To demonstrate an understanding of the AUHSOP curricular outcomes and the links between those outcomes and coursework
• To show progression toward and achievement of curricular outcomes

Professionalism Self Assessments
• To increase students ability to self-assess their professionalism and realize what it takes to be a professional.

Objectives and explanation of OPTIONAL assignments

Miscellaneous Portfolio Items
• Students may be asked or required to submit additional writings, products, evaluations, and/or assignments to MyFolio within E*Value in accordance with standard operating procedures of courses, School contracts, or University requirements.

• Students have the option of creating additional folders and records within MyFolio. These items are owned by the student and are not viewable by others unless they meet the standards within this document or the bullet above or unless the students choose to share these items.

Career ePortfolio
• To create a document that highlights and communicates knowledge, skills, and/or achievements appropriate for the intended audience, traditionally, a prospective employer
• To communicate this information in an organized, concise, visually appealing, manner
• Recommendations for conduct of the Career EPortfolio are found in a separate document

Specific assignments with required deadlines
• All required assignments should be shared with faculty mentors and the student’s PPE subteam.

Curriculum vitae development and maintenance

• By the September 15th, P1 Student Pharmacists should upload a CV in the designated folder in E*Value.

• At least one week prior to the Spring Mentor Meeting, each P1-P3 Student Pharmacists should upload an up-to-date CV into a new grid row within the designated folder of E*Value preserving the old version(s) as a reference(s).

• Students are encouraged to update their CV more routinely and upload these newer versions.

• Example CVs and a CV template are provided to students through the E*Value Home page.

Short term and Long term goals development and maintenance

• Students should create goals in the designated folder in E*Value at least one week prior to the Fall Mentor Meeting each year (P1-P3). They will do so by answering the following questions and/or identifying the items below as listed in a designated folder in E*Value:

  a. Where do you see yourself, professionally, in 10 years?
  b. Where do you see yourself, personally, in 10 years?
  c. List at least one academic goal for this academic year.
  d. Identify an extracurricular goal for this academic year that allows you to apply your knowledge and skills gained at the HSOP.

• Students are encouraged to update these more frequently.

• Students will upload their Foundations drawings to E*Value unless this assignment is eliminated.

Outcomes Portfolio

• The Doctor of Pharmacy Program at the HSOP strives to achieve 8 curricular outcomes. These Outcomes form the backbone on which the curriculum is determined.

• Each outcome has its own folder with grids (tables) in each folder. Students will be asked to complete the grids for specific folders at given times throughout the year and encouraged to update their progress reports as they are exposed to any outcome within the curriculum. (see Table 1)

• In general, Student Pharmacists complete the assigned grids by completing the grids with the information listed below. When reporting progress students
should be guided to report over the time period since the last time they reported on that outcome and/or task description.

a. Date of the report
b. Evaluation of their progress toward achieving the assigned Outcome(s) or an associated Task Description(s)
c. Rank their knowledge and/or performance level (Knows, Knows how, Shows how, Does) of the task description at the time of the report
d. Complete a report on their progress by answering the following questions:
   i. How has your current or previous HSOP coursework helped you progress toward achieving this task description? Give examples of what you know now or what can you do now that you could not do before?
   ii. Whether or not you have encountered this task description, how will and/or might you use this knowledge or skill in the future?
e. Identify activities that have helped them progress toward achieving this goal
f. Select the courses have helped them progress toward achieving this goal
g. Upload supporting artifacts (images and/or documents)
h. Map the task descriptions to their artifacts
i. Select the amount of time they spent on this activity

a. Student Pharmacists will document progress toward achievement of two (2) curricular outcomes twice each year (See table below).
   i. P1 and P2s will report on Task Descriptions
   ii. P3s will report on the overall Outcome while using the Task Descriptions as a guide to writing their report

<table>
<thead>
<tr>
<th>Professional Year and/or Semester</th>
<th>Progress due (due one week prior)</th>
<th>Outcomes and/or Task Descriptions Due</th>
<th>Reviewed by faculty mentor</th>
</tr>
</thead>
<tbody>
<tr>
<td>P1 Spring</td>
<td>Spring mentor meeting</td>
<td>6 and 8</td>
<td>Spring mentor meeting</td>
</tr>
<tr>
<td>P2 Fall</td>
<td>Fall mentor meeting</td>
<td>1 and 3</td>
<td>Fall mentor meeting</td>
</tr>
<tr>
<td>P2 Spring</td>
<td>Spring mentor meeting</td>
<td>2 and 4</td>
<td>Spring mentor meeting</td>
</tr>
<tr>
<td>P3 Fall</td>
<td>Fall mentor meeting</td>
<td>5 and 7</td>
<td>Fall mentor meeting</td>
</tr>
<tr>
<td>P3 Spring</td>
<td>Before spring semester begins</td>
<td>5 – 8</td>
<td>Spring mentor meeting</td>
</tr>
</tbody>
</table>

Table 1. Due dates and Portfolio Evaluation dates
Professionalism Self Assessments

- P1-P3 Student Pharmacists will complete a professionalism self-assessment at the designated location in E*Value at least one week prior to their Fall and Spring mentor meeting

Procedures for portfolio evaluation and potential consequences

- P1-P3 Student Pharmacists will attest to their submission of required documents through completion of an evaluation within E*Value during the Fall and Spring semesters.
- False attesting on an E*Value evaluation form will be reviewed by the Portfolio Coordinator and may be forwarded to CARP or Honor Board as appropriate.
- Faculty will submit a Professionalism On-the-Fly form if a required component is missing or not up to date at the designated mentor meeting.
- Failure of the individual Student Pharmacist to meet the Portfolio Requirements may jeopardize the continued progression through the Doctor of Pharmacy Program.

Curriculum vitae development and maintenance

- Faculty mentors should visually confirm the CV submission in the Fall P1 year and discuss any missing CVs with the specific P1 Student Pharmacists during the Fall mentor meeting, if applicable.
- Faculty mentors should review and provide verbal and/or written feedback during the P1-P3 Spring mentor meetings.

Short term and Long term goals development and maintenance

- Faculty mentors should review and provide verbal and/or written feedback during Fall mentor meetings.

Outcomes Portfolio
• Faculty will evaluate outcomes submissions once per semester using the Outcomes Portfolio Rubric and provide feedback and the evaluation during mentor meetings.

• Faculty shall randomly select 2 task descriptions and/or outcomes to evaluate by completing the evaluation rubric for these 2 task descriptions and/or outcomes.

• Outcomes Assessment Rubric (Locate on EValue Home Page)

• Student Pharmacists must achieve “Competent” or “Exemplary” to satisfy the requirement.

• Students Pharmacists receiving a “Needs Development” will make adjustments to their E*Value Report on Progress based on feedback from faculty mentor(s) and their rubric score. The adjustments are due 2 weeks after notification of the evaluation results.

• Students Pharmacists receiving a “Needs Development” after these adjustments, will meet with the Portfolio Coordinator for an individualized plan and will possibly be referred to CARP.

**Professionalism Self Assessments**

• Faculty mentors should review and provide verbal and/or written feedback each semester in which a professionalism self-assessment is completed during mentor meetings as well as complete Professionalism Assessments as defined by Harrison School of Pharmacy Professionalism Assessment Policies

**Accountability procedures:**

**Curriculum vitae development and maintenance,**

**Short term and long term goals development and maintenance,**

**and Professionalism self-assessments**

• An E*Value report will be run each semester to confirm submission of student testaments to their submissions

• On-the-fly Professionalism Evaluations will be handled according to the Harrison School of Pharmacy Professionalism Assessment Policies

• Portfolio Coordinator will run reports each semester to confirm that all students have earned either a “Competent” or “Exemplary” for their Outcomes portions submissions
B. Faculty

1) Faculty – Staff Travel Memo - Revised June 14, 2010
Faculty and staff travel is essential for the viability of our School’s programs. It is the intent that if faculty/staff are funded through intramural funds they should be actively participating in the meeting (e.g., presenting a paper/poster, serving on a panel, major role as elected/appointed officer, and/or representing HSOP versus strictly attending). Travel is also a major expenditure in the School’s budget. In an effort to manage our travel costs, reimbursement is based on actual costs up to the maximum allowed per University policy for both in-state and out of state travel. Reimbursement requests for travel and related expenses must be accompanied by itemized receipts. While at meetings, attendees are asked to use meals that are included in the registration fee. Reimbursement will not be allowed for meals at times when such an event is occurring (e.g., reimbursement for an evening meal will not be allowed on the evening when the AACP banquet is held). Faculty/staff are expected to participate for the duration for the meeting pertinent to the employee’s participation. Expenses for personal time during the meeting will not be reimbursed and annual leave should be requested. All other aspects of reimbursement will follow the established University policies. Departmental policies may further restrict how funds may be utilized.

When submitting a request for authority to travel, a meeting agenda must be attached before the Department Head/Dean can sign. If airline reservations are required, please submit planned flight arrangements. If travel occurs before/after the dates on the agenda, when not in transit, the employee is expected to be at work. If extra time is taken before/after the meeting, this must be taken as annual leave. Annual leave may only be taken when it has accrued prior to the time of travel.

2) HSOP Discovery Research Grants Revised September 24, 2009
Purpose: To facilitate scholarly research projects that have a high likelihood for extramural funding and/or completing scholarly work important to the mission of the School where extramural research funding is unlikely.

I. Guidelines for Proposals
- Any full time tenure or non-tenure track HSOP faculty member is eligible to apply for a DRG. Selection will be based on need and potential contribution to the discipline.
- The proposal must contain the following sections (maximum of 5 pages): Specific Aims; Background and Significance; Research Design and References. If Preliminary Data are available, this can be included as a separate section after the background and significance. Guidelines modified from the National Institutes of Health Office of Extramural Research (http://grants.nih.gov/grants/writing_application.htm) that describe what should be included in these sections can be found at the end of this document. The proposal must also contain a separate budget page with justification, current, and pending research funding; timeline for completion of the proposed project; proposed funding agencies for subsequent extramural funding efforts or justification for not seeking extramural funding; and signature of the investigator(s). Also include an abstract (summary) of the project. The abstract should be no more than half a page.
- Auburn University IRB and/or IACUC approval must be obtained within three months of the award. Funds will not be released until IRB/IACUC approval is obtained.
• Faculty members who have been awarded a DRG will submit a brief interim report on the anniversary date of the award. The interim report should outline the progress has been made to date. A final report once the project has been completed. Specifics requirements of this report are outlined below.

• Grants will be automatically terminated one year from the start date. However, the principal investigator, upon providing significant justification, may request a no-cost time extension prior to termination.

• Selection of recipients will be made by the HSOP Dean/designee based on the recommendations of the HSOP Executive Committee and/or an appointed ad hoc committee.

II. Final Report

A final report must be submitted upon completion of a funded project. Included in this report should be the project title, investigator(s), and a brief description of the research project. The project description should include any presentations and/or publications and extramural grant submissions which have resulted from the award. A final report is required for all DRG projects before subsequent proposals will be considered for funding.

Establishment of Grant Funds by the Dean’s Office

These DRGs will be funded by the Office of the Dean. The funds may not be moved into departmental accounts. Therefore a sub-account will be set up within the appropriate account to support each DRG. Procedures for expending funds should be as follows:

a) Establish an account to monitor expenditures and balance remaining.

b) Purchase orders, vouchers, etc. will be prepared in the departments. A COPY must accompany the request for signature of the Dean or designee. In the upper right hand corner of the COPY ONLY, designate in RED INK “DRG”. Notify the Dean’s Office if you elect to use any of the funds for student salaries or wages.

Application Deadline

November 1 of each academic year or as designated through special announcement.

Tips for Writing a Grant Application

(modified from the National Institutes of Health Office of Extramural Research [http://grants.nih.gov/grants/writing_application.htm](http://grants.nih.gov/grants/writing_application.htm))

Specific Aims: A component of an application’s Research Plan which describes concisely and realistically what the proposed research or activity intends to accomplish by the end of the grant. Includes broad, long-term goals; hypothesis or hypotheses to be tested; and specific time-phased research objectives (e.g., to test a stated hypothesis, create a novel design, solve a specific problem, challenge an existing paradigm or clinical practice, address a critical barrier to progress in the field, or develop a product or new technology).

Background and Significance
The Background and Significance section states the research problem, including the proposed rationale, current state of knowledge and potential contributions and significance of the proposed research to the field. Briefly sketch the background leading to the present application. Critically evaluate existing knowledge, and specifically identify the gaps that the project is intended to fill. Explain why the literature leads you to think this topic needs study. This should not be a thesis, but should provide information that directly pertains to the scientific need for the project.

Make sure the significance of the topic is explicitly stated. Include sufficient justification for the significance of the problem and a rationale for the proposed studies. State how scientific knowledge or clinical practice will be advanced through the aims of the application. Describe the effect of these studies on the concepts, methods, technologies, treatments, services or preventative interventions that drive this field.

**Preliminary Studies (optional)**

Use this section to describe your prior work relevant to the proposed project. Preliminary data may consist of your own publications, publications of other researchers, unpublished data from your own laboratory or from others, or some combination of these. Ensure that you have a body of solid preliminary data that demonstrates the likelihood for success of your research.

**Research Design and Methods**

Use this section to describe how you plan to carry out the research. Your research methods should relate directly to the aims you have described. This section is critical for demonstrating that the applicant has developed a clear, organized and thoughtful study design that tests the central hypothesis. The section should contain the specific methodology, how data will be collected and results analyzed, required statistical techniques.

**3) Exam Policy**

**Memo dated June 27, 2011**

**Purpose:** The following Policies and Procedures have been established with the assistance of the Executive Committee to better coordinate the scheduling of examinations and other events in the Harrison School of Pharmacy (HSOP). Effective coordination between the Auburn and Mobile Campuses is essential to assure effective and efficient operations between the Auburn and Mobile campuses, including the scheduling of rooms as well as information technology resources.

1. Prior to the start of each semester, the Office of Academic and Student Affairs will contact the instructors of record for each course taught to solicit preferred times for examinations to be held throughout the semester, and taking into consideration events on the HSOP’s Master Schedule.

2. Following this the Associate Dean for Academic and Student Affairs will follow up with the instructors of records to resolve conflicts, and establish an examination schedule (including both dates and times) for the semester including Final Examinations. The exam dates will be finalized no later than July 1 (for Fall Semester) and November 1 (for Spring Semester)
weeks prior to the start of each semester. These finalized examination schedules will be provided as part of the syllabi provided to students on the first day of class.

3. All examination dates and times will be posted on the HSOP master schedule and must be included on the syllabus and class schedule provided to the students at the start of the semester.

4. Examinations are to be held during regularly scheduled class sessions unless there are specific unique circumstances that preclude this. Instructors who believe that circumstances dictate the need for exams to be held outside of normal class hours must submit requests to the Associate Dean for Academic and Student Affairs, including a justification for their request(s). Such requests must be made as part of the examination scheduling process outlined in procedure 2 (see above) and moving exams will not be considered at a later time. The Associate Dean for Academic and Student Affairs will make the final decision on these requests. In those cases where approval is granted for an exam or exams to be held outside of normal class hours, a comparable amount of class time must be cancelled.

4) **Teaching Evaluation** *Issued October 8, 2008*

The Harrison School of Pharmacy (HSOP) views the on-going evaluation of teaching as essential to providing quality instruction. To evaluate instruction, the HSOP utilizes multiple assessment measures; including peer evaluations, student surveys, and student focus groups. As stated in the AU Bulletin, “Each Auburn student is expected to participate in the university’s assessment efforts” (p, 16). Moreover, the Accreditation Council for Pharmacy Education requires that faculty be evaluated annually and that the evaluation process includes input from peers, supervisors, and students. Constructive feedback on teaching contributes to on-going improvement of the School’s efforts to accomplish its teaching and learning mission to prepare competent future pharmacists and scientists. Thus the HSOP regards the evaluation of teaching as a professional responsibility, and therefore, a requirement of all student pharmacists. Individual grades will be withheld until such time as course evaluations are completed. Student responses to teaching effectiveness surveys are anonymous in the HSOP.

Course and teaching evaluations are administered in the HSOP by the Office of Teaching, Learning and Assessment (OTLA). The OTLA communicates to students the procedures and deadlines for completing evaluations, and reports the data to the faculty member and the department head after final course grades have been submitted. Additionally, in order to provide formative feedback during the course review process, the OTLA reports course evaluation data without identifying faculty information to the School’s Professional Education Committee.
5) PEC Course Review

Procedure for Course Review Announcement

1. In general, one professional education subcommittee will be responsible for conducting curricular course reviews
   o PEC Steering: Electives, other coursework not covered by subcommittees
   o PEC I: PCS, Law/Ethics, Drug Literature, CAPP, Management
   o PEC II: DAD, Drug Products, Integrated Pharmacotherapy, CAPP
   o PEC III: IPPE, APPE
2. The Facilitator of the Course Review will be the Chair of the Subcommittee. If the Chair of the Subcommittee is also the coordinator of the course being reviewed, then another facilitator will be selected.
3. It is the responsibility of the Facilitator to collaborate with their subcommittee, PEC Steering, and the course coordinator(s) to determine possible dates to conduct the course review.
4. The date for the course review should be determined at least 4 weeks prior to the planned review.
5. Once the date is established, the Facilitator should send an appointment to ALL faculty, as well as any students who are on the subcommittee (no later than 2 weeks prior to the review) followed by a reminder email the morning of the review.
6. The facilitator and course coordinator(s) should grant access (either through email or access to website) to all faculty and any outside reviewers to the following course materials (at least 2 weeks prior to review):
   o Course development document
   o Course syllabus
   o Learning evaluations (i.e., tests, quizzes, projects, problem sets, etc.)
   o Course assessments (student surveys, peer assessments, learn team reports)
   o Learning and teaching resources (PowerPoint presentations, multimedia, etc.)
   o Lecture / Facilitation Notes

Procedure for Conducting Course Reviews

On the date of the course review, after the review team has reviewed all materials submitted, the course coordinator(s) shall present their own assessment of the course (NOT TO EXCEED 30 Minutes)

1. This self-assessment should provide:
   a. **Progress** as a result of implementing change strategies from the last assessment is noted. Any deviations from the planned strategy are analyzed to improve future planning.
   b. **Strengths** identify the ways in which the course’s performance was praiseworthy. A strength statement addresses what attribute or action was valuable, why it is important, and how to reproduce it.
   c. **Areas for Improvement** identify the changes that can be made (between this assessment and the next) to improve performance. They should clearly distinguish the issues that caused problems and delineate changes that could be implemented to resolve these difficulties.
   d. **Insights** identify new and significant understanding that was gained concerning the course, teaching, and learning. Insights include why this new understanding is significant and how it can be applied to other situations.
2. After the coordinator(s) present their self-assessment a question and answer session should follow *(30 – 45 minutes)*.

3. After all questions have been answered, the coordinator(s) and/or instructors within the course shall be dismissed.

4. Once dismissed, any students present in the review shall be asked questions about their thoughts/perceptions of the course *(30 – 45 minutes)*. They should highlight strengths, areas for improvement, and insights.

5. After this, students shall be dismissed and a critical evaluation, utilizing the course review worksheet, should ensue *(60 – 120 minutes)*.

6. Once the review has been completed, the Facilitator is responsible for completing the worksheet and writing a letter to the coordinator(s)
   a. Once the drafts are finalized the following steps should occur:
      i. The worksheet and letter should be sent to the responsible PEC Subcommittee for comments/approval
      ii. Once approved, documents should be sent to PEC Steering
      iii. Once approved by Steering, the documents should be sent to the coordinator(s), Department Head, and the Dean for review and to be added as an informational item at the next available faculty meeting

7. The course coordinator(s) should address any recommendations within **4 weeks** of receiving the letter. Any challenges or rebuttals need to be written to the course review Chair and their Department Head. The chair of the course review will coordinate with the Chair of PEC Steering (and the Department Head, if deemed necessary) to determine how to address any challenges. This will then be communicated back to the course coordinator(s) within **4 weeks**.

8. It is the responsibility of the Facilitator to then follow-up with the coordinator(s) on a yearly basis, as needed, to ensure any changes suggested through the course review process are being addressed. The Facilitator should then send their report back to PEC Steering for review. If PEC’s areas of concern have not been adequately addressed, the course coordinator’s department head will be notified.

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**Course Review Process**

**Introduction**

AUHSOP Vision, Mission, and Educational Philosophy

These statements provide the context for our curriculum and its review process. These are attached as Appendixes 1-3.

AUHSOP Curricular Outcomes

The description of the curriculum is attached as Appendix 4.

AUHSOP Curricular Review

The PEC Steering committee will periodically (approximately every 4 years) use a “Developing a Curriculum” process (which includes consideration of accreditation guidelines as well as current and visionary practices) to drive a review of:

1. Our curricular outcomes responsibilities and tasks;
2) Curricular organization and length;
   a) Distribution of responsibilities and tasks among courses;
   b) Correlation between responsibilities, tasks and course outcomes;
   c) Continuity of outcomes – do they DEVELOP competence in all tasks and responsibilities?

**Goals of Course Review Process**

To determine the extent to which the course development procedure has been implemented, and where incomplete, to help course coordinators complete the process;

To discuss the reflections of teaching faculty and course coordinators on the DIFFERENCES between the INTENDED course (as given in the planning document and syllabus) and the TAUGHT course (what actually happened in the classroom);

To help course coordinators and teaching faculty develop increasing congruency between the intended outcomes of the course, the evaluations of learning and the learning outcomes (revealed by the evaluation scores) by evaluating each step of the course development document for feasibility and validity;

To increase the quality of the course relative to the criteria for content, teaching, learning and assessment:

**Teaching and Learning:**

**Emphasis on Thinking** – In engaging class material, student pharmacists continually ask and answer questions that compel them to explain scientifically, interpret meaningfully, apply effectively, take accurate perspective, empathize compassionately and assess critically so that they are able to remember and use their knowledge in the future.

**Challenging** – Student pharmacists understand that there are high standards that will be upheld with logical consequences and that faculty trust that with effort, intellectual curiosity, some help, feedback and revisions, they are capable of meeting them.

**Hold Student Pharmacists Accountable** - for developing autonomy (self-assessment, synergy, self-education, management of expertise, and problem-solving).

**Coordinates with other Faculty** – Cooperate so that all hold student pharmacists to same standards and attempts to integrate the content and methods of teaching and assessment.

**Pre-Assessment** – Student pharmacists are assessed so faculty know their incoming knowledge and abilities so they can design their teaching accordingly.

**Helpful Orientation** – Student pharmacists are oriented to all experiences so that they know appropriate boundaries, processes, vocabulary, expectations, potential problems and intended outcomes before they begin the program.

**Developmental** - Hold student pharmacists accountable for developing autonomy (self-assessment, synergy, self-education, management of expertise, and problem-solving).

**Transparency** – Clear communication of goals, content, performance, procedures, expectations, ground rules, and boundaries.

**Assessment and Evaluation of Learning that are:**

**Congruent** - Assessment and evaluation of learning are aligned with the intended and taught curriculum in concert with the AUHSOP’s approved curricular outcomes (Appendix 4).

**Items**– questions and item formats that make it easy for student pharmacists to understand precisely what performance is required of them and organized so that test-taking is as efficient and straightforward as possible.
Correct Educational Consequences – When familiar with the assessment, student pharmacists are motivated to study WHAT and HOW the instructor intends, especially for the long term.

Quality Assessments – Assessment and evaluation of learning meet the standards of assessment in ACPE Standard 15 (Appendix 5).

Authentic – Assessments drive transferable learning by mirroring how knowledge will be accessed in practice.

Developmental - Assessments and evaluations are designed to challenge, but not overtax, student pharmacists’ current level of moral, intellectual, and social complexity.

Content:

Ensuring Professionalization – It is the expectation of the course to consistently facilitate the development of habits and attitudes necessary for students to take a leadership role in the community in order to sustain and advance the profession.

Realistic – It is the expectation of the course to consistently take into consideration factors such as the previous knowledge and abilities of matriculates, constraints on time and resources to ensure the appropriate depth and breadth are discussed, and by utilizing proven teaching and learning strategies.

Ensuring Understanding - It is the expectation of the course to consistently facilitate the development of knowledge that allow students to make scientific explanations, meaningful interpretations, effective and relevant applications, to take accurate perspectives, empathize compassionately and assess critically.

Distinctive Pharmacy Expertise – It is the expectation of the course to consistently facilitate the development of distinctive pharmacy knowledge and abilities that allow students to collaborate synergistically with other members of the healthcare team in providing optimal, cost-effective, integrated and comprehensive patient-centered care.

Explicit – It is the expectation that the course coordinator consistently articulates competency levels clearly so that student pharmacists can accurately describe their current level of competence through assessment and evaluation

Motivating – It is the expectation of the course to consistently facilitate the development of lifelong learning and continual development of expertise.

Integrated – In integrating knowledge from the biomedical, pharmaceutical, social, behavioral, administrative, economic, and clinical sciences, it is the expectation of the course to consistently facilitate the development of a distinctive domain of expertise that delineates the role and supports the responsibilities of the provision of pharmaceutical care.

Appropriate Scope - Depth and breadth are critically balanced so that student pharmacists are able to analyze, question, prove, generalize and explain their understanding, and to connect concepts and problems, apply principles, and consider implications (the qualities of responsible, sophisticated and autonomous thinkers.)

Scientific – Student pharmacists’ understanding is assured by systematically relating concepts through the use of fundamental evidence-based principles and theories of science.

Valuable – Content is selected carefully for applicability, accuracy, necessity, and importance in ensuring safe, efficient, and cost-effective pharmaceutical care.

Appropriate Level – Subjects are introduced at a level appropriate for the knowledge and abilities needed to provide pharmaceutical care.

Interesting – Classes are created around intriguing and important problems and ideas that challenge student pharmacists to think through and defend their constructs/schema.
Where applicable, to ensure that student gain expertise with the drugs and diseases listed in the Drugs and Diseases Blueprint. Departures from the blueprint, particularly the incorporation of “prototype” drugs and diseases, must be discussed. Ultimately, the goal is to refine the blueprint to provide more relational guidance to student pharmacists to aid learning and problem-solving.

To review and update course policies and communicate potential global changes to other course coordinators;

To increase the uniformity of course syllabi to permit rapid understanding, assessment, and comparison by an uninformed reader, and;

To create a process that serves not only the purposes of course review, but that can also guide OTLA in how to best serve faculty members in one-on-one teaching development and assessment.

**Assessment of the Review Process**
The review process will be assessed to optimize its efficiency and efficacy. The course reviewers are asked to record and provide constructive feedback and suggestions regarding:

- Expediting the collection of artifacts;
- Quality of artifacts obtained;
- Reviewer selection, and;
- Clarity and efficiency of the review process.

**Time Involved**
It is proposed that each PEC Subcommittee review courses on a 4 year review cycle. Courses would also be reviewed if significant changes were made in the course including changes in assigned instructors, changes in content, changes in assessment methods, OTLA recommendation based on learn team or course evaluations. Instructors are encouraged to recognize changes within courses and refer the course to PEC for early review. There may be a significant time commitment to this process, and this must be reflected in workload. The actual number may vary, depending upon the current needs of the school.

**Fundamental Philosophy of Course Review**

**Comprehensive**
The course review process is intended to evaluate ALL courses – required and elective, as well as new and continuing courses.

**Collaborative**
To assure AUHSOP accountability to the pharmacy profession and the public it serves, the curriculum and the courses that comprise it are the purview of AUHSOP faculty. Faculty members are selected to facilitate learning in particular courses because of their expertise. In assuming responsibility for the courses assigned to them, AUHSOP faculty strive to maximize learning through appropriate selection of content and skills to be learned and practiced, and through the skillful application of teaching and assessment that are best-suited to achieving the intended outcomes. This stewardship is essential because without it, the required commitment, enthusiasm, and effort are difficult to achieve. The course review process is essential to assuring course quality, and it must also be accepted, understood, and embraced by the facilitator. Therefore, the faculty member coordinating the course (or learning segment) must assume a prominent and active role in the course review team.

**Continuous Improvement**
Course review should be seen as an ongoing process that continually improves the curriculum. It is not something to “get done, once and for all”, but is an integral part of each teaching cycle.

**Benefits to All Stakeholders**
An assessment that benefits ONLY students, or ONLY the faculty as a whole (e.g., to meet accreditation standards) is inadequate. It must be of benefit to ALL stakeholders. Therefore, the course review must yield data that celebrate the course’s strengths and give constructive criticisms.

**Supported by OTLA**
The goal of AUHSOP goal is 100% retention of students, 100% achievement of intended outcomes, and the ever-increasing success of faculty members. OTLA exists to support the teaching, learning and assessment efforts of individual faculty members and the school as a whole. With these goals in mind, the course review team should consider the ways in which OTLA can support instructors in implementing each course most effectively.
Proposed Course Review Worksheet
Pre-Review Phase – PEC Steering Committee

Decide scope of the review (PEC Decision) – PEC will decide whether the review will address a single course, or a number of courses with deep and fundamental connections. Courses for which one is the logical continuation of the other are best reviewed together. This decision will be in conjunction with course coordinators.

Decide deadline for the review. This will be communicated to both the review team facilitator and the course review liaison (below).

Identify Liaison. Course coordinator(s) will be contacted by PEC, provided with curriculum review worksheet (below). Depending upon the circumstance, this may be the current faculty member(s), most recent faculty member, or future faculty member, or all of these.

Team Development Phase (2 weeks)
The review team will consist of the appropriate PEC subcommittee and other external reviewers whose expertise and responsibilities meet the needs of the review process as described below. In consultation with PEC, the PEC Subcommittee will assemble team members. The goal is to create a team with sufficient knowledge of the discipline AND pharmacy practice to bridge between theory and application; content and ability based outcomes. Content experts assure that the material is addressed, using the appropriate pedagogy, at the appropriate depth, breadth and level, and practitioner assure that the prioritization of content is appropriate for current and emerging practice and that the materials is presented in a way that it might be used AUTHENTICALLY in practice. In addition to the PEC subcommittee members, the team should meet the following conditions (some or all of these conditions may be satisfied by the subcommittee membership):

The coordinator(s) from pre-requisite courses, if applicable or practicable.

The coordinator(s) of courses for which the course under review is a prerequisite, if applicable or practicable.

Outside expert colleagues. Potential criteria for these consultants include: has published or presented classroom/curriculum-based reach or “best practices;” graduates from the potential consultant’s school have demonstrated leadership/originality/innovation/financial and clinical success in using knowledge from subject area to enhance practice; consultant is a practitioner who regularly uses course knowledge area in practice and knows practical boundaries of application for material (e.g., in pharmaceutics, this could be person specializing in extemporaneous compounding); manages a similar course but has a teaching style or course syllabus that is significantly different from that of the instructor. The role of the outside expert is to provide a written assessment (strength, areas for improvement, insights) into the course based on the course development document.
**Data Collection Phase (1 week)**

Team Liaison(s) gather required information. These will include (but are not limited to):

<table>
<thead>
<tr>
<th>Obtained Materials Distributed to Review Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Instructional philosophy – belief about teaching and learning that form the basis of curriculum and teaching method selection. See Appendix IV for a strategy to write an instructional philosophy.</td>
</tr>
<tr>
<td>[ ] Course Syllabus</td>
</tr>
<tr>
<td>[ ] Course Development Document</td>
</tr>
<tr>
<td>[ ] All Learning Evaluation Blueprints</td>
</tr>
<tr>
<td>[ ] Results of Learning Evaluations (Item Statistics and Grade Distribution)</td>
</tr>
<tr>
<td>[ ] Teaching Journal (i.e. daily log or periodic reflections of things to improve upon)</td>
</tr>
<tr>
<td>[ ] Materials Made Available As Required for In-Depth Analysis and Problem-Solving</td>
</tr>
<tr>
<td>[ ] Lecture / Facilitation notes</td>
</tr>
<tr>
<td>[ ] Learning and Teaching Resources (e.g., PowerPoint Presentations, multimedia, etc.)</td>
</tr>
<tr>
<td>[ ] Any other handouts, problem sets, case examples, etc.</td>
</tr>
<tr>
<td>[ ] All Evaluations of Learning (quizzes, tests, projects, reports, examinations, problem sets, etc.)</td>
</tr>
<tr>
<td>[ ] Course Assessments (student surveys, peer assessments, classroom assessments, learn team reports)</td>
</tr>
<tr>
<td>[ ] Other _________________________________</td>
</tr>
</tbody>
</table>

**Assessment Phase (1/2 day)**

*The assessment phase really begins on the first day of class.* Instructors are asked to keep a journal of course events, focusing specifically on strengths and areas for improvement relative to the criteria for teaching and learning, and relative to the alignment between what was intended to occur and what ACTUALLY occurred in class.

*At the end of the course,* when the memory of events is still fresh, the instructors and coordinators are urged to review these reflections and on the global learning outcomes and prepare a self-assessment of the course relative to the course review goals. The self assessment should provide:

- **Progress** as a result of implementing change strategies from the last assessment is noted. Any deviations from the planned strategy are analyzed to improve future planning.
- **Strengths** identify the ways in which the course’s performance was praiseworthy. A strength statement addresses what attribute or action was valuable, why it is important, and how to reproduce it.
- **Areas for Improvement** identify the changes that can be made (between this assessment and the next) to improve performance. They should clearly distinguish the issues that caused problems and delineate changes that could be implemented to resolve these difficulties.
**Insights** identify new and significant understanding that was gained concerning the course, teaching, and learning. Insights include why this new understanding is significant and how it can be applied to other situations.

Formal course assessment will occur in a 2-4 hour retreat organized by the relevant PEC subcommittee. Using the course materials provided, the work group is charged to pursue and complete each of the goals of the course review process:

<table>
<thead>
<tr>
<th><strong>☐</strong></th>
<th>Implementation of Course Development Procedure Complete?</th>
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<tbody>
<tr>
<td></td>
<td>Record name and location of newest course development document for this course. An appendix to the most recent course development document should detail STEPS completed / changed; CONTENT of changes; and brief RATIONALE for changes:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>☐</strong></th>
<th>Differences Between INTENDED and TAUGHT course resolved?</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Documentation will typically indicate changes in course management but COULD also lead changes in outcome expectations, activities, time allocated, etc. Provide a brief explanation here. Also record name and location of supporting Documentation.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>☐</strong></th>
<th>Strategy in place to increase alignment between INTENDED and LEARNED course outcomes?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>While it is impossible to expect that ALL students in EVERY class will meet and exceed course learning objectives, this should be our goal. In what areas was learning generally weak? What will be done to improve learning in these areas?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>☐</strong></th>
<th>Plan for quality improvement in place? (refer to criteria checklist in next table)</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Comments:</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th><strong>☐</strong></th>
<th>Congruent with Drugs and Diseases Blueprint?</th>
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<tr>
<td></td>
<td>Comments:</td>
</tr>
</tbody>
</table>

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<tr>
<th><strong>☐</strong></th>
<th>Global Course Policy Change Suggestions (if any)?</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Comments:</td>
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</tbody>
</table>

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<tr>
<th><strong>☐</strong></th>
<th>Syllabus conforms to AUHSOP standard?</th>
</tr>
</thead>
</table>
Check the criteria for which assessment indicates a need for improvement in the next year (in most cases, no more than three criteria should be checked). Specify changes in the comment box.

<table>
<thead>
<tr>
<th>Needs Improvement</th>
<th>Criterion</th>
<th>Comments</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Teaching and Learning</td>
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<tr>
<td>□</td>
<td>Emphasis on Thinking</td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>Challenging</td>
<td></td>
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<tr>
<td>□</td>
<td>Hold Student Pharmacists Accountable</td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>Coordinates with other Faculty</td>
<td></td>
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<tr>
<td>□</td>
<td>Pre-Assessment</td>
<td></td>
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<td>□</td>
<td>Helpful Orientation</td>
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<td>□</td>
<td>Developmental Teaching</td>
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<td>□</td>
<td>Transparency</td>
<td></td>
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<tr>
<td></td>
<td>Assessment and Evaluation</td>
<td></td>
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<tr>
<td>□</td>
<td>Congruent</td>
<td></td>
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<tr>
<td>□</td>
<td>Items</td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>Correct Educational Consequences</td>
<td></td>
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<tr>
<td>□</td>
<td>Quality Testing</td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>Authentic</td>
<td></td>
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<tr>
<td>□</td>
<td>Developmental Assessment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Content</td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>Ensuring Professionalization</td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>Realistic</td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>Ensuring Understanding</td>
<td></td>
</tr>
</tbody>
</table>
Distinctive Pharmacy Expertise

Explicit

Motivating

Integrated

Appropriate Scope

Scientific

Valuable

Appropriate Level

Interesting

Suggestions for improvement in course review process:

Suggestions for faculty development:

Course Review Reporting Phase (2 hours)
A short report for PEC Steering Committee should be prepared that highlights:

Assessment of the course, with strengths, areas for improvement and insights.

Assessment of the review process, with strengths, areas for improvement and insights.

PEC Evaluation Phase
PEC Steering committee will evaluate the recommendations and provide direction to:

1) The course coordinator(s) regarding the implementation of improvements to the course.
2) The faculty, regarding changes to curricular outcomes that appear to be advisable, based on the results of the course review.
Appendix 1 - AUHSOP Vision Statement

Auburn University’s Harrison School of Pharmacy is the State of Alabama’s only public institution charged to educate pharmacists in the appropriate drug treatment of human illnesses. This responsibility also extends to educating other health care providers and the lay public in this area. The Harrison School of Pharmacy’s primary activity is the preparation of competent, professionally mature primary care clinicians who provide pharmaceutical care to Alabama’s citizens. In addition, the Harrison School of Pharmacy provides graduate education programs which focus on the creation of basic and applied knowledge in pharmaceutical sciences and in the delivery of pharmaceutical care to patients.

Auburn University Harrison School of Pharmacy will provide a collaborative educational experience in which both student and faculty learning occurs. The educational program and experiences of students will be grounded in service-based, primary care focused, community practice that is collaborative with other health disciplines. Graduates will enter practice with the personal character, confidence, and competence to assume leadership positions in their communities and their pharmaceutical care practices. The School’s faculty will serve as educational innovators and resources to help practitioners address the changing demands of health care.

Auburn University Harrison School of Pharmacy will provide leadership in the state of Alabama amongst health care providers and other stakeholders to advance pharmaceutical care for individual patients and populations of patients. The School will partner with pharmacists, other health care providers and health care organizations to improve the delivery of pharmaceutical care and patient outcomes through the continuous re-engineering of practices, environments and systems.

Through research Auburn University Harrison School of Pharmacy will serve as a catalyst of creative ideas for solving health-related problems in society and specifically in pharmacy.
Appendix 2 - AUHSOP Mission Statement

The Harrison School of Pharmacy was established to serve the broad interests of the citizens of the State of Alabama which now extend into the global community.

The School pursues its mission in the Land Grant tradition through:

Teaching and learning which prepare a diverse student body to be competent pharmacists and scientists who are able to provide and improve primary health care to Alabama's citizens by:

1. Collaborating with other health professionals in providing high quality drug treatment;
2. Influencing the development of public health policy related to drug treatment;
3. Promoting wellness and assisting in improved access to cost effective, primary care;
4. Participating in health care research;
5. Engaging in specialized and general education throughout their professional careers;
6. Contributing to the professional education of students who are future health care providers.

Research that enhances the health and quality of life of Alabama's citizens by:

- Participating in the development of new drugs;
- Improving the use of existing drugs;
- Creating innovative services and products;
- Designing and evaluating the delivery of pharmaceutical care;
- Improving the outcomes of pharmaceutical education.

Outreach to Alabama's citizens, health care providers, businesses, industries and agencies by:

1. Delivering pharmaceutical care;
2. Offering curriculum-based education for current health care providers;
3. Disseminating medical information and results of research;
4. Applying knowledge and technologies.

The Harrison School of Pharmacy has a unique leadership responsibility: to enhance the education of health professionals; to inform the public about pharmacists and pharmaceutical care; to collaborate in solving health problems in Alabama communities; and to enhance the State's economic development.
Appendix 3 - AUHSOP Statement of Educational Philosophy

The educational philosophy is consistent with the AUHSOP’s Mission and Vision Statements and its strategic plan. The curriculum is consistent with the School’s educational philosophy, including its commitment to learner-centered instruction and mentoring processes which facilitate the development of professionalism, caring, and lifelong learning among our student pharmacists.

Faculty and Staff
The faculty and staff of the Harrison School of Pharmacy are members of a collegial, learning community dedicated to educating pharmacists who will (1) confidently embrace the responsibilities of a professional pharmacy general practitioner, (2) advance the profession of pharmacy, (3) be dedicated citizens and leaders in their respective communities, and (4) display the attitudes, behaviors and characteristics of role models. To achieve these four outcomes, the faculty collectively own and are responsible for the curriculum. Individual faculty members are entrusted as stewards over specific sections of that curriculum. In essence, the pharmacy curriculum (established ability based outcomes, specific content, desired skills and behaviors, instructional approach, evaluation and assessment) is the property of all pharmacy faculty and single courses are led by individual faculty or groups of faculty under the direction of the faculty as a whole through a critical, collegial, and consensual process. The staff play a central role in supporting and integrating the work of the learning community.

Mentoring and learning-centered teaching incorporate innovative methods to integrate knowledge with current practices and foster creative ideas for individual and collective future pharmacy practice. Ample formative practice time enables student pharmacists to achieve a minimum level of competency in the outcome expectations.

The faculty and staff demonstrate through their teaching, practice, research and professional lives the highest standards of integrity, personal accountability, and professionalism. They exude a passion for the pharmacy profession and high expectations of their students. Respect and caring for the individual student, patient, colleague or other person, guides their daily interactions.

Student Pharmacists
The AUHSOP student pharmacists will enter the School with high expectations of self and the profession and demonstrate a commitment to developing life-long learning habits; the skills, abilities and knowledge required for a competent pharmacy practice, and; internalized behaviors and attitudes necessary for contemporary and future pharmacy practice. Respect and caring for the individual student, patient, colleague or any person, guides their daily interactions.
### Appendix 4 - AUHSOP Curricular Outcomes

#### Individual Patient Level

**Evaluate Pharmacotherapy of Individual Patients**

*(Make assessments of the drug therapy of individual patients for appropriateness or inappropriateness)*

<table>
<thead>
<tr>
<th>Level</th>
<th>Task Number</th>
<th>Task Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1a</td>
<td>Form a covenantal relationship with patients, motivated by care and respect</td>
</tr>
<tr>
<td>1</td>
<td>1b</td>
<td>Assess patient understanding of illness and treatment (health literacy)</td>
</tr>
<tr>
<td>1</td>
<td>1c</td>
<td>Prioritize / triage patient problems</td>
</tr>
<tr>
<td>1</td>
<td>1d</td>
<td>Evaluate patient specific drug therapy and non-drug therapy</td>
</tr>
<tr>
<td>1</td>
<td>1e</td>
<td>Gather, compile, and evaluate subjective and objective data (see evaluate patient specific...therapy, above)</td>
</tr>
<tr>
<td>1</td>
<td>1f</td>
<td>Assess patient readiness / motivation / ability to accept therapy / lifestyle recommendations</td>
</tr>
<tr>
<td>1</td>
<td>1g</td>
<td>Determine pharmacotherapy goals (patient advocacy, collaboration with patient and other healthcare professionals)</td>
</tr>
</tbody>
</table>

**Provide Appropriate Pharmacotherapy Interventions to Individual Patients**

*(Develop patient-specific recommendations and plans, including follow up)*

<table>
<thead>
<tr>
<th>Level</th>
<th>Task Number</th>
<th>Task Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>2a</td>
<td>Provide emergency care</td>
</tr>
<tr>
<td>1</td>
<td>2b</td>
<td>Make needed referrals</td>
</tr>
<tr>
<td>1</td>
<td>2c</td>
<td>Develop evidence-based pharmacotherapy recommendations and plans to prevent or resolve medication-related problems or to respond to information requests</td>
</tr>
<tr>
<td>1</td>
<td>2d</td>
<td>Communicate evidence based recommendations and plans to patients and health care professionals</td>
</tr>
<tr>
<td>1</td>
<td>2e</td>
<td>Advise patients about drug choices and other treatment options</td>
</tr>
<tr>
<td>1</td>
<td>2f</td>
<td>Provide patient counseling relative to pharmacotherapy / health maintenance / wellness</td>
</tr>
<tr>
<td>1</td>
<td>2g</td>
<td>Address patient concerns / resistance / ambivalence and cultural consideration</td>
</tr>
<tr>
<td>1</td>
<td>2h</td>
<td>Implement therapeutic plan (including administration)</td>
</tr>
<tr>
<td>1</td>
<td>2i</td>
<td>Evaluate therapeutic plan (including monitoring)</td>
</tr>
<tr>
<td>1</td>
<td>2j</td>
<td>Document pharmaceutical care activities for ongoing patient care, quality control, quality assurance, and accountability</td>
</tr>
<tr>
<td>1</td>
<td>2k</td>
<td>Assist with access to health services</td>
</tr>
</tbody>
</table>

**Ensure Appropriate Drug Distribution to Individual Patients**

*(Supervision of the drug distribution process is a core responsibility of pharmacy, although pharmacists may not perform the manipulative function)*

<table>
<thead>
<tr>
<th>Level</th>
<th>Task Number</th>
<th>Task Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3a</td>
<td>Prepare and package safe and effective dosage forms (including compounding)</td>
</tr>
<tr>
<td>1</td>
<td>3b</td>
<td>Make appropriate drug product selection decisions</td>
</tr>
<tr>
<td>1</td>
<td>3c</td>
<td>Accurately interpret prescriptions</td>
</tr>
<tr>
<td>1</td>
<td>3d</td>
<td>Screen prescription orders for drug related problems</td>
</tr>
<tr>
<td>1</td>
<td>3e</td>
<td>Verify accuracy of the dispensed product</td>
</tr>
</tbody>
</table>

**Organizational Level**

**Maintain and Enhance Competence through Self-Initiated Learning**
(Maintenance of individual competence via self-initiate learning is a core responsibility of professionals)

<table>
<thead>
<tr>
<th>Level</th>
<th>Task Number</th>
<th>Task Description</th>
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</thead>
<tbody>
<tr>
<td>3</td>
<td>4a</td>
<td>Participate in CE</td>
</tr>
<tr>
<td>1</td>
<td>4b</td>
<td>Review and critically evaluate the literature to keep current on therapeutic / practice issues</td>
</tr>
<tr>
<td>3</td>
<td>4c</td>
<td>Network with fellow professionals at local and national level</td>
</tr>
<tr>
<td>1</td>
<td>4d</td>
<td>Use regular self-assessment and peer assessment to identify learning needs and self-directed learning efforts When presented with an unfamiliar situation, take initiative to ...remediate, time management, etc.</td>
</tr>
<tr>
<td>1</td>
<td>4e</td>
<td>Identify and use resources to stay current and meet learning needs (e.g., professional library, pharmacy organizations, journals, and listservs)</td>
</tr>
</tbody>
</table>

Manage the Pharmacy within the Organization’s Business Plan
(Entry level pharmacists must be able to perform basic management processes in their pharmacy practice settings)

<table>
<thead>
<tr>
<th>Level</th>
<th>Task Number</th>
<th>Task Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>5a</td>
<td>Manage human resources</td>
</tr>
<tr>
<td>3</td>
<td>5b</td>
<td>Manage facilities / finances</td>
</tr>
<tr>
<td>2</td>
<td>5c</td>
<td>Manage inventory / formulary</td>
</tr>
<tr>
<td>1</td>
<td>5d</td>
<td>Manage the dispensing process</td>
</tr>
<tr>
<td>1</td>
<td>5e</td>
<td>Manage patients</td>
</tr>
<tr>
<td>1</td>
<td>5f</td>
<td>Ensure compliance with laws, regulations, etc.</td>
</tr>
<tr>
<td>1</td>
<td>5g</td>
<td>Manage information technology</td>
</tr>
<tr>
<td>1</td>
<td>5h</td>
<td>Apply research and assessment methods to establish quality, values and outcomes</td>
</tr>
<tr>
<td>1</td>
<td>5i</td>
<td>Collaborate as an effective, efficient and accountable team member</td>
</tr>
</tbody>
</table>

Develop Practice and Leadership
(Graduates are expected to exhibit leadership qualities in developing and improving their practices and their own careers)

<table>
<thead>
<tr>
<th>Level</th>
<th>Task Number</th>
<th>Task Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>6a</td>
<td>Establish and sustain professional credibility as a student pharmacist including demonstration of professionalism competencies (see end of document)</td>
</tr>
<tr>
<td>2</td>
<td>6b</td>
<td>Determine strengths, weaknesses, opportunities, and threats of the practice site</td>
</tr>
<tr>
<td>2</td>
<td>6c</td>
<td>Identify and prioritize changes needed to implement the ideal practice (e.g., remunerable services, work flow change, or enhance clinical services)</td>
</tr>
<tr>
<td>2</td>
<td>6d</td>
<td>Create a plan of action to address needs (may include a business and / or marketing plan)</td>
</tr>
<tr>
<td>1</td>
<td>6e</td>
<td>Explore career pathways</td>
</tr>
<tr>
<td>1</td>
<td>6f</td>
<td>Develop and maintain a career plan</td>
</tr>
<tr>
<td>3</td>
<td>6g</td>
<td>Negotiate contracts</td>
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</table>
Societal Level

Participate in Public Health and Professional Initiatives and Policies

(Participation in such activities is essential to the public well being and the profession of pharmacy)

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<tr>
<th>Level</th>
<th>Task Number</th>
<th>Task Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>7a</td>
<td>Contribute to government and public health initiatives and policy development</td>
</tr>
<tr>
<td>1</td>
<td>7b</td>
<td>Identify potential opportunities to serve the public, Educate the public and other health professionals to improve health promotion and disease prevention</td>
</tr>
<tr>
<td>3</td>
<td>7c</td>
<td>Respond to disaster</td>
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</table>

Advance the Profession

(Graduates are expected to actively work to advance the profession of pharmacy and the pharmaceutical care model of practice)

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<thead>
<tr>
<th>Level</th>
<th>Task Number</th>
<th>Task Description</th>
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<tbody>
<tr>
<td>1</td>
<td>8a</td>
<td>Educate current and future health care professionals (mentoring, peer teaching) to influence their decisions, share responsibility, and maintain effective working relationships</td>
</tr>
<tr>
<td>1</td>
<td>8b</td>
<td>Participate in professional organization activities</td>
</tr>
<tr>
<td>1</td>
<td>8c</td>
<td>Establish and maintain professional collaborations</td>
</tr>
<tr>
<td>1</td>
<td>8d</td>
<td>Evaluate own and peer’s behavior against professional standards and take appropriate actions</td>
</tr>
<tr>
<td>4</td>
<td>8f</td>
<td>Advocate professional improvements</td>
</tr>
</tbody>
</table>

Professionalism Competencies – “Way of Being” for all curriculum

**Capability is characterized by:**
- Competence
- High standards – quality work
- Self directed
- Communicate effectively
- Reproducible work

**Caring is characterized by:**
- Charitableness
- Confidentiality
- Patient Advocacy
- Putting the health needs of patient before own
- Service – beyond requirements
- Respectfulness, civility

**Character is characterized by:**
- Honesty
- High ethical moral actions
- Accountability

**Conscientiousness is characterized by:**
- Preparedness
- Functional self-directedness
- Dependability / reliability
- Has priorities straight
- Service in professional organizations

Appendix 5 – ACPE Standard 15
Assessment and Evaluation of Student Learning and Curricular Effectiveness

AUHSOP must:
• Develop and carry out assessment activities to collect information about the attainment of desired student learning outcomes
• Use assessment activities that are valid, reliable, and vary throughout the program
• Analyze assessment measures to improve learning and achieve professional competencies.
• Evaluate and analyze curricular structure, content, organization, and outcomes for continuous improvement

Guideline 15.1
AUHSOP’s evaluation of student learning should:
• Use a variety of assessments
• Document how the learning experiences are appropriate for the development of the competencies, as well as the instructional methods (e.g., presentations, demonstrations, discussions) and materials that should be used
• Demonstrate and document in student portfolios that graduates have attained the desired competencies, when measured in a variety of health care settings
• Incorporate periodic, psychometrically sound, comprehensive, knowledge-based, and performance-based formative and summative assessments, including nationally standardized assessments (in addition to graduates’ performance on licensure examinations) that allow comparisons and benchmarks with all accredited and peer institutions
• Use procedures that promote integration, application, and assessment of principles, critical thinking, problem solving, and professionalism, in addition to memorization of facts
• Include student self-assessments and faculty and preceptor assessments of student development of the professional competencies and the demonstration of professional behaviors
• Promote consistency and reliability of assessments within and among faculty, practice sites and preceptors

Guideline 15.2
A system of evaluation of curricular effectiveness must be developed that should:
• Foster data-driven continuous improvement of curricular structure, content, process, and outcomes
• Assess the achievement of the desired competencies and outcomes for each of the biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences, as well as the overall curricular competencies and outcomes that reflect incorporation of all of these sciences in pharmacy practice
• Include input from faculty, students, administrators, preceptors, practitioners, state board of pharmacy members, and others
• Foster and assess self-initiated student learning
• Foster and assess experimentation and innovation
• Be responsive to changes in pharmacy practice and educational and practice technologies
• Ensure that educational settings and methods of instruction lead to effective and efficient learning experiences
• Be evidence-based

Guideline 15.3
The college or school must ensure the credibility of the degrees it awards and the integrity of student work. Formal examinations should take place under circumstances that ensure the correct identity of the student and limit opportunities for academic misconduct.

Guideline 15.4
Student portfolios should be employed to document students’ progressive achievement of the competencies throughout the curriculum and the practice experiences. The portfolios should be standardized and include student self-assessment, as well as faculty and preceptor assessments of the educational outcomes.

Guideline 15.5
The college or school should have mechanisms to assess and correct underlying causes of ineffective learning experiences. In this regard, the college or school’s assessments should include measurement of perceived stress in faculty, staff, and students, and evaluate the potential for a negative impact on programmatic outcomes and morale.
6) Faculty Workload Policy – *A calculations worksheet is distributed annually to all faculty by their respective department head.*

I. Introduction

Auburn University is the State of Alabama’s oldest land grant institution, and its three-fold mission of instruction, outreach, and research is unique among the public colleges and universities in Alabama. The faculty is responsible for the discovery, creation, and transmission of knowledge and skills across the generations as well as the advancement of culture in our society. The University serves students and scholars from across the state as well as from beyond its borders. Across a wide variety of areas and disciplines, the University provides an environment in which new ideas are fostered. Its faculty members disseminate that knowledge to students in baccalaureate through graduate and professional degree programs, and in continuing education to the citizens of the State.

Because the University is a comprehensive teaching and research institution, the academic units, faculties, programs, and students are heterogeneous. The students served by its programs, the qualifications and responsibilities of faculty members who provide instruction, and the many benefits to the state are not easily categorized.

To provide the breadth of academic programs required of the University, the faculty performs a complex combination of duties. In this document these collective duties are termed workload. Workload may be defined as all faculty activities that contribute to the accomplishment of unit-related activities and responsibilities: teaching, outreach, research and creative activity, interacting with students, clinical care, institutional and professional service, service to the community, and professional development. The essential character of workload is established for all the diverse types of faculty appointments in the guidelines for re-appointment, promotion, and tenure within the University and in the distribution of effort agreement that directs each faculty member’s working schedule. Workload management requires the realistic assignment of a faculty member’s time and University resources.

Faculty members are independent professionals without prescribed working hours. For some, the work period fits a conventional workday, five days a week. For most, the workday is more flexible, and ultimately more time consuming. Typically, heavy time commitments--to teaching, grading, and research--fill days, late nights, and weekends during each term. In the summer months, many faculty members commit to rigorous academic preparation or research and outreach schedules. Because of the flexible, interactive, and complex nature of academic work, and because many faculty members are able to set their own schedules within a class-time framework, time spent in any one of the three areas of teaching, outreach, and research varies from day to day and may change markedly from term to term.

Many studies indicate that most University faculty members work an average of fifty-five
hours per week. [See, for example, Harold E. Yuker, Faculty Workload: Research, Theory, and Interpretation, ASHE-ERIC Higher Education Report No. 10. (Washington, DC: Association for the Study of Higher Education, 1981.)] The work week includes activities in a multitude of environments such as libraries, laboratories, and formal and informal settings around the University and elsewhere. Such activities include teaching and advising, constructing and scoring examinations, reading and grading papers, mentoring graduate students, directing graduate thesis and dissertation research, administrative duties, governance work, outreach work, research and creative work, keeping abreast of developments in one's professional field, and providing professional services. The faculty work year ranges from nine to twelve months. Many faculty members are not compensated for some months each year, yet they spend these months preparing new courses, in professional development, and preparing research or creative projects for publication, exhibition, or performance.

Faculty workload includes formal classroom instruction, from undergraduate through postdoctoral levels, which may be measured by term credit hours; laboratory, studio, and clinical contact hours; and informal non-classroom teaching. Workload includes research, or those activities that have as their goal a specific scholarly production, whether it is non-sponsored, individual research, or organized research supported by appropriation or extramural funding. Workload also includes external service activities performed by faculty members on behalf of their profession and the general public, and internal service, or work on behalf of colleagues, students, and University units. While teaching, outreach, and research may be regarded as separate activities, in practice, these three workload components are rarely distinct. Administrative flexibility is required to assign and assess research, outreach, and teaching. Therefore, workload assignments should be determined by unit administrators who understand the abilities and interests of their individual faculty members as well as the balance of activities necessary to maintain an effective academic unit.

The standard for teaching-only working assignments for regular-title appointment faculty members is 15 credit hours per term. The workload standard for outreach- or research-only assignments would be equivalent in time and effort to the teaching-only assignment. Most University faculty members will not have such singular focus assignments, but will divide their time among outreach, teaching, research, and service responsibilities. Specific guidelines for determining workloads should be developed at the unit level and should recognize the variability of teaching assignments, such as class size and level, research involvement, and outreach responsibilities. Guidelines for determining workloads are in Attachment A.

II. Principles for Implementing Faculty Workload Policies at Auburn University

A. Each unit is responsible to its dean or appropriate administrator for contributing to three mission areas: teaching, outreach, and research. The heads/chairs or unit administrator’s best know and understand unit needs and the abilities and interests of their faculty members. Appropriate workload management by unit administrators seeks to best serve student interests and meet departmental
responsibilities by maximizing the application of faculty expertise through a Differentiated Distribution of Effort, or DDE. The rationale for a DDE stems from the recognition that the University's three-part mission is an aggregated institutional mission, not necessarily the mission of each individual faculty member. Therefore, to implement a DDE, workload should be conceived of as variable individual efforts which, when aggregated at the unit level, allow that unit to meet its academic responsibilities and contribute to the overall University mission. To enhance the ability of a particular unit to meet its academic responsibilities, individuals may be assigned asymmetrical workload distributions that emphasize one or two mission areas, rather than all three. The DDE will permit the department heads/chairs or unit administrators, with approval by the dean or the appropriate administrative officer, to assure fairness in the distribution of responsibility among faculty members. The merit evaluation system should reflect the reality of workload distributions and the amount of effort that constitutes a full load equivalent. Because of promotion and tenure requirements, a DDE heavily weighted toward one area would normally be inappropriate for tenure-track faculty members. Unit administrators should be allowed latitude in making individual workload assignments, and care should be taken that all of a faculty member's contributions to the institution be considered.

B. Policies and practices shall assure that full-time, regular-title series faculty members have comparable total effort. Individual distributions of teaching, outreach, and research may vary, but should not result in reduced effort for some individuals within a unit. By their nature, other title-series faculty appointments carry more definite workload specifications.

C. The workload for an individual faculty member would be equivalent to:

1. a teaching-only assignment in which the person would teach some combination of classes and engage in associated teaching-related activities that, given the qualifications in Attachment A, Section II.A., would be equal to 15 credit hours per term. At Auburn University, the standard teaching-only workload is 15 credit hours per term, or the equivalent in other teaching, outreach, and research responsibilities.

2. a research-only assignment equivalent to teaching 15 credit hours per term in which the person would direct research activities, supervise research team members, administer grants and contracts, prepare grant proposals, and/or engage in other research activities as described in Attachment A, Section III.D., sufficient to maintain a vigorous research program comparable to successful full-time researchers in the same or comparable fields at the best of our benchmark institutions.

3. an outreach-only assignment in which the person would engage in outreach activities, such as those described in Attachment A, Section III.E., for the equivalent of teaching 15 credit hours per term.
In practice, few faculty members with regular-title appointments would have such a singular focus but would combine teaching, research, outreach, and service responsibilities, such that their aggregate workload would be equivalent to any one of these assignments.

Since Auburn University is one of the state’s primary research institutions, and faculty members are expected to establish research programs, an individual whose research has produced an internationally recognized body of work and has obtained external funding support may be assigned to teach one or two courses per term. Their remaining academic effort would be allotted to research, and/or outreach and service. This effort would constitute a full academic workload, and the definition of full load and contact hour will vary across departments. The head/chair might assign another faculty member, whose research program, outreach and service responsibilities are limited, to teach three or four courses. Such an assignment would be reevaluated on a regular basis, in conjunction with a regular faculty review period.

These are examples, and many other DDE combinations are possible. The merit evaluation system should reflect the reality of workload distributions and the amount of effort that constitutes a full load equivalent

D. Considerations for adjusting workload distributions for an individual should relate to:

1. difficulty, scope, size, and level of courses taught (e.g., number of preparations, development of new courses or revisions of existing courses, type of instruction, class size, use of teaching assistants, advisement and mentoring activities);

2. responsibilities for research, outreach, or service.

E. Research, outreach, and non-classroom teaching are more difficult to quantify than formal classroom teaching but are, nevertheless, assessed according to unit policy. Policies and practices shall assure that full-time faculty members have comparable total effort, although individual distributions of teaching, outreach, and research may vary.

III. Expectations and Outcomes

In support of this workload policy, the University will operate in consideration of the following:

A. Expectations

1. Faculty members in each unit should participate with unit administrators
in determining guidelines and procedures for assigning workloads;

2. Each unit should assure that all faculty members within the unit have comparable workloads;

3. Reappraisals of workload policy within units should occur at regular intervals to respond to university and college missions and to adjust to changes in size, structure, and curricular demands; and,

4. Those policies and practices should be communicated to all faculty members each year.

B. Outcomes

1. On behalf of the State of Alabama, Auburn University faculty members aspire to accomplish a three-part mission: to create knowledge through research; to preserve and disseminate knowledge through education; and to serve the public through outreach expertise. This workload statement seeks to achieve these ideals through the realistic management of faculty time and University resources.

2. The University faculty places high value upon the process and product of scholarship, and seeks to make University students and Alabama residents the chief beneficiaries of that scholarship. Teaching must be informed by research; to do otherwise would be to offer outdated ideas and solutions to tomorrow's problems. Extramural funding for scholarly and creative work enhances resources provided within the state and, in addition to supporting research, benefit teaching and outreach productivity.

3. University teaching and research programs will provide students studying at the University at all levels--undergraduate through postdoctoral--with the best experience that faculty and resources can provide. Thus, a university education will foster a cadre of graduates who will be informed and skilled citizens, providing leadership for the state’s business, industry, professions, and government.

4. University programs will also contribute to the life of the community by helping individuals to define and pursue personal goals which enrich their own lives and which ultimately contribute to the well-being of Alabama’s citizens.

5. Given these commitments on the part of University faculty members, this workload statement seeks to assure the faculty, in turn, that their assignments will be equitable, and recognition and reward will be based upon the quality of their accomplishments.
Attachment A

Differentiated Distribution of Effort
Guidelines for Establishing Workload Equivalency

I. General Terminology

A. Contact Hour

A standard one-hour classroom period. Contact Hours, per se, will appear only in the Classroom Instruction activity category.

B. Contact Hour Equivalencies

All activities other than Classroom Instruction will be measured in the activities report by converting them to their equivalencies in terms of contact hours. The method of conversion will vary with the specific activity category, and will be described therein. (Some classroom instruction may be eligible for Contact Hour Equivalencies in addition to Contact Hours. See II.A. below).

C. Faculty

Used throughout the body of this document to include faculty, faculty adjuncts, graduate assistants, and house staff (residents in health center/medical programs) where appropriate.

D. Faculty Member’s Designated Effort

In each activity category, 1.0 faculty member will have a percentage of that full time equivalent (FTE), 0% to 100%, allocated to the activity being described. This number is the faculty member’s Designated Effort in the category.

E. Faculty Member’s Total Effort

The sum of the faculty member’s Designated Efforts from all activity categories. For 1.0 FTE faculty, this should not vary from 100%.
II. Instruction

A. Classroom Instruction

Definition: The scholarship of teaching has the highest faculty priority. Teaching is broadly defined to include formal classroom instruction, which may be measured by term Credit Hours, but also includes laboratory, studio, and clinical contact hours. Courses may consist of lectures, discussion and quiz sections, laboratory exercises, field studies, industrial and clinical practice, and seminars. Formal classroom teaching includes conception, design, and preparation; research; performance; individual tutoring and mentoring; and evaluation of student accomplishment. Courses may be offered through distance education as well as in on-campus classrooms.

Teaching extends beyond the formal classroom setting. Since some of the most valuable teaching frequently occurs in one-on-one sessions outside the classroom, every contact between students and faculty members is a teaching opportunity. In these settings, formal credit hours do not measure the actual contact hours faculty members spend with students, yet such instruction often accounts for a major portion of the work week for the faculty members involved. Much undergraduate laboratory, studio, and field work is informal. At the graduate level most education combines informal and formal classroom teaching. Beyond-the-classroom education has many aspects of an apprenticeship. For example, students in the health care professions learn from faculty as they treat patients. For these students, such experience may be the single most important component of the educational process.

Teaching also includes advising, whether it is advising lower division class members, upper division majors, graduate students working on thesis or dissertation research, supervision of internships, or guidance given students enrolled in professional programs. Teaching and advising may merge in many programs to become one process. Therefore, the teaching portion of the overall workload will vary among individuals, from program to program, and from term to term, depending upon the teaching duties of each person. Faculty members may teach fewer courses when actual contact hours substantially exceed formal credit hours, as they usually do in laboratory, studio, clinical, and field work assignments.

Professional development is also of primary importance since, to be effective teachers, it is mandatory that faculty members know and understand the intellectual and practical status of each subject they teach, and follow disciplinary advancements through the professional literature and other appropriate creative forums. This workload component cannot be measured by the number of courses or credit hours taught. Nevertheless, it is at the heart of all University academic programs.
Contact Hours are the actual number of hours the section meets per week. For sections that are taught by more than one faculty member, the Contact Hours are multiplied by the portion of the section workload assigned to each faculty member to determine the members’ contact hour shares.

Contact Hour Equivalencies in addition to regular Contact Hours may be assigned to classroom instruction activities which involve unusual and significant requirements for preparation, conduct of classes, evaluation of student progress, etc. Additional Contact Hour Equivalencies may be assigned to the course section and should be used primarily when an assignment requires the teaching of large sections or small group active learning courses but usually will not exceed the assigned contact hours for the course. Justification for such assigned Contact Hour Equivalencies will be documented on the Faculty Workload Assignment form (FWA). These equivalencies are course specific.

Designated Effort for this activity is determined by multiplying the sum of Contact Hour Equivalence by 0.0222 for twelve-month appointments, then converted to percent.

B. Thesis/Dissertation Supervision

Definition: Participation in thesis/dissertation supervision assignments for the individual faculty member shall be stated in general terms based on anticipated involvement for the academic year.

Designated Effort for this activity is determined by multiplying the sum of Contact Hour Equivalence by 0.0222 for twelve-month appointments, then converted to percent.

C. Directed Individual Studies

Definition: Instructional activity in which a student studies a specifically assigned topic on his or her own and meets regularly with the faculty member to review progress and evaluate achievements.

Contact Hour Equivalencies are assigned at a maximum of 0.5 Contact Hour for each student enrolled for credit.

Designated Effort for this activity is determined by multiplying the sum of Contact Hour Equivalence by 0.0222 for twelve-month appointments, then converted to percent.

D. Supervision of Student Interns

Definition: Coordinating the placement of students into internships, supervision
and evaluation of interns, conducting seminars for, and counseling student interns.

**Contact Hour Equivalencies** are assigned at a maximum of 0.5 Contact Hours for each intern supervised for credit.

**Designated Effort** for this activity is determined by multiplying the sum of Contact Hour Equivalence by 0.0222 for twelve-month appointments, then converted to percent.

E. Supervised Teaching/Research

**Definition:** The supervision of teaching and/or research of graduate students (other than Thesis/Dissertation Research or Directed Individual Study). Such students must be registered for credit for the teaching or research activity being supervised.

**Contact Hour Equivalencies** are assigned at a maximum of 0.5 Contact Hours for each student.

**Designated Effort** for this activity is determined by multiplying the sum of Contact Hour Equivalence by 0.0222 for twelve-month appointments, then converted to percent.

III. Other Work Unit Generating Activities

A. Supervision of Cooperative Education

**Definition:** Coordinating the placement of cooperative education students into supervised work experiences, evaluating student progress, and counseling and conducting seminars for cooperative education students.

**Contact Hours Equivalencies** are assigned at a maximum of 0.5 Contact hours per term for each cooperative education student supervised.

**Designated Effort** for this activity is determined by multiplying the sum of Contact Hour Equivalence by 0.0222 for twelve-month appointments, then converted to percent.

B. Clinical Instruction

**Definition:** Instruction offered to interns, residents, house officers, and post-doctoral trainees in clinical situations by clinical faculty of pharmacy and veterinary medicine.

**Contact Hour Equivalencies** for this activity are determined by dividing 0.0666 into the Designated Effort (expressed as a decimal) and then multiplying by
number of terms.

C. Other Instructional Effort

Definition: Performance of instructional-related activities which have been approved by the provost, dean or head/chair and which are not included in other categories. This may include the development of new approaches, improvement of materials for credit courses, participation in the planning, development and/or evaluation of total curricula, including planning authorization requests and implementation proposals for new degree programs. Generally this activity exceeds what ordinarily is expected in course maintenance.

Contact Hour Equivalencies for this activity are determined by dividing 0.0666 into the Designated Effort (expressed as a decimal) and then multiplying by number of terms.

D. Research

Definition: Because Auburn University is one of our state’s primary research institutions, faculty members are expected to actively engage in the scholarship of research (discovery, integration and application) on a par with those at the best benchmark institutions. Research may be non-sponsored, individual research, or organized research supported by extramural funding. Scholarship of research may also include that which has a specific deliverable. Examples of scholarship may include the historian spending long hours in the University library and in bibliographic collections across the globe in order to interpret our heritage. The engineer may form an academic-industry team to enhance robot design and thereby improve work place productivity. The musician, artist, poet, and architect create sounds, visions, words, and structures that will uplift community spirit. Scholarship of research leads to a collective advancement of knowledge which may have applied, theoretical, or aesthetic attributes, and it has a central role in enhancing teaching. An effective research program also underwrites professional development.

Scholarship of research and development is ordinarily managed within academic departments. Such activities usually have stated goals or purposes and projected outcomes, and may be created for specific periods as a result of a contract, grant, or specific allocation of institutional or system resources. Research activity of Alabama Agriculture Experimental Station (AAES) is included in this category. A component of Research and Development is the eventual dissemination of research results. Research assignments for the individual faculty member shall be stated in general terms. At the end of the term, a record shall show specific activities toward fulfilling the assignment for research. Research output can be measured by quality and number of productions or publications, and, in some fields, by awards, contracts, and grants received.
Student engagement in ongoing research activities should be considered as part of the designated effort for faculty research activity.

**Contact Hour Equivalencies** for this activity are determined by dividing 0.0666 into the Designated Effort (expressed as a decimal) and then multiplying by number of terms.

**E. Outreach**

**Definition:** Outreach extends the professional and/or discipline-related services of faculty members to the community, the state, and/or the nation. The primary intent is to provide mission-related research and/or instruction for the direct benefit of groups and individuals outside the University. Activities of Alabama Cooperative Extension System (ACES) are included in the Outreach category.

Auburn University is committed to providing outreach to Alabama and its residents, and to broaden constituencies outside the state. Examples of outreach include continuing education programs; technical assistance and informal education to governmental units, private organizations, and individuals; clinical services; and community and economic development activities.

**Contact Hour Equivalencies** for this activity are determined by dividing 0.0666 into the Designated Effort (expressed as a decimal) and then multiplying by number of terms.

**F. Internal and External Services**

HSOP depends upon its faculty members to provide many academic governance functions, and this work comprises a part of their internal service. For example, faculty members serve on appointed committees, faculty search committees, review panels, re-appointment, promotion and tenure committees, budget and program task forces, admissions interviews, and many others.

Faculty members are also responsible for service to their professional disciplines. They edit and manage journal publications, and serve on editorial boards that evaluate the quality of research manuscripts submitted for publication. They serve as officers of professional organizations, constitute groups that advise state and federal governments, sit on national panels that select research grant applications for funding, organize and chair scholarly and public meetings and symposia, and serve in advisory capacities to government, industry, and social service organizations.

Service assignments for the individual faculty member for each academic term shall be stated in general terms. At the end of the term, a record shall show specific activities toward fulfilling the assignments for public service.
Contact Hour Equivalencies for this activity are determined by dividing 0.0666 into the Designated Effort (expressed as a decimal) and then multiplying by number of terms.

G. Academic Administration

**Definition:** Supervisory, management, or staff activities related to the administration of a department, college, other unit, or the university. This activity provides administrative support and management direction to the instructional, research and outreach programs. Assignments customarily and regularly require the incumbent to exercise discretion and independent judgment and to direct the work of others. Effort in this activity should reflect the administrative duties assigned to the faculty member. This activity does not include course coordination.

Contact Hour Equivalencies for this activity are determined by dividing 0.0666 into the Designated Effort (expressed as a decimal) and then multiplying by number of terms.

H. University Governance

**Definition:** Activities that provide advisory support to the general governance of the University. Includes participation in the general governance of the University in accordance with the governance policies, limited to participation in the legislative processes of the University and service on committees associated with these legislative processes. Includes special assignments such as consultative service to University offices and units.

Contact Hour Equivalencies for this activity are determined by dividing 0.0666 into the Designated Effort (expressed as a decimal) and then multiplying by number of terms.

IV. Interactions Among Teaching, Outreach, and Research

Individual faculty members' workloads consist of three separate components: teaching, outreach, and research. For most academic disciplines, these components rarely are clearly distinct. Teaching and research overlap for most physical sciences, life sciences, social sciences, humanities, and engineering faculty projects, where research by the faculty member is inseparable from teaching research methods to graduate students and postdoctoral fellows. Research and outreach are inseparable when the research involves issues relevant to the community or the state, such as programs to assess drug abuse, to improve the health of Alabama citizens, or to demonstrate agricultural research in producer’s fields. Teaching and outreach are one when the teaching is in a community healthcare center or a demonstration school. Research and teaching missions are often combined in programs other than those leading to baccalaureate and graduate degrees. For example, a faculty member may be doing research on reading which...
affects teaching in the secondary education classroom or is applied to adult literacy programs in the community.

7) **Faculty Appraisal** – *Memo from the Dean dated January 9, 2012*

HSOP’s faculty appraisal and development program is meant to provide feedback to faculty members about their individual performance and attempts to provide direction in their continuing development. I am asking that you initiate the appraisal process for your department.

Your appraisal letters are due in my office no later than **May 4th, 2012**. Additionally, supporting documentation should be submitted to my office via a faculty portfolio in E-Value. Please insure that my office has access to each portfolio. Each faculty members’ portfolio submission must include the following:

3. Long Range Goals
4. Progress Report on Objectives for immediate past academic year
5. Proposed Objectives for the upcoming academic year
6. Workload Assignments for upcoming academic year

Faculty should be encouraged to include other formative aspects of their portfolio which represent their best works with scholarly and creative activities (instruction, discovery, integration, application, outreach). You may require additional information from faculty to facilitate the appraisal/development activity.

In addition, please submit merit increase recommendations to my office by May 4, 2012.
Merit Increase Guidelines

The purpose of these guidelines is to encourage continuity in how merit increases are determined inter-departmentally for faculty and administrators within the School of Pharmacy. Benchmark expectations of faculty for each academic area are defined under Category A. Performance appraisal for the purposes of developing merit-based salary adjustments is completed annually by Department Heads. Recommendations for increases are forwarded to the Dean for approval. The basis for determining merit category recommendations is faculty performance documented through the management by objectives (MBO) program. Components of the MBO program that are evaluated in establishing a merit category recommendation include: achievements toward mutually established five-year goals and yearly objectives and performance with other work assignments (teaching/research-scholarship/outreach/citizenship). In addition, consistent annual activity reports and other artifacts supporting performance submitted by faculty may be used as evidence for merit increase decisions (i.e., teaching and/or outreach portfolios).

Assessment of the faculty member’s progress will be compared to accomplishment of the individual’s stated goals from the previous year. Scholarship of teaching performance will be evaluated using summative (i.e., student evaluation, peer evaluations) as well as formative (i.e., teaching portfolio) measures. In all academic areas, distinctions will be made between mere maintenance and membership versus active involvement, discovery, and innovation (i.e., completion of teaching assignment vs innovations in the classroom and committee membership vs active involvement). Patient care and contributions to the practice environment will be assessed as a component of outreach.

The following category definitions will be used to determine meritorious salary adjustments:

Category A

This category describes the faculty member whose accomplishment of objectives is clearly exceptional in academic areas plus good citizenship. The faculty member’s objectives are consistent with five-year goals and supportive of the departmental work plan which was developed in support of the School’s strategic plan. Established objectives have been successfully completed and if they are not, progress was clearly hampered by circumstances beyond the control of the faculty member. In addition, performance in other work assignments (teaching/outreach/research-scholarship/citizenship) is clearly exceptional.
Scholarship of teaching reflects innovation with continuous effort to improve, reassess, and revise teaching methodologies and learning strategies as well as the methods of student evaluation.

Outreach accomplishments include the faculty member’s involvement in professional and/or discipline related services in the community, state, nationally, or internationally. These include service in professional organizations, academic or professional student organizations and patient care activities on behalf of the School and University as part of his/her SOP responsibilities. Contributions to affiliated pharmacy departments and patient care responsibilities, such as drug therapy interventions and innovations implemented to enhance the provision and quality of care, should be documented.

Established objectives for scholarship in creative works projected for the evaluation period have been successfully achieved with supporting evidence (i.e., publication in peer reviewed journals, presentations to recognized professional organizations, funding requests to extramural agencies). Creative works include results from scholarship in teaching, outreach, and research. To be considered exceptional they must be original works and contribute significantly to the body of knowledge for the faculty member’s discipline. Extramural funding may or may not be considered as an indicator of the work’s value to society.

Citizenship means to identify with the School of Pharmacy and Auburn University community. Teamwork and collaborative learning are used to enhance teaching and learning. Faculty serve as model citizens for both peers and students. They encourage collegiality by mentoring junior faculty to become teacher-scholars. Institutional contributions include work that facilitates and promotes the growth, development, and mission of the University and School of Pharmacy. This area includes participation on School of Pharmacy and University committees, representation of the institution for its advancement, mentoring student organizations, and participation in campus and school governance.

Category B
This category is reserved for individuals who have achieved established objectives and other work assignments in a manner considered significantly better than average. Citizenship is considered.

Category C
This category is reserved for individuals who have achieved most established objectives and other work assignments in a manner considered as average. Citizenship is considered.

Category D
This category is reserved for individuals who have achieved most established objectives and other work assignments in a manner considered as marginal. Citizenship is considered.

Category F
This category is reserved for individuals who have completed established objectives and other workload assignments in a manner considered inadequate. Citizenship is considered.

8) Faculty Voting Privileges
All faculty, both tenure-track and clinical track, may vote in Harrison School of Pharmacy faculty meetings. Faculty from other departments with joint appointments in the Harrison School of Pharmacy will only vote in the department where they hold their primary faculty appointment and are not eligible to vote in HSOP faculty meetings. The departments of Pharmacy Practice, Pharmacy Care Systems and Pharmacal Sciences each may determine their own rules for voting in department meetings especially in relation to affiliate faculty.

9) Faculty and Staff Meetings
Faculty Business Meetings
Meetings of the faculty are regularly scheduled and may be called to address special issues. The dean will preside at meetings of the faculty. In the absence of the dean, an associate or assistant dean will preside as designated by the dean. The assistant to the dean or executive secretary to the dean will record and distribute the minutes of the faculty meetings. The following rules will govern the conduct of the meetings:

a. Both voting and nonvoting members of the Harrison School of Pharmacy faculty and staff, including graduate assistants/associates, residents, and fellows may attend.

b. Notification of meetings are distributed at least one week in advance. Agenda and supporting discussion documents will be distributed in advance. Faculty will receive notification of specially called meetings and agenda at least 24 hours in advance.

c. Meetings will be held every other month during the calendar year.

d. Calls for agenda items requiring faculty action occur in advance and are included in the distributed agenda.

e. Motions to be voted upon by the faculty can only be introduced in regard to business items actually appearing on the agenda. A vote on any motion by ballot procedure may be requested by any faculty member. Voice from faculty attending meetings via teleconference or video conference will be addressed and reported by each connected site.

f. Minutes of all meetings will be distributed to each faculty member and such other persons as designated by the dean within two weeks of the meeting.

Faculty Colloquium
The meetings are held alternating with faculty business meetings and are intended to provide an opportunity to explore proposals and issues pertinent to the program. Generally the topic
is approached with both a proposal and evidence to facilitate a learned discussion. Examples of colloquium discussions include substantial curriculum changes, introduction of significant education approaches, discussions about the appropriate use of technology.

HSOP Town Hall Meetings
Meets once a semester and includes all faculty, staff and student pharmacists. The purpose is to share information about the progress of the School and other information relative to the organization. Additionally, this meeting serves as a general forum to invite discussion about specific proposals and changes. Special town hall meetings may be requested by faculty or the student council.

PRN Meetings with Dean
Informal meetings in which all faculty who wish to participate may attend. The purpose is to informally discuss topical issues facing the school.

10) Faculty Advisors to Student Organizations

Policy: Faculty advisors for the Harrison School of Pharmacy’s (HSOP) student pharmacist organizations will be formally appointed on an annual basis by the Dean in consultation with the Executive Committee. Faculty advisors are responsible for providing direction, guidance and mentorship to officers and members of their respective organizations, related to the planning and execution of activities. Ultimately, faculty advisors are also fiscally responsible for the organization. They are to provide oversight to assure that established Auburn University and Harrison School of Pharmacy policies and procedures are adhered to. Faculty advisors are also expected to assure that student organizations operate according to the organization’s established bylaws, policies and procedures. They will meet on a regular basis with the Coordinator of Student Services responsible for the HSOP’s student organizations. Service as a faculty advisor is appropriately recognized as a component in faculty workload assignments.

Procedure:
1. Faculty members interested in serving as advisors to student pharmacists organizations are encouraged to communicate their interests to the Dean. Student leaders of organizations are also encouraged to communicate to the Dean those faculty members they would like considered for appointment as advisors. Prior to making appointments, the Dean will seek input from the student pharmacist leaders of the various organizations.

2. Selection of advisors will be made by the Dean in consultation with the Executive Committee.

3. Advisors will be appointed on an annual basis beginning in August of each academic year. Appointment will be communicated to advisors via a letter which outlines the term of appointment along with the expectations and responsibilities of advisors.
4. Faculty members are required to respond in writing, accepting or declining appointment as an advisor.

11) Grants and Contracts

Timeline for Processing Proposals for Extramural Funding

Effective January, 2008

<table>
<thead>
<tr>
<th>Working Days before Agency Submission Deadline</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Abstract and budget to the Department Head</td>
</tr>
<tr>
<td>7</td>
<td>Abstract and budget to the Dean</td>
</tr>
<tr>
<td>3</td>
<td>Complete application and budget to OSP</td>
</tr>
</tbody>
</table>

Processing Proposals for Extramural Funding

(A) Routing: Proposals are initiated by the principal investigator either unsolicited or in response to an announcement. The proposal is to be routed and approved by the department and college and then forwarded to the Office of Sponsored Programs for approval. The routing process can be either electronic or hard copy. In cases where multiple departments and colleges are involved, approval from all departments and colleges must be received prior to submission to the Office of Sponsored Programs.

(B) Timing: Most funding agencies have submission deadlines. **In order for the Office of Sponsored Programs (OSP) to properly exercise its duties, effective January 1, 2008 completed proposals with approvals up through the college level must be submitted no later than three working days before the deadline.** OSP will guarantee submission of the proposal provided responses from the investigators on issues are received in a timely manner. OSP will continue to process late submissions but with no guarantee and on a first in first out basis. OSP will no longer put a late submission ahead of other timely submitted ones. Earlier submissions are strongly encouraged, particularly for faculty unfamiliar with the process and/or programs with unusual requirements such as cost share and compliance.

(C) Roles and Responsibilities: In proposal processing there are three major entities in addition to the principal investigator (PI): the department, the college, and the Office of Sponsored Programs (OSP). The followings are their roles and responsibilities in reverse order

Office of Sponsored Programs:
(1) The official institutional unit legally authorized to submit proposals and legally able to commit the university in the event an award is made.
(2) Review the University Cover Form for Extramural Programs for completeness and verify all approvals are obtained.
(3) Review and sign proposals and submit in the case of electronic submissions or in the case of hard copy submission return the proposal to the PI or department for mailing to sponsor.
(4) Provide guidance on proposal development and sponsor requirements. Review sponsor solicitation to ensure compliance of all requirements including sponsor and institutional regulations.
(5) Verify that matching or cost sharing is properly listed in the budget and approved as noted on the Cover Form for Extramural Programs.
(6) Assist in the application of current F&A rates (overhead) and work with investigator and department personnel regarding reduced or forfeited recovery of F&A costs.
(7) Provide guidance on explaining items in the proposal budget.
(8) Verify that all necessary approvals have been applied for or obtained for compliance.
(9) Work with PI to obtain documentation of approvals or collaborations from third parties.
(10) In cases where there are subcontract parties, OSP will reviews sub-recipient proposal and supporting documentation for compliance, ensure that the sub-recipient's proposed budget is properly calculated and properly incorporated into Auburn University's prime budget.

College/Dean:
(1) Approve proposal on behalf of college.
(2) Review the budget to ensure resources are adequate and available from the college perspective.
(3) Review the proposed scope of work to ensure its falls within the mission of the college.
(4) Review requests for space and modifications thereof.
(5) Approve conflict of interest forms.
(6) Provide assistance to the PI in the preparation of the proposals and guidance on proposal routing.
(7) Provide assistance to the PI and department to assure budget is adequate, cost sharing is appropriate, support from other sources is appropriate and fully disclosed.
(8) Assist PI in ensuring all approvals are obtained for compliance.
(9) In the case where there are subcontract parties, review documentation from sub-recipient before submitting to OSP, ensure that the sub-recipient's proposed budget is properly calculated and properly incorporated into Auburn University's prime budget.

Department
(1) Approve proposal on behalf of department
(2) Provide assistance to the PI in the preparation of proposals
(3) Assure applicant is eligible to be a PI
(4) Review the proposal for space related issues
(5) Review the budget for adequacy relative to project scope, release time, project cost, contributed effort, matching funds, and support from sources is appropriate and documented
(6) Review the scope of work to ensure it falls within the mission of the department
(7) In cases where there are subcontract parties, provide adequate documentation of sub-recipient involvement.
12) **HSOP Policy on Teaching Overload Compensation**

**Purpose:** Establish when and how individual faculty members will receive overload compensation for instruction.

**Overload Compensation Policy:** Since most faculty members at HSOP are appointed to twelve month contracts, situations that warrant overload payment are the exception. The Department Head recommendation should consider the availability of Departmental funds to allow for overload compensation.

**Guidelines:**
- Untenured tenure-track faculty and part-time instructional faculty are prohibited from receiving overload compensation. Faculty with below “meets expectations” score in any of their assignments on their annual faculty reviews are not eligible for overloads.
- Overload is defined as assigned work that is substantially greater than 100% of designated effort as defined by HSOP’s Workload Policy.
- Cases in which overload compensation is granted represent situations in which the faculty member does not relinquish other previously assigned responsibilities.
- Individual directed studies, thesis and dissertation hours, non-credit, and study abroad courses are not eligible for overload compensation.
- Overload teaching assignments must be reported on the faculty member’s Workload Assignment Form for the year that the overload occurs.
- Faculty are limited to one overload teaching assignment per semester (including credit-granting distance education courses).
- Compensation is based on Designated Effort as described in the HSOP Workload Policy.
- All overload courses (including distance education courses) must meet the Provost’s minimum class size guidelines.

Each situation will be evaluated on an individual basis by the faculty member’s Department Head then forwarded to the Dean and Provost’s office for approval.

13) **Faculty Roles in Interdisciplinary and Integrated Coursework**

Since many courses in our curriculum are designed to integrate knowledge, skills, and attitudes from various academic disciplines, it is critical to have representation on leadership teams. The following describes how those teams are constructed and as individual roles within the team.

**Definitions and Roles:**

**Course Sequence Coordinator** - The Coordinator’s role is complementary to the role of faculty members who participate in integrated course sequences (e.g. Drugs and Diseases, Integrated Pharmacotherapy, CAPP). To perform their function effectively, the Course Sequence
Coordinators must interface with OTLA, Associate Dean for Academic and Student Affairs and Department Heads. The responsibilities of the Coordinator are as follows:

1. Working with each leadership team in guiding the required Course Development Process as outlined by PEC; this includes addressing PEC course review recommendations for improvement.
2. Assisting each leadership team in ensuring that the teaching/learning philosophy (see policy and procedures) of the School is utilized in all aspects of the course and the approach is consistent across all courses.
3. Working with Department Heads regarding team membership and accountability for respective departmental faculty member performance including exemplary and inappropriate behaviors.
4. Providing the interface between PEC and the leadership teams.
5. Ensuring a meaningful collaborative effort by all disciplines attempting to provide integrated learning for student pharmacists within the course sequences and the HSOP curriculum ((DAD and CAPP sequences, transition from the P1-P2 years to P3 IP sequence).

**Leadership Team** – The leadership team may be composed of faculty members who are course instructors or are content experts. All instructors for the team’s specific course segment are not required to serve on the team; however, a member from each disciplinary group should be represented on the team (e.g. pharmaceutical sciences, pharmacy practice, social-administrative sciences). A chair of the leadership team, appointed by the Department Head, will have some course management responsibilities for the course segment for which they are responsible and is expected to work closely with the Course Sequence Coordinator in developing and delivering instruction. The leadership team is responsible for the following:

1. Planning, organizing and implementing the course according to the approved course development process
2. Ensuring that course content is consistent with the HSOP’s approved educational outcomes (significance, scope, depth, etc).
3. Ensuring that course content is integrated, reinforced and applied within the course sequence and across the curriculum
4. Ensuring that teaching and learning methods are consistent with the HSOP’s approved educational outcomes.
5. Ensuring that course evaluation methods are consistent instructional approaches.
6. Working in concert with the course instructors, the team is responsible for composition of examination items and other evaluation instruments as well as the determination and assignment of grades.
7. Participating in the development of course review documents and reports and the course review process

**Instructors/Content Experts** – These individuals are responsible for providing expertise to ensure learning through the design and delivery of courses to which they are assigned. They will
also contribute to the development of examinations and other evaluation instruments for any portions of the course in which they have participated.

Facilitators – It is the responsibility of these individuals to facilitate student learning by actively guiding the learning of a small group of student pharmacists. These individuals are not required to be content experts and should not serve as providers of content in the small group setting.

OTLA – OTLA’s role is to assist faculty in course development and to provide oversight and direction in the areas of course development and student evaluation, to assure that both are done in a manner consistent with theory and evidence-based practices and also consistent with the HSOP’s Educational Philosophy, Approved Curriculum and Outcomes, and Policies and Procedures. Additionally, OTLA serves in an advisory capacity to the Professional Education Committee (PEC) which is the HSOP committee charged with ensuring the integrity of the curriculum.

14) Endowed Professorships

Named Endowed Professorships
Sterling Drug, Inc. Endowed Professorship – restricted to faculty in Pharmacy Care Systems
W. W. Walker Professorship
James T. (Jimmy) and Anne Klein Davis Endowed Professorship
George F. Gilliland Endowed Professorship

Endowed professorships are awarded in recognition of superior faculty for their strong contribution to students and the provision of high quality instruction, research outreach and service.

Guidelines
Professorships shall be administered in accordance with the following guidelines:

1. Qualification: The candidate must hold the rank of Assistant/Associate/Full Professor or Assistant/Associate/Full Clinical Professor and have superior level of accomplishments in one or more areas of scholarship: discovery, integration, application, instruction and outreach, which sets the candidate apart from the expected performance at each rank. Scholarship must have national stature and have made a significant contribution to their field of research and practice. Candidates must have demonstrated leadership within the School and at the state, national and/or international level and has also shown an outstanding commitment to teaching and to the success of his/her students. Faculty in the early stages of their career may be considered, provided they possess a record of strong accomplishment and clearly demonstrate the potential for achieving distinguished scholarship, leadership, and contributions to the profession of pharmacy.
2. **Professorship Role:** The Harrison School of Pharmacy’s Endowed Professors will strengthen and enhance the School’s programs, and through the quality of the holder’s work will serve as a positive role model for his/her colleagues and students.

3. **Selection:** The Endowed Professors in the Harrison School of Pharmacy will be selected by the Dean and approved by the Provost. They will hold this distinction for a predetermined period and may be renewable by the Provost upon request of the Dean.

4. **Amount of the Professorship Award:** Funds to be distributed for the professorship may vary each year. The amount is determined by combination of the spendable funds from the endowment plus the fixed funds provided by Auburn University. These funds may only be used as salary enhancement and/or support for other needs of the awardees.

5. **Conditions and Expectations (this is the term used in the Provost draft):** Holders of endowed and named chairs are expected to maintain exceptional levels of productivity that are characterized as excellent in order to retain the title and privileges. If the holder of an endowed or named chair is not performing as expected, a recommendation to revoke continuation of the title and its privileges may be forwarded by the Dean to the Provost.
Nomination

Steps:
1. Candidates may be nominated by a colleague or by self nomination.

2. Nominations are to be submitted to the Dean.

3. Candidates will be asked to submit supporting documentation and are encouraged to submit relevant contents of their portfolio as part of the nomination packet.

4. If following an internal screening for appropriateness for submission, it is determined the criteria is met, the Dean will choose and invite external reviewers to evaluate the nomination and provide a recommendation for appointment.

5. Reviewers will utilize the HSOP Endowed Professorship Candidate Evaluation Form to provide feedback to the Dean.

   HSOP Endowed Professorship Candidate Nomination Form

Nominee’s Name: __________________________

Professorship Level: __________________________

Nominations are due in the Dean’s office NO LATER THAN 4:45 p.m., June 15, 2010. Four completed nomination packets are to be submitted in hard copy. Also please send an electronic version, along with the candidate’s vita to lab007@auburn.edu.

1. Describe the nominee’s MOST NOTABLE accomplishments in scholarship (discovery, integration, application, instruction and outreach), which sets the nominee apart from others at the same level. The recommendation should be no more than 3 single spaced pages in length.

2. Other pertinent information that will support the selection of the nominee as an endowed professor may be included.

3. Describe the scholarship conducted and how it has made a significant impact.

4. Present evidence where the candidate has demonstrated leadership within the school and at the state, national and/or international level. Select from leadership roles, those that most attest to the nominee’s eligibility.

5. Must have demonstrated strong commitment to teaching and to the welfare of his/her students.
Please provide your evaluation of the candidate for an HSOP Endowed Professorship. Please return forms by e-mail to lab007@auburn.edu.

HSOP Endowed Professorship Awards are based on the following criteria:

1. Exhibit superior level of accomplishments in one or more areas of scholarship: discovery, integration, application, instruction and outreach, which sets the candidate apart from the expected performance at each rank.
2. Must have demonstrated strong commitment to teaching and to the welfare of his/her students.
3. Scholarship must have national stature and made a significant contribution to the field of research, practice or instruction.
4. Candidates must have provided leadership within the school and at the state, national and/or international level. Persons in the early stages of their career may be considered, provided they possess a record of outstanding accomplishment and clearly demonstrate the potential for achieving distinguished scholarship, leadership, and contributions to the profession of pharmacy.

Does the nominee meet all the criteria?
Yes___ No___

What are the strengths of the nominee?

What are the weaknesses of the nominee?

Please indicate below your summative evaluation by checking one category:

___ Support/deserving of award
___ Neutral/uncertain
___ Do not support award

Other comments:
15) Guidelines for Faculty Mentoring Program

Definition
Mentoring has been defined as “a nurturing process in which a more skilled or more experienced person, serving as a role model, teaches, sponsors, encourages, counsels, and befriends a less skilled or less experienced person for the purpose of promoting the latter’s professional and personal development.”

Process
Upon discussion with the Department Head, it is recommended that all new faculty members are assigned to a senior faculty member to assist with identification of an official and appropriate mentor(s) within 6 months of a new appointment. Specific aspects of mentoring may vary between departments within the HSOP. When looking for a mentor, mentees should consider the following personal qualities:

- Enthusiasm – the mentor believes his/her research area is the most exciting in the world
- Time – the good mentor makes time to see the mentee even though he or she may be the busiest person on campus
- Character – the mentor must possess an inner set of values which directs him/her to what is virtuous or right
- Credibility – the mentor should be respected among peers and possess the skills/attributes needed to guide and develop the mentee in particular areas (teaching, research, service, etc).
- Patience
- Strong interpersonal skills

Mentees may have more than one mentor, i.e., a mentorship team or committee, to guide them in the different roles of an academic faculty member. There should be a “sanctioned relationship” between the Department Head, the mentor, and the mentee.

For instance, you may have one mentor for scholarship, one for teaching/supervision, and one for service/outreach:

- For scholarship, one faculty member may serve as the mentor for knowledge and resources who knows how to provide technical competence/expertise in areas of mutual interest; who knows how to provide direction and guidance on professional issues (e.g., P&T); and who is willing to provide resources (e.g., research assistants, source materials, statistical assistance)
- For teaching and supervision, a mentor should be approachable, encouraging, and will provide feedback; possesses good communication skills; seeks to promote independence in the mentee; and challenges the mentee to extend his/her abilities. Specifically, the mentor should be viewed by colleagues and students as an excellent teacher.
- For service, a mentor should be willing to assist the mentee with networking; possesses a knowledge of the profession, university, school and the department; and discusses organizational polices and committee structure

Needs or Expectations of the Mentee should include:

- To be coached in career development and technical skills
- To be given honest feedback
- To be stimulated toward developing new ideas
- Willingness to assume responsibility for own growth and development

Needs or Expectations of the Mentor should include:

- To provide direction and guidance on professional issues
- To provide resources
- To be approachable, encouraging
- To be knowledgeable about the profession, university, school and the department
- To discuss organizational polices and committee structure
• The mentee takes greater responsibility in setting the agenda over time
• The mentee seeks to initiate new ideas
• The mentee provides status of activities and projects
• The mentee seeks feedback and takes responsibility to give feedback to mentor
• The mentee identifies personal limits and when to ask for help
• The mentee personally reassesses goals over time

Several key attributes are essential for a mentee-mentor relationship to be successful:
• It must be voluntary
• Mutual benefits are perceived and derived from the relationship
• No conflicts of interest or competition exist between the mentor and mentee

Mentors should NOT be limited to a faculty member’s department
• Department Heads should consider contacting Department Heads or professors of other departments who might be appropriate mentors for a new faculty member
• Faculty members outside of the new faculty member’s department may have experiences, expertise, and projects that don’t exist in the new faculty member’s department.

Suggested Bibliography on Mentoring:


16) HSOP Promotion and Tenure Guidelines

I. CRITERIA FOR APPOINTMENT AND PROMOTION

A. Scope and Relationship to Guidelines, Policies, and Criteria for Faculty Appointments and Promotions
The following section provides guidelines and criteria for appointment and promotion of Full-Time Tenure and Non-Tenure Track or Part-Time Non-Tenure Track Faculty with at least a 50% appointment at the Harrison School of Pharmacy and as defined in the AU Faculty Handbook. Position titles covered by this document include Associate Professor, Professor, Associate Clinical Professor and Clinical Professor.

B. Appointment and Promotion

Appointment to a Tenure Track and Non-Tenure Track Faculty position is made at a rank, for a stipulated period of time, and it is generally characterized by a defined scope within one or more of the general areas of teaching, research, outreach, and service. The appointment is subject to periodic administrative review that examines both the continuing need for the position as well as a performance evaluation of the individual faculty member in the position.

For Tenure Track Faculty, the following guidelines define the School’s expectations for candidates to be promoted from Assistant Professor to Associate Professor and from Associate Professor to Full Professor. Further, the Department P&T committee will also determine the candidate’s eligibility for Tenure. According to the University’s Faculty Handbook, decisions on tenure are different in kind from those on promotion. In addition to demonstrating quality in the areas of 1) teaching, 2) research/creative work, 3) outreach and 4) service as described in this Document, the candidate for tenure must also demonstrate professional collegiality.

For Non-Tenure Track Faculty, the following evaluation and review guidelines apply only to promotions (i.e., changes in rank). These guidelines and criteria have been designed to provide a balance between the focused nature of a tenure or non-tenure track appointment and the expectation that faculty members who achieve the rank of Associate Clinical Professor or Clinical Professor must be multi-dimensional.

C. General Descriptions of Rating Categories

Each candidate for promotion will receive a rating of highest distinction, excellence, or acceptable for each of the following four components: teaching, research/creative work, outreach, and service based on their effort allocation. General descriptions of these ratings are provided below.

Teaching
Teaching encompasses all activities assigned to the candidate. These activities include classroom teaching and facilitation; student advising, mentoring, coaching & professionalization of students; graduate instruction and guidance, and clinical in-service educational programs. Refer to Appendix A for specific examples of parameters that are used to assess and rate teaching performance.

A performance of “Highest Distinction” in teaching is characterized by evidence of innovative techniques by a pattern of consistently high student and peer evaluations as an outstanding teacher and superior craftsmanship in the preparation of learning experiences.

A rating of “Excellence” in teaching requires a consistent record of student satisfaction with teaching as evidenced by student evaluation, peer review, conscientious performance of a range of teaching duties and skill in the preparation of learning experiences.

A rating of “Acceptable” in teaching requires satisfactory performance of assigned teaching duties as evidenced by student and peer evaluation.

Research/Creative Work (i.e., Scholarship)

A major contribution to the University is the scholarship of its individual members. Scholarship may be expressed through activities leading to discovery, integration, outreach, application, instruction or education. Scholarship is actually exhibited by research in those areas leading to publication and presentation. To be of benefit to society the results of scholarly or creative activity must be disseminated beyond the borders of the University by appropriate written or oral means.

To be rated "Highest Distinction" in scholarship requires recognition by one's academic or professional peers as one who has made a significant contribution to the field. This recognition, supported by substantial documentation, may be international, national, or regional and in the form appropriate to the field. In general, a performance of highest distinction should be demonstrated by some of the following: consistent record of extramural funding, publications that have substantial scholarly, professional or public policy impact, invited presentations or speeches of a similar nature.

“Excellence” in scholarship requires a consistent record of productivity and publication or public presentations. The work should be considered scientifically sound and innovative by outside reviewers in the same field as the candidate and should show a clear pattern of growth and development in their research program.

To be rated "Acceptable" requires sufficient evidence of scholarly activity in their research program. A ranking of “acceptable” indicates general productivity.

Outreach

AU HSOP has a strong history of outreach. As identified in the AU Faculty Handbook, Chapter 3.8.C., “outreach refers to the function of applying academic expertise to the direct benefit of external audiences in support of university and unit mission.” In order to be considered outreach for the purposes of promotion and tenure, the faculty activity must meet the six criteria detailed in Chapter 3.8.C. in the AU Faculty Handbook.
Daily outreach activities, outreach program development and/or implementation, and teaching/research/outreach activities may contribute to outreach scholarship if there is related meritorious performance as evidenced by some form of peer review or other measurable impacts.

Outreach activities may include, but are not limited to the following:

1. Community Engagement (see page 9, section III.3.b.(i))
2. Presentations and Publications (see page 10, section III.3.b.(ii))
3. Other Activities (see page 10, section III.3.b.(iii))

To be rated "Highest Distinction" in outreach requires a consistent record of meritorious performance as evidenced by some form of peer review or other measurable impacts on a national/international level. This may include receipt of outreach awards from a national agency, outreach-related publications in peer-reviewed journals leading to impact on a national/international level, or reports/poster presentations at national/international venues.

To receive a rating of “Excellence” in outreach, one must demonstrate activity in more than 1 area listed in section III.3.b.(i)-8, III.3.b.(ii)-3, pages 9-10, typically occurring at local or regional venues.

To receive a rating of “Acceptable” in outreach, one must demonstrate activity in any area listed in III.3.b.(i)-8, III.3.b.(ii)-3, pages 9-10, typically occurring at local or regional venues.

Service (i.e., Citizenship)

Service may encompass such diverse areas as service to the University and the School and service in professional affairs. All faculty are expected to make contributions in the area of service.

A performance of "Highest Distinction" in service requires a long term record of noteworthy leadership and achievement in Department, School, University, governmental, regulatory and/or professional organizations. The candidate's actual accomplishments and contribution should be recognized and attested by peers as outstanding. Generally, the highest distinction rating requires the candidate's willingness to go above and beyond the call of duty to accept and accomplish tasks despite the difficulty he/she may encounter.

A rating of “Excellence” in service requires a record of leadership and/or consistent record of active participation in committees and/or service activities in intramural (e.g., Department, School, University) and extramural organizations (i.e., professional organizations, governmental and/or regulatory agencies). The candidate with an excellent rating should provide significant contribution to the committee(s) he/she serves. The evidence of the candidate's leadership and/or contribution must be recognized by peers.
To be rated “Acceptable” requires a consistent record of active participation in committees and/or service activities in intramural (Department, School, University) and extramural organizations (i.e., professional organizations).

II. STANDARDS OF PERFORMANCE FOR EACH FACULTY RANK

A description of what is required to achieve the rank of Professor and Associate Professor within the areas of Teaching, Research/Creative Works, Outreach, and Service may vary depending upon the specific department within HSOP.

A. Professor

To achieve the rank of Professor, a faculty member must be evaluated with "Highest Distinction" in at least one area of primary activity, and at least "Excellence" in the other areas as defined by your workload assignment.

B. Associate Professor

To achieve the rank of Associate Professor, a faculty member must be evaluated as at least having "Excellence" in two areas of primary activity, and at least "Acceptable" in the other areas as defined by your workload assignment.

C. Exceptions

It is recognized that occasionally someone may make an extraordinary contribution to the School of Pharmacy in a manner somewhat different from that defined in these guidelines. In such rare cases, exceptions are possible when the evidence and consensus overwhelmingly suggest appointment or promotion.

III. PROMOTION REVIEW PROCEDURES
The following section provides further explanation of how performance is to be evaluated and lists the specific procedures, areas to be evaluated, and criteria for evaluation for the main areas of teaching, research/creative works, outreach and service. This section is applicable for both tenure track and non-tenure track faculty.

1. Evaluation of Teaching Performance

Evaluation of overall teaching performance will be based upon a peer evaluation of teaching performance as described in Appendix A. In addition, the eligible voting faculty for P&T within the department will utilize information provided by HSOP course reviews and the candidate’s Department Head.

a. Peer Review System

The purpose of the peer review system is to provide a systematic evaluation of teaching so that a performance profile of each candidate is presented to the eligible voting faculty for P&T within the department for its consideration in the promotion/tenure process. The evaluation is made by 1 or more faculty members appointed by the Department Head. One of the peer review faculty members can be from outside the candidate’s department.

b. Areas of Evaluation

Faculty members providing peer reviews will base their evaluation of the faculty member’s preparation and delivery of lectures in the general lecture format, leading of small group discussions, clinical and laboratory teaching, and course management (where appropriate).

c. Criteria for Evaluation of Teaching

Faculty members providing peer reviews will evaluate the candidate's performance, employing “Criteria for Evaluation of Teaching (See Appendix A). Faculty members providing peer reviews will then assign a ranking of “Acceptable,” “Excellence” or “Highest Distinction.” A ranking of “Acceptable”
will be defined as meeting criteria 1-6. A ranking of “Excellence” or “Highest Distinction” will require meeting applicable criteria (i.e., Criteria 1-13) as outlined in Appendix A. The eligible voting faculty for P&T within the department will use peer review letters, excerpts from the faculty formative portfolios, HSOP course reviews, student evaluations and the candidate’s dossier during the final deliberations to provide an overall ranking of “Acceptable,” “Excellence,” or “Highest Distinction” in teaching.

2. Evaluation of Research/Creative Works (i.e., Scholarship)

a. Procedure

(i) Purpose

The purpose of this evaluation is to assess the quality and quantity of the candidate's activity in scholarly areas. The eligible voting faculty for P&T within the department has developed a list of areas that will be given consideration under the scholarship requirements for tenure and/or promotion. These are listed under "Areas of Evaluation" with a description of how accomplishments in each area will be weighted during deliberations.

(ii) Evaluation Mechanism

1. The candidate is to prepare a list of his/her scholarly activities as requested in the promotion dossier.

2. The eligible voting faculty for P&T within the department will use the information within the dossier, letters from external reviewers and information provided by the candidate's Department Head, to rate the candidate as being acceptable, having excellence or highest distinction according to the developed criteria discussed further in this section.

b. Areas of Evaluation

(i) Peer-reviewed Publications

The eligible voting faculty for P&T within the department recognize that publication in peer-reviewed refereed journals is a strong indication of scholarship.

- Priority is given to publication in the most prestigious journal(s) in each specialty.
- Publications in preparation will not be considered.
- For promotion and/or tenure, peer-reviewed or refereed work is valued more highly than non-peer-reviewed endeavors.
- In general, authorship on multi-author publications will be considered as 1st author = last author > 2nd author > 3rd author. Additional information provided by the candidate about his/her
contribution and percent involvement to the research effort will be considered.

- Independence is a necessary criterion of scholarship.
  However, independence can be compatible with collaboration. Independence in collaboration means that the participant brings a unique contribution to the project without which the project would suffer. While independence is expected of faculty, it is understood that it may be represented in ways other than simply being sole or first author on published papers.

- In general, original research publications will be more highly valued than critical reviews and book chapters. Examples of acceptable publications include, but are not limited to:
  - Original research in full length manuscript
  - Evaluative descriptions of practice and teaching innovations
  - Critical reviews in refereed journals
  - Case reports
  - Book chapters (Evidence of peer review must be provided)

(ii) Non peer-reviewed Publications
These will be considered by eligible voting faculty for P&T within the department, although they will be weighted less heavily than those identified in (i). These may include, but are not limited to:

- Audio-visual programs
- Regular columns in journals
- Articles in non-refereed journals
- Letters to editor and book reviews
- Monographs and abstracts
- Editor and/or author of a book

(iii) Presentations at Scientific or Professional Meetings (including poster sessions)

- In general, papers or posters presented at professional meetings will be weighted as follows:
  - International > National > Regional > State-Local
  - Invited > Submitted
  - Original Work > Review Paper

- Abstracts are considered only as adjuncts to papers presented and not as publications and should not be listed under publications.
- Attendance at meetings is not considered evidence of scholarship.

(iv) Grants and Contracts / Creative Endeavors

- In general, grants and contracts will be weighted as follows:
  - Funded > Under review
Competitive peer-reviewed research grant from government/foundations/commercial entities not employing rigorous methods to ensure peer review or non-competitive training/service contracts or sub-contracts to research grants

Principal Investigator > Co-Investigator > Collaborator

Full Grants > Starter Grants

Outside Extramural Agency Grants > Intramural Grants (within University)

Creative Grants > Service Grants

- Grants or contracts in preparation will not be considered.
- Consideration will be given to percentage of time devoted to project and responsibilities of the investigator.
- A consultant role is not considered as part of grants and contracts. Instead, it should be placed in the outreach category.

c. Criteria for Research/Creative Works
The eligible voting faculty for P&T within the department has developed the following criteria for determining “Acceptable,” “Excellence” and “Highest Distinction.” These criteria vary depending upon whether the promotion is from Assistant to Associate or Associate to Full Professor, since the extent of activity would differ for candidates at these two different levels. See attachment Appendices B & C which provide these criteria in tabular form. Not all data is required in either appendice for promotion to Associate or Full Professor.

All candidates must meet the requirements in each rating category outlined below. Evidence of professional honors or awards that confers local recognition for research/creative efforts will be considered but is not required. When present, honors and awards will be considered in the determination of “Acceptable,” “Excellence” and “Highest Distinction” in addition to the areas listed below:

- publications in refereed journals,
- presentations,
- grants and contracts

The eligible voting faculty for P&T within the department will assess the importance and quality of scholarly work by considering the target audience, the standing of the journal or book, the rigor of the review process, the type of publication, and the impact of the work. For example, consideration is given to the quality of books, chapters or articles and the audience reached. Specifically, as to chapters in books or textbooks the following should be considered: importance of the book; standards applied in selection of authors; review-type material or new data or new conceptual/theoretical formulations; standing of the publisher; professional reactions to the book including reviews; and, the level of use of the book (instructional, advance, scholarship, etc.).

Concerning articles or essays in refereed journals, the following need be addressed: the primary target audience; the standing of the journal in the discipline or profession; if
reviewed, the rigor of the review process; the method for selecting articles, if not reviewed; the scope of the paper - review, scholarly, or a form of public service activity.

3. Evaluation of Outreach

a. Procedure

(i) Purpose

The purpose of this evaluation is to assess the quality of the candidate’s activity in outreach. The eligible voting faculty for P&T within the department has developed a list of areas that will be given consideration under the outreach requirements for promotion and/or tenure.

(ii) Evaluation Mechanism

1. The candidate is to prepare a list and a description of his/her past and current outreach activities.

2. The eligible voting faculty for P&T within the department will use this information along with the information provided by the Department Head to rate the candidate’s outreach performance as “Acceptable,” “Excellence” and “Highest Distinction.”

b. Areas of Evaluation

The following areas of evaluation have been selected to reflect the candidate’s contribution to outreach in the form of professional achievement, innovative practices, and the dissemination of professional information to peers and other professionals.

(i) Community engagement:

1. Evidence of development and maintenance of new or innovative types of pharmacy services

2. Evidence that activity has had or continues to have demonstrable effect on health care outcomes

3. Evidence that activity has influenced the nature of other types of health care delivery (e.g., prescribing of physicians or medication administration by nurses) toward more optimal delivery of health care

4. Evidence that activity has led directly to the establishment of new standards of patient care

5. Evidence of application of collaborative and translational activities within his/her daily practices and/or area of expertise that specifically improves patient care outcomes.
6. Evidence of participation in the development of health care policies or improvements in drug-use programs and processes (e.g., quality of service-related outcomes)

7. Evidence of national recognition in his/her area of expertise

8. Evidence of faculty engagement in solutions of community-based problems consistent with his/her expertise.

(ii) Presentations and Publications:
1. Presentations to health professionals, including HSOP-sponsored continuing education programs
2. Publications in appropriate journals as well as the less formalized print or electronic media (i.e., organizational or institutional newsletters)
3. Television, radio, or personal appearances and presentations relevant to pharmacy for the lay public, pharmaceutical sciences, or social and administrative sciences groups.

(iii) Other activities
1. Pharmacy-related community service projects
2. Non-school lectures or teaching or individual consultation to lay groups in areas relevant to areas of professional expertise
3. Volunteer outreach clinical activities
4. Education or Healthcare Planning Programs
5. Testifying at public hearings

c. Criteria for Evaluation

The eligible voting faculty for P&T within the department has developed the following criteria for determining “Acceptable,” “Excellence” and “Highest Distinction.” These criteria vary depending upon whether the promotion is from Assistant to Associate or Associate to Full Professor, since the extent of activity would differ for candidates at these two different levels. See attachment Appendices D & E which provide these criteria in tabular form.

4. Evaluation of Service (i.e., Citizenship)

a. Procedure

(i) Purpose
The purpose of this evaluation is to assess the quality and quantity of the candidate’s activity in service areas. The eligible voting faculty for P&T within the department has developed a list of areas that will be given consideration under the service requirements for tenure and/or promotion. These areas, along with the criteria for evaluation, are discussed later in this section.

(ii) Evaluation Mechanism

1. The candidate is to prepare a list and a description of his/her past and current service activities.

2. The eligible voting faculty for P&T within the department will use this information along with the information provided by the candidate’s Department Head and/or the appropriate Chairpersons of committees on which the candidate has served to rate the candidate’s service performance as being acceptable, having “Acceptable,” “Excellence” and “Highest Distinction.”

b. Areas of Evaluation

The following areas of evaluation have been selected to reflect the candidate’s service to the Department, School, University, the candidate’s profession, disciplines outside the candidate’s own profession and the community. The following are presented as examples. Thus, evidence of service may include, but is not limited to the following:

(i) Service to the University, School, and/or Departments

1) Assignments

- Standing Committees and Subcommittees
- Ad Hoc Committees
- Committee/Task Force memberships
- Committee chairmanships
- Search Committees for recruitment of faculty, residents, and students
- Residency coordination
- Faculty senate membership
- Advisor of student organizations or students in academic difficulty
- Graduate Program Officer

2) Administrative Service

- Assistant or Associate Dean
- Department Head
- Department Programs Director (Administrative assignment)

(ii) Service to the Candidate’s Profession

- Local, state, or national board activities (including preparation of board questions or evaluation of instruments)
- Leadership positions held in professional societies or associations
- Committee activities in professional societies or associations
- Organization/coordination of local, state, or national programs or meetings
- Membership on state, regional, or national review panels, study sections, councils, etc.
- Membership on editorial boards of professional journals or other reviewing or editing activities
- Leadership in the development of continuing professional education programs for personnel in the field
- Membership on site visit teams
- Consulting is considered service, provided the individual person is being called upon as an individual or a member of a group, i.e., Commission, Task Force, Advisory Committee, Study Section. Serving as a Chairperson of such a group is highly valued. Consultation can include advising governmental agencies, industry, professional groups, or testimony in court.

5. Evaluation of Collegiality

a. Procedure
(i) **Purpose**
In appraising a candidate’s collegiality, department members should keep in mind that the successful candidate for tenure and/or promotion will assume what may be an appointment of 30 years or more in the department.

(ii) **Definition**
Collegiality can be defined as the ability for an individual to work productively with faculty, students, colleagues, staff members, and constituents in all environments impacted by the University. Collegiality encompasses the basics of the professional ethics of the academic world: Respect for persons, integrity of intellectual inquiry, concern for the needs and rights of students and clientele, and awareness of workplace safety.

b. **Evaluation**

Collegiality should not be confused with sociability or likability, but rather as the professional criterion relating to the individual’s performance of his or her duties within an academic unit that are compatible and consistent with the unit’s mission and long-term goals. Collegiality is a basic expectation of all employees and is essential in maintaining or improving the academic quality of an institution. Each faculty member must interact with colleagues with civility and professional respect. All should exhibit an ability and willingness, when appropriate, to engage in shared academic and administrative tasks that a department group must often perform, and participate with some measure of reason and knowledge in discussions germane to department policies and programs.

Concerns respecting collegiality should be shared with the candidate as soon as they arise; they should certainly be addressed in the annual review and the third year review. Faculty members should recognize that their judgment of a candidate’s collegiality will carry weight with the eligible voting faculty for P&T within the department.
## APPENDIX A. CRITERIA FOR EVALUATION OF TEACHING

Items 1-6 represent minimum criteria for the rating of “Acceptable” in teaching. To achieve a rating of “Acceptable”, all applicable categories must be rated as “agree”. Item 5 is only applicable to members of the graduate faculty. Item 6 is only applicable to course and sequence coordinators.

In addition to 1-6, items 7-13 represent criteria that will be considered toward a ranking of “Excellence” or “Highest Distinction” in teaching.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Examples of Data Sources</th>
<th>Notes</th>
<th>Rating Agree/disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The faculty member:</td>
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<tr>
<td>1. employs teaching methods and methods of presentation consistent with the educational philosophy of HSOP</td>
<td>observation by peer review committee; teaching philosophy; formative peer evaluation of teaching</td>
<td>individual students vs. small group vs. lecture vs. laboratory, etc.</td>
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<td>2. employs assessments that: a. reflect the objectives of the course (or rotation, unit, activity) b. are appropriate to the objectives, content and skills being assessed</td>
<td>copies of assessments (i.e., test questions matched back to objectives, copies of test question format [multiple choice vs. short answer]) peer review evaluations, HSOP course reviews, IP Block debriefings</td>
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<td>3. speaks in a manner that is appropriate to the level of knowledge/ability of the students</td>
<td>observation by peer review committee; student evaluations</td>
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<td>4. provides up-to-date instructional materials and is knowledgeable in the area of instruction or proficient in clinical skills</td>
<td>copies of teaching materials; HSOP course review, Peer Review Committee, student evaluations</td>
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<td>5. when applicable, mentors and/or serves on Master’s thesis or doctoral dissertation committees as primary advisor or committee member</td>
<td>candidates dossier</td>
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<td>6. when applicable, faculty member coordinates the evaluation of teaching activities and provides feedback to participants in those activities</td>
<td>candidate’s dossier</td>
<td>Faculty should receive credit for conducting assessment of teaching in a course/unit in such a manner that they can and do provide constructive feedback to other faculty participating in the course/unit</td>
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<tr>
<td><strong>7. assumes responsibility for improving instructional and/or training programs through:</strong></td>
<td><strong>8. participates in and facilitates coursework offered by other Schools in which you have provided instruction at Auburn University or other academic institutions [elective collaborative teaching efforts beyond assigned teaching responsibilities]</strong></td>
<td><strong>9. provides leadership in the development of teaching skills among faculty</strong></td>
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<td>a. designing/redesigning courses or units within courses based upon need</td>
<td>b. developing new programs such as residencies and fellowships</td>
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<td>in teaching section of FAR/dossier, formative portfolio, note innovations undertaken</td>
<td>teaching section of dossier, statements from peer reviewers, associate dean, Department Head or Associate Department Head, or PEC Steering</td>
<td>candidate’s dossier</td>
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<td>Faculty receive credit for participating in career development and planning course/activities</td>
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<td>Faculty receive credit for undertaking self development in the areas of teaching and sharing what they have learned with other faculty, in order to aid the overall development of teaching within the faculty</td>
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<td><strong>10. develops innovative techniques or methods for instruction and assessment</strong></td>
<td><strong>11. advises and assists student organizations or students on academic probation</strong></td>
<td><strong>12. receives awards or honors for teaching or educational accomplishments</strong></td>
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</table>
APPENDIX B. CRITERIA FOR EVALUATING RESEARCH/CREATIVE WORKS - PROMOTION FROM ASSISTANT TO ASSOCIATE PROFESSOR*

<table>
<thead>
<tr>
<th>Category</th>
<th>Acceptable</th>
<th>Excellence</th>
<th>Highest Distinction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Publications</td>
<td>Evidence of peer-reviewed publications</td>
<td>Evidence of peer-reviewed publications in recognized prestigious journals in the field*</td>
<td>As in excellence, but with evidence of impact in research in the field</td>
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<tr>
<td>Presentations</td>
<td>Evidence of activity beyond state or local levels</td>
<td>Original work or area of expertise which is delivered as an invited presentation at the national level; invited seminars at a University</td>
<td>As in excellence but, in addition, invited original work or area of expertise at the international level</td>
</tr>
<tr>
<td>Grants and Contracts</td>
<td>Evidence of submission of extramural grant applications or securing intramural funding, of which the individual is principal investigator or co-investigator</td>
<td>Evidence of activity with at least one grant or contract funded by an extramural agency with a rigorous review process, of which the individual is principal investigator</td>
<td>As in excellence and with at least one full grant (i.e., NSF, or equivalent of other federal agencies) of a creative nature funded by an extramural agency with rigorous review process, of which individual is principal investigator</td>
</tr>
<tr>
<td>Honors and Awards</td>
<td>Has received a professional honor or award that confers local recognition for research/creative (i.e., scholarly) efforts</td>
<td>Has received a professional honor or award that confers statewide or regional recognition for research/creative (i.e., scholarly) efforts</td>
<td>Has received a professional honor or award which confers national or international recognition for research/creative (i.e., scholarly) efforts or has received multiple honors and/or awards at any level</td>
</tr>
<tr>
<td>Sustainability of focused research</td>
<td>Evidence of development of expertise and recognition in a defined area of scholarly program</td>
<td>Evidence consistent with his/her sustained scholarly program</td>
<td>Evidence of a sustainable career path recognized as a result of his/her scholarly program</td>
</tr>
<tr>
<td>Copyrighted, Patented, Licensed, or Other Works</td>
<td>Evidence of copyright, patent, or licensed work</td>
<td>Evidence of copyright, patent or licensed work with potential for regional significance</td>
<td>Evidence of copyright, patent, or licensed work with potential for national or international significance.</td>
</tr>
</tbody>
</table>

*Not all criteria are applicable to all departments within HSOP; hence evidence in each category is not required for promotion.
APPENDIX C. CRITERIA FOR EVALUATING RESEARCH/CREATIVE WORKS – PROMOTION FROM ASSOCIATE TO FULL PROFESSOR*

<table>
<thead>
<tr>
<th></th>
<th>ACCEPTABLE</th>
<th>EXCELLENCE</th>
<th>HIGHEST DISTINCTION</th>
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<tbody>
<tr>
<td><strong>Publications</strong></td>
<td>Evidence of continued activity in peer-reviewed publications</td>
<td>Evidence of peer-reviewed publications in recognized prestigious journals in the field*</td>
<td>As in excellence, but with evidence of impact in research in the field</td>
</tr>
<tr>
<td><strong>Presentations</strong></td>
<td>Evidence of continued activity beyond state or local levels</td>
<td>Original work or area of expertise which is delivered as an invited presentation at the national level; invited seminars at a University</td>
<td>As in excellence but, in addition, invited original work or area of expertise at the international level</td>
</tr>
<tr>
<td><strong>Grants and Contracts</strong></td>
<td>Evidence of submission of extramural grant applications or securing intramural and/or extramural funding, of which individual is principal investigator</td>
<td>A record of continuing extramural research support. At least one grant or contract approved by an extramural agency with a rigorous review process, of which individual is principal investigator</td>
<td>As in excellence and with at least one active full grant (i.e., NSF, or equivalent of other federal agencies) of a creative nature funded by an extramural agency with rigorous review process, of which individual is principal investigator</td>
</tr>
<tr>
<td><strong>Honors and Awards</strong></td>
<td>Has received a professional honor or award that confers local recognition for research/creative (i.e., scholarly) efforts</td>
<td>Has received a professional honor or award that confers statewide or regional recognition for research/creative (i.e., scholarly) efforts</td>
<td>Has received a professional honor or award which confers national or international recognition for research/creative (i.e., scholarly) efforts or has received multiple honors and/or awards at any level</td>
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<tr>
<td><strong>Sustainability of focused research</strong></td>
<td>Evidence of development of expertise and recognition in a defined area of scholarly program</td>
<td>Evidence consistent with his/her sustained scholarly program</td>
<td>Evidence of a sustainable career path recognized as a result of his/her scholarly program</td>
</tr>
<tr>
<td><strong>Copyrighted, Patented, Licensed, or Other Works</strong></td>
<td>Evidence of copyright, patent, or licensed work</td>
<td>Evidence of copyright, patent or licensed work with potential for regional significance</td>
<td>Evidence of copyright, patent, or licensed work with potential for national or international significance.</td>
</tr>
</tbody>
</table>

*Not all criteria are applicable to all departments within HSOP, hence evidence in each category is not required for promotion.*
APPENDIX D. CRITERIA FOR EVALUATING OUTREACH – PROMOTION FROM ASSISTANT PROFESSOR TO ASSOCIATE PROFESSOR

<table>
<thead>
<tr>
<th>OUTREACH AREAS</th>
<th>The following represents examples of outreach activities and is not meant to be an exhaustive list. Thus, activities may include, but are not limited to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community engagement, Presentations, Publications, and Other Activities</td>
<td>Evidence of development and maintenance of new or innovative types of pharmacy services</td>
</tr>
<tr>
<td>“Acceptable” Evidence of activity in any listed area</td>
<td>Evidence that activity has had or continues to have a demonstrable effect on health care outcomes</td>
</tr>
<tr>
<td>“Excellence” Evidence of activity in &gt; 1 of the listed areas</td>
<td>Evidence that activity has influenced the nature of other types of health care delivery (e.g., prescribing of physicians or medication administration by nurses) toward optimal delivery of health care</td>
</tr>
<tr>
<td>“Highest Distinction” As in Excellence, but requires a consistent record of meritorious performance as evidenced by some form of peer review or other measurable impacts on a national/international level.</td>
<td>Evidence that activity has led directly to the establishment of new standards of patient care</td>
</tr>
</tbody>
</table>

- Evidence of application of collaborative and translational activities within his/her daily practices and/or area of expertise that specifically improves patient care outcomes
- Evidence of participation in the development of health care policies or improvements in drug-use programs and processes (e.g., quality of service-related outcomes)
- Evidence of receiving recognition (i.e., local, regional, national, or international) in his/her area for outreach efforts
- Evidence of faculty engagement in solutions of community-based problems consistent with his/her expertise
- Reports, oral presentations, or posters to health professionals, including HSOP-sponsored CE programs, at regional, national, or international venues
- Outreach-related publications in peer-reviewed journals leading to impact on a regional, national, or international level
- Less formalized print or electronic media publications (i.e., newsletters, videos) for the lay public or healthcare professionals
- TV, radio, personal appearances and/or presentations relevant to pharmacy for the lay public, pharmaceutical sciences, or social and administrative sciences groups
- Participation in pharmacy-related community service projects
- Provision of non-HSOP lectures, teaching, or individual consultation to lay groups in areas relevant to areas of professional expertise
- Volunteer outreach clinical activities
- Participation in education or healthcare planning programs
- Serving as an expert witness or testifying at public hearings in areas relevant to professional expertise
### APPENDIX E. CRITERIA FOR EVALUATING OUTREACH – PROMOTION FROM ASSOCIATE PROFESSOR TO FULL PROFESSOR

<table>
<thead>
<tr>
<th>OUTREACH AREAS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community engagement, Presentations, Publications, and Other Activities</strong></td>
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<tr>
<td>“Excellence” Evidence of activity in &gt; 1 of the listed areas</td>
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</tr>
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<tr>
<td>As in Excellence, but requires a consistent record of meritorious performance as evidenced by some form of peer review or other measurable impacts on a national/international level.</td>
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</tr>
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<td></td>
<td>Evidence of application of collaborative and translational activities within his/her daily practices and/or area of expertise that specifically improves patient care outcomes</td>
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<td>Evidence of participation in the development of health care policies or improvements in drug-use programs and processes (e.g., quality of service-related outcomes)</td>
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<td>Evidence of receiving recognition (i.e., local, regional, national, or international) in his/her area for outreach efforts</td>
</tr>
<tr>
<td></td>
<td>Evidence of faculty engagement in solutions of community-based problems consistent with his/her expertise</td>
</tr>
<tr>
<td></td>
<td>Reports, oral presentations, or posters to health professionals, including HSOP-sponsored CE programs, at regional, national, or international venues</td>
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<td></td>
<td>TV, radio, personal appearances and/or presentations relevant to pharmacy for the lay public, pharmaceutical sciences, or social and administrative sciences groups</td>
</tr>
<tr>
<td></td>
<td>Participation in pharmacy-related community service projects</td>
</tr>
<tr>
<td></td>
<td>Provision of non-HSOP lectures, teaching, or individual consultation to lay groups in areas relevant to areas of professional expertise</td>
</tr>
<tr>
<td></td>
<td>Volunteer outreach clinical activities</td>
</tr>
<tr>
<td></td>
<td>Participation in education or healthcare planning programs</td>
</tr>
<tr>
<td></td>
<td>Serving as an expert witness or testifying at public hearings in areas relevant to professional expertise</td>
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</tbody>
</table>
APPENDIX F. CRITERIA FOR EVALUATING SERVICE – PROMOTION FROM ASSISTANT TO ASSOCIATE PROFESSOR

The following represents examples of service activities and is not meant to be an exhaustive list. Thus, activities may include, but are not limited to:

<table>
<thead>
<tr>
<th>ACCEPTABLE</th>
<th>EXCELLENCE</th>
<th>HIGHEST DISTINCTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Record of active service on standing Department, School or University</td>
<td>Active participation as a member of a major Department, School or University committee or as an</td>
<td>Active service as a Chairperson or provision of distinguished leadership as a member on a School/University</td>
</tr>
<tr>
<td>Committees or Task Forces</td>
<td>advisor for student governance or student professional organization</td>
<td>Committee or Task Force</td>
</tr>
<tr>
<td>Record of membership in local, state or national professional associations;</td>
<td>Active service on committees in local, state or national professional organizations</td>
<td>Active service as an officer or Committee</td>
</tr>
<tr>
<td>attendance at professional association meetings and documentation of</td>
<td></td>
<td>Chairperson in local, state, national, or international professional organizations</td>
</tr>
<tr>
<td>volunteer service on committees</td>
<td>Evidence of activity as a consultant with state, regional, or national professional societies,</td>
<td></td>
</tr>
<tr>
<td></td>
<td>industry, governmental or regulatory agencies or groups. Examples of this may include NIH Study</td>
<td>Evidence of significant activity as a consultant with national professional societies, industry,</td>
</tr>
<tr>
<td></td>
<td>Sections, grant review committees, USP Committees, etc.</td>
<td>governmental, regulatory or international agencies or groups. Examples of this may include NIH Study</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Sections, grant review committees, USP Committees, etc.</td>
</tr>
</tbody>
</table>
APPENDIX G. CRITERIA FOR EVALUATING SERVICE – PROMOTION FROM ASSOCIATE TO FULL PROFESSOR

The following represents examples of service activities and is not meant to be an exhaustive list. Thus, activities may include, but are not limited to:

<table>
<thead>
<tr>
<th>ACCEPTABLE</th>
<th>EXCELLENCE</th>
<th>HIGHEST DISTINCTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continuing record of providing input to Department, School or University Committees or Task Forces</td>
<td>Evidence of continuing active participation as a member of a major Department, School or University committee or as an advisor student governance or student professional organization</td>
<td>Evidence of continuing service as a Chairperson or provision of distinguished leadership on a School/University Committee or Task Force</td>
</tr>
<tr>
<td>Continuing record of membership and service in local, state, national, or international professional organizations</td>
<td>Evidence of continuing service on committees in local, state, national, or international professional organizations</td>
<td>Evidence of continuing service as an officer or Committee Chairperson in local, state, national, or international professional organizations</td>
</tr>
<tr>
<td>Evidence of service activity as consultant to professional colleagues outside of the University relevant to areas of expertise</td>
<td>Evidence of continuing activity as a consultant with state, regional, national, or international professional societies, industry, governmental or regulatory agencies or groups. Examples of this may include NIH Study Sections, grant review committees, USP Committees, etc.</td>
<td>Evidence of significant activity as a consultant with national professional societies, industry, governmental, regulatory or international agencies or groups. Examples of this may include NIH Study Sections, grant review committees, USP Committees, etc.</td>
</tr>
<tr>
<td>Receives awards or honors for service to the University or professional organizations</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
17) **Academic Coordination Policy**  *Issued May 16, 2011*

In order to provide an equivalent academic experience on the Mobile campus, it is essential that faculty communicate with the academic program administrator in Mobile in a timely manner. This policy outlines the necessary operational requirements for the academic coordination of courses.

- By July 1st (for fall semester) and Nov 1st (for spring semester), each instructor must send a complete list of class activities to the Mobile academic program administrator to include:
  - Tests
  - Quizzes
  - Active Learning Activities
- For each activity where a monitor is required for the Mobile Campus, there must be a notation listed of this requirement and whether the monitor must be a faculty member or can be staff.
- If photocopies are needed, they must be at the Mobile campus 2 business days prior to the respective class. Instructions should be attached regarding the dissemination and process for returning to Auburn.

If the Mobile campus is notified other than in the manner listed above and a monitor is not available – the activity will be cancelled on both campuses and rescheduling will be the responsibility of the class instructor.

18) **Teaching Evaluations Policy**

The Harrison School of Pharmacy (HSOP) views the on-going evaluation of teaching as essential to providing quality instruction. To evaluate instruction, the HSOP utilizes multiple assessment measures; including peer evaluations, student surveys, and student focus groups. As stated in the AU Bulletin, “Each Auburn student is expected to participate in the university’s assessment efforts” (p, 16). Moreover, the Accreditation Council for Pharmacy Education requires that faculty be evaluated annually and that the evaluation process includes input from peers, supervisors, and students. Constructive feedback on teaching contributes to on-going improvement of the School’s efforts to accomplish its teaching and learning mission to prepare competent future pharmacists and scientists. Thus the HSOP regards the evaluation of teaching as a professional responsibility, and therefore, a requirement of all student pharmacists. Failure on the part of a student to complete the assigned teaching and course evaluations may impede that student’s progression through the program. Student responses to teaching effectiveness surveys are anonymous in the HSOP.

Course and teaching evaluations are administered in the HSOP by the Office of Teaching, Learning and Assessment (OTLA). The OTLA communicates to students the procedures and deadlines for completing evaluations, and reports the data to appropriate faculty after final course grades have been submitted. Many courses in the HSOP are team-taught and overseen by faculty who serve as course coordinators. To support the ongoing improvement of teaching and learning, student feedback on individual teaching is shared with course coordinators, and student feedback on the course as a whole is shared with all instructors who teach in the course.
Procedures for Distributing Teaching Evaluation Reports: Individual teaching evaluations are reported by the OTLA to the faculty member and to that person’s department head or supervisor. Department heads then forward individual teaching evaluations to the appropriate course coordinators.

Procedures for Distributing Course Evaluation Reports: Overall course evaluation data are reported by the OTLA to the course coordinator, the department head or supervisor, and all instructors who taught in that course. Additionally, in order to provide formative feedback during the course review process, the OTLA reports course evaluation data without identifying faculty information to the School’s Professional Education Committee.

19) Scholarship Incentive Plan

Preamble: In accordance with Auburn University Scholarship Incentive Policy, faculty members engaged in externally sponsored activity (research, outreach or service) are presumed to meet the needs of the University, Harrison School of Pharmacy (HSOP) and Department, and the related objectives of the sponsoring agency. The University/HSOP/Department provides the faculty members, other investigators, and facilities, whereas the sponsor provides funds for the activities. Because investigator effort is required for the conduct of extramurally-sponsored projects and because Auburn University’s policy is to recover the full costs of conducting such projects, appropriate salary should be paid by the sponsor. Whenever HSOP faculty work on extramurally-sponsored projects and are paid from sponsored funds, HSOP funds budgeted for their salaries are released to be used for other purposes. It is prudent for HSOP to dedicate released funds in ways that enhance its academic activities.

Purpose: The purpose of this program is to recognize and reward recipients of external funds that enhance research, scholarship, service and creativity; promote best practices in teaching and learning; and implement other program improvements that advance the missions of HSOP. This program is the mechanism by which HSOP may provide financial incentives to faculty who are effective in securing extramural funding.

Requirements for participation:
1. To be eligible to participate in the program, the participant must be a full-time faculty member (e.g. tenured, tenure-track, or non-tenure clinical track) serving as an investigator (PI, co-PI, co-I) on an externally-sponsored project with at least a portion of the participant's institutional base salary budgeted from state appropriated funds or endowment earnings. Individuals who are split-funded from appropriate sources will be eligible to participate according to the portion of their salary supported by appropriate funds.
2. All participants must have achieved a rating of satisfactory or better in all assignments on their most recent Faculty Annual Review (FAR)
3. Eligible funds released when a faculty member's activity (teaching, research, outreach, or service) is supported by an extramural grant or contract may be used to provide an incentive in the form of a salary supplement to eligible faculty members. Eligible funds include general fund budget and endowment earnings. Federal appropriations are not considered a source of eligible funding for this program.
4. For individual grants to be eligible, the total cost of the work performed should be charged to the sponsor inclusive of proper facilities and administrative costs, thereby releasing budgeted funds. (Note that F&A rates set by law or formal written policy that are less than Auburn University's negotiated federal rate may be considered proper costs for the purposes of this program.)
5. An annual cumulative minimum total of at least $25,000 in eligible funding is required in order to participate in this program.
6. Funds from cost share accounts are ineligible.
7. In the case of a multi-investigator award, the share of salary savings that is allocated to units outside of HSOP will be subject to the policies of that unit. A Scholarship Incentive Program Distribution Agreement Worksheet must be completed in collaboration with the unit outside of the HSOP prior to project submission.
8. Distribution and Accountability:
   - Salary recovery will be divided among the faculty, associated department and dean’s office. Typically, each share will be equal. However, the division of these funds is subject to negotiation prior to submission of the application that leads to funding.
   - Deviations from the equal distribution of salary savings must be negotiated prior to submission of the application that generated the award. Moreover, a faculty member must negotiate the use of his/her share of salary savings prior to submission of the application of a grant/contract.
   - Faculty investigator(s), department head(s), and dean(s) must agree to the negotiated agreement (documented on the Scholarship Incentive Program Distribution Agreement Worksheet) prior to project submission.
   - The maximum amount that may be allocated as a salary enhancement may not exceed twenty percent (20%) of the faculty member’s base salary and does not alter the base salary of that faculty member.
   - The distribution of the salary incentive funds will be predicated on actual salary savings transferred.
   - Funds available for distribution are based on “net” salary savings in the event that instructor/practitioner replacement costs are incurred in order for the faculty member to meet sponsor obligations.
   - Eligible incentive funds will be distributed following the processes established by the Business Office.
   - Eligible funds must remain in departmental accounts (not in faculty accounts).
   - According to the School’s policy, the share of salary savings funds (above the 20% SIP cap) that are allocated to the faculty member but not awarded for salary enhancement will remain in the faculty member’s salary savings account and become discretionary.
   - HSOP accounting department will monitor salary savings transfers to the HSOP from sponsored funds. The respective Department Head must sign off on annual salary incentive distributions.
   - HSOP accounting must receive copies of all executed Scholarship Incentive Program Distribution Agreement Worksheets and the completed Faculty Incentive Program Individual Agreement following notification of funding from extramural sponsors.
   - The salary savings funds actually transferred will be reconciled with the Scholarship Incentive Program Distribution Agreement established at the time of grant/contract submission.
9. Generally, salary savings (above the 20% SIP cap) must be used within three years of receipt. Carrying funds for longer periods are permissible for specified commitments with written permission from the respective Department Head.
10. Failure of the faculty member to fulfill requirements of the academic program, grant, contract or failure of the funding agency to pay the University will void the incentive.
11. The Dean(s) (or designee(s)), the Vice President for Research, and the Provost must approve each individual agreement for incentive salary via the “Faculty Incentive Program Individual Agreement”.
12. HSOP will review this policy every three years.
13. This policy affects salary savings recovered during FY12 and after. For new proposals submitted after October 1, 2011, the Scholarship Incentive Program Distribution Agreement must be established prior to grant/contract submission. For proposals submitted and/or awarded prior to FY12, a Scholarship Incentive Program Distribution Agreement applicable to salary recovery during FY12
and after may be submitted by the faculty member for consideration by the Department Head and Dean (or designee), and must be approved required by the Dean, Vice President for Research and the Provost.

C. HSOP Operations

1) Hurricane-Disaster  Issued August 2, 2011
This policy is intended to outline procedures for the Harrison School of Pharmacy for hurricane preparation and planning prior to the season as well as procedures to be followed in the event of a tropical storm or hurricane.

Hurricane Emergency Plan

The Atlantic Ocean and Gulf of Mexico annual hurricane season extends from June 1 to November 30 each year. Official information and advice on hurricane and severe weather safety preparedness can be found at a variety of federal, state and local web sites – some of which are listed below:
   http://www.noaa.gov/
   www.weather.com
   http://www.mcema.net/shelter_locations.asp - Mobile County specific web site
Local media including radio and television stations provide information on storm path, evacuation orders, as well as shelter locations.

For the purposes of this document and communication the following definitions will be utilized.
   • A hurricane watch is a governmental agency announcement issued for an area when there is a threat of hurricane conditions, generally to strike within 36 hours.
   • A hurricane warning is an announcement issued for an area when hurricane conditions are expected to strike within 24 hours. When a hurricane warning is received, all protective preparations should be made, with the expectation that the hurricane will strike.

I. HSOP Hurricane Emergency Preparedness Team

The following positions comprise the Hurricane Emergency Preparedness Team and are responsible for making decisions during the Pre-season Preparation, Threat Assessment, Class Cancellation, Campus Closure, and Aftermath stages:
   • Dean HSOP
   • Assistant Dean/Associate Department Head – Mobile Campus
   • Associate Dean for Academic and Student Affairs
   • Department Heads
   • Director of Experiential Learning
   • HSOP Student Government President-(included to facilitate communication with the HSOP student council regarding emergency housing for students if required)

II. Emergency Information

Messages of importance will be sent to all HSOP faculty, staff and students via school-wide e-mail. Email will be the official mode of communication both prior to a storm’s landfall and after the storm.
If the P1-P3 students, faculty or staff are unable to access email due to inclement conditions, information may be obtained by contacting the HSOP Auburn campus office number 334-844-8348. Preceptors and P4 students can also obtain information by contacting the Office of Experiential Learning at 334-844-4195 or Director of Experiential Learning 334-844-4329.

III. Hurricane Emergency Plan

The Hurricane Emergency Plan is divided into five stages. The action steps indicated in the stages may or may not be taken within the stages listed, depending on the circumstances of the storm and time of day in which the stage occurs.

1. Pre-Season Preparation
2. Threat Assessment Stage
3. Class Cancellation Stage — students enact personal evacuation plan
4. University Closure Stage - faculty and staff required to leave campus
5. Aftermath Stage

STAGE ONE: Pre-Season Preparation

Students should not wait until a hurricane threatens the area to make personal plans. Each student is responsible for preparing a Personal Evacuation Plan.

To prepare a Personal Evacuation Plan, students should identify where they could go if they are told to evacuate. Students should choose several places – home (especially if home is within a 200 mile radius of the University and home is away from the storm’s path), a friend's home in another town, a colleague’s home on the Auburn campus, a motel, or a designated storm shelter. Generally, it is safer to evacuate to the north, further inland, than it is to evacuate to the east or west along the Gulf coast in case the storm turns just before landfall.

Students should attempt to evacuate to a location with internet access. Evacuation to the Auburn area, provided Auburn is not also in the path of the hurricane, would allow P1-P3 students to continue with course work including lab work and PPE in the event the Mobile Campus is closed after a storm. The pharmacy school student government and school administration will attempt to assist students who need temporary evacuation housing in Auburn.

A tropical weather situation in Mobile may not significantly impact classes in Auburn. Students and faculty should be prepared to continue with course work during a tropical weather event.

Prior to evacuating – the anticipated location for evacuation as well as two contact phone numbers should be recorded in E-Value in the section for emergency contact. If a student changes locations after the storm, they should update the information in E*Value if possible – or notify the School of Pharmacy Auburn Campus at 334-844-8348

- Keep a copy of this policy or of the school telephone list as well as a road map of the area. Students may need to take alternative or unfamiliar routes if major roads are closed or clogged.
- Secure a full tank of gas for your vehicle as early as possible.
- Arrange for a ride with someone else if you do not have a vehicle.
- Obtain a supply of cash, food, and other necessities.
• Take your personal laptop computer with you.
• Back up data on your computer hard drives.

STAGE TWO: Threat Assessment

Stage Two begins when a weather pattern is elevated to tropical storm status and poses possible danger to Mobile. The University may be under Stage Two for several weeks or days before predicted storm landfall. Under Stage Two:

1. The Hurricane Emergency Preparedness Team will assess available factual information and begin implementation of the plan. Information is taken from the National Weather Service, the City of Mobile Office of Emergency Preparedness and the University of South Alabama Administration.
2. The team will determine the current USA University operating status, special instructions, and the next scheduled update.
3. All information is distributed via email.
4. Students are advised to begin researching available air, train, and bus schedules and fares if they are not evacuating by car.
5. Students are encouraged to identify an evacuation destination.
6. Students are reminded to notify their parents/family of their personal evacuation plan and location, especially if they are not going home.
7. Within 72 hours of predicted landfall, the team will make a decision whether or not to cancel classes.

STAGE THREE and FOUR: Class Cancellation/University Closure

The Hurricane Emergency Preparation team will announce the effective time and predicted length of class cancellation. This decision will take into account information from the National Hurricane Center, storm intensity, University of South Alabama status, and evacuation orders issued by the governor.

Under no circumstances will students or staff be allowed to stay on campus once a decision has been made to evacuate and close the campus.

Faculty and Staff Responsibilities:

Assistant Dean for the HSOP Mobile Campus exchanges contact information and a proposed contact schedule with USA Campus Security

Faculty and staff should take the following precautions prior to leaving:

• Provide evacuation information to the Assistant Dean of the HSOP; Mobile Campus
• Move office items away from office windows;
• All computer and electronic equipment should be turned off, unplugged, and covered with plastic sheeting;
• All CAPP laboratory equipment should be secured in the exam rooms or closet; and
• Faculty should communicate with their clinical departments evacuation information and plans for individual rotation students.

Student Responsibilities:

P1, P2, P3
• Students should take their laptop, notes, and other course materials with them during an evacuation and plan to continue course work if possible.
• Students should update their destination information in E*Value prior to evacuating.
• Classes in Auburn may continue during a class cancellation for the Mobile Campus.
• Instructors for individual courses will post information for students regarding course requirements during evacuation.

P4
• In the event of an evacuation order, rotation students are considered non-essential personnel. Students are encouraged to follow the advice of state and local officials. The decision to evacuate is left up to each student's discretion. Students are encouraged to monitor the local media and emergency management system warnings.
• Students should provide destination information in the emergency contact section of E*Value prior to evacuating. Students staying in the region should also enter that information into E*Value.
• Students should discuss evacuation plans with their rotation preceptor and obtain contact information for that preceptor for the evacuation period.
• Students are expected to return to the area as soon as possible after the storm to resume rotation activities.
• Make up days and or work may be required to complete rotations interrupted by tropical weather. Students may not receive 40 hours of credit for weeks involving evacuations unless the work is made up.
• If platform presentations are impacted, these will be rescheduled as soon as possible after the storm.

STAGE FIVE: Aftermath

No one is permitted to enter the campus until the USA campus has been deemed safe. Once the storm has passed and if the campus is accessible, Physical Plant and Campus Police inspect for damages to all buildings, grounds, and utilities. Emergency repairs are made if practical. University of South Alabama facilities department will determine the availability of utilities and level of damages in individual buildings. USA will determine when access to the building will be available.

Under Stage Five:
1. The Assistant Dean of the Mobile campus will communicate available factual information to the team, including flooding, road closures, curfews, etc.
2. The Hurricane Team will determine a plan for continuation of student coursework as well as evaluating any damage to facilities, etc.
Faculty and Staff Responsibilities:

When the University of South Alabama reopens, faculty and staff are expected to return to work or communicate with the Assistant Dean or the Auburn campus regarding their plans to return.

Student Responsibilities

P1, P2, P3
- Students should attempt to maintain coursework during and after an evacuation. Students who are unable to do so should communicate with individual instructors and the Office of Academic Affairs.
- Students should monitor email (if possible) and local media outlets for information regarding evacuation status, availability of utilities, and school status.
- Evacuations lasting more than a week may result in students being unable to complete the semester and possibly not progressing within the program, if the student is not able to continue with course work during the evacuation. HSOP will make every attempt to assist students with course continuation during an evacuation through technology.

P4
- Rotation students should attempt to contact their rotation preceptors as soon as possible and create a plan for resuming rotation activities.
- An interruption of rotation activities for more than 5 days may result in an incomplete or possibly require that the student complete that rotation at a later date. This may result in changes in rotation schedules subject to preceptor and site availability. Graduation may be delayed in the case of significant interruptions in rotations and will be decided on a case by case basis by the Office of Experiential Learning.
- Students should monitor email (if possible) and local media outlets for information regarding lifting of evacuation orders, availability of utilities, and school status.

2) Flat Auditorium Use Policy - Issued September 11, 2006

As a result of discussions held with instructors for this semester the Flat Auditorium will be permanently configured in a small group configuration for all classes. This policy will be reconsidered following the repair/replacement of the power/data floor boxes. The decision was made on the basis of several factors:
1. The current floor boxes could be a safety hazard if someone stepped on a protruding lid, and the room must be configured to minimize the risk of individuals harming themselves with a protruding lid.
2. Moving tables and chairs between classes is not feasible given the limited time and workforce to complete the tasks.
3. IT personnel are no longer available to move furniture due to the workload they are under.
4. VC cameras are adjusted to capture zones in the room. If the configurations are askew the VC system does not capture speakers as it should.
5. Tables are heavy and dragging them across the carpet will damage the carpet.
The room will continue to be used for special events for which sufficient time is available to bring in workers to appropriately reconfigure the room. Contact OASA to pre-arrange such events. (See Food and Beverage Policy for additional information)

3) **Recording of Courses Policy – Revised July 27, 2012**

Recording of all coursework has become essential in our program. Initiation of the Mobile campus requires that technology be extensively utilized. This technology provides learning resources for student pharmacists currently in the program. Undoubtedly, 24/7 access to course lectures and discussions may encourage some to avoid attending classes. However, after examining the issues with faculty and students, the benefits of recording all coursework seems to outweigh the negatives behaviors exhibited by a few. Extenuating circumstances may exist in which recording a learning session or making it available freely is not advisable. Faculty wishing not to record or make sessions available, may make this request through their respective Department Head to the Associate Dean for Education or their designee.
4) Blue Cross Blue Shield (BCBS) Community Pharmaceutical Care Fund

BCBS Community Pharmaceutical Care Fund

Request for Funds

Reimbursement from the BCBS Community Pharmaceutical Care Fund will be considered for purposes such as:
- Transportation for students and faculty to reach underserved citizens
- Purchase of medication for those without the means to purchase essential medical items
- Medical supplies needed for health and wellness activities
- Food in cases where the lack of proper nutrition is part of a program for improving overall well being

Person or group requesting reimbursement: ____________________________________________

PPE Faculty Team Member signature (if faculty member is not requestor): __________________

Reimbursement is requested for (describe the activity for which reimbursement from this fund should be considered and how this activity met the needs of an individual or group deemed to be underserved or in need of assistance):
______________________________________________________________________________

Amount requested: __________

Expedited review (approval for reimbursement is needed within 30 days): Yes or No _______

Benefit of activity for which reimbursement is being requested (check all that apply):
Support of underserved family or individual: ____ Outreach opportunity: ____
Expanded service learning opportunity: ____ Research opportunity: ____
Improved access to care in underserved community: ____
Increase faculty expertise in developing community based and service learning curricula: ____
Other: __________________________________________

Outcome measure (report status of achievement of outcome to the Clinical Services Committee):
______________________________________________________________________________

Request approved: ____
Request denied: ____  Reason for denial: __________________________

Request approved or denied by:

_____________________________  ________________________________
Clinical Services Committee representative  Clinical Services Committee representative

Accounting (required for approved requests only)

** Submit all receipts for the use of funds and a copy of the approved request to the AUPCC for processing.
PURPOSE: To define the process for requesting reimbursement from the BCBS Community Pharmaceutical Care Fund for use in community care activities as defined in the policy statement.

POLICY: Expenses for community pharmaceutical care activities may be reimbursed by the BCBS Community Pharmaceutical Care Fund for purposes such as:

- Transportation for students and faculty to reach underserved citizens
- Purchase of medication for those without the means to purchase essential medical items
- Medical supplies needed for health and wellness activities
- Food in cases where the lack of proper nutrition is part of a program for improving overall well being

Requests for reimbursement are approved through the Clinical Services Committee during their regularly scheduled meetings. An expedited review for reimbursement may be requested in instances where the reimbursement is needed prior to the next scheduled Clinical Services Committee meeting or in circumstances where the Committee is unable to consider a request in a timely manner. All requests should be forwarded to the AU Pharmaceutical Care Center (AUPCC).

PROCEDURE:
1. Obtain a “BCBS Community Pharmaceutical Care Fund Request for Reimbursement” form from the AUPCC.
2. Return the completed form to the AUPCC. If an expedited review is requested, inform the AUPCC staff so appropriate, timely action may be taken.
5) Comprehensive Assessment Plan

AUHSOP Continuous Quality Improvement (CQI) Program Description

The ACPE Accreditation standards state that:
“The college or school must establish and implement an evaluation plan that assesses achievement of the mission and goals. The evaluation must measure the extent to which the desired outcomes of the professional degree program (including assessments of student learning and evaluation of the effectiveness of the curriculum) are being achieved. Likewise, the extent to which the desired outcomes of research and other scholarly activities, service, and pharmacy practice programs are being achieved must be measured. The college or school must use the analysis of process and outcome measures for continuous development and improvement of the professional degree program.”

AUHSOP employs a systematic process to establish a Comprehensive Assessment and Evaluation System, which includes the following.

<table>
<thead>
<tr>
<th>A Program ASSESSMENT System</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dynamic, ongoing set of processes used to continually improve the performances and outcomes of a program, whatever its size and scope. These processes include:</td>
</tr>
<tr>
<td>• determining goals and objectives,</td>
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<tr>
<td>• reviewing current program quality,</td>
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<td>• defining measurable outcomes,</td>
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<tr>
<td>• establishing performance criteria by which to gauge the quality of outcomes,</td>
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<tr>
<td>• developing and refining instruments for collecting data,</td>
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<tr>
<td>• collecting the data,</td>
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<tr>
<td>• analyzing the results, and</td>
</tr>
<tr>
<td>• determining future steps in light of those results.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A Program EVALUATION System</th>
</tr>
</thead>
<tbody>
<tr>
<td>Set of processes used to evaluate the merit of the input variables, performances and outcomes of a program. These processes include:</td>
</tr>
<tr>
<td>• determining which aspects of the program are to be evaluated,</td>
</tr>
<tr>
<td>• establishing performance criteria for these aspects,</td>
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<tr>
<td>• establishing standards that must be met in order to satisfy stakeholders,</td>
</tr>
<tr>
<td>• collecting the data,</td>
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<tr>
<td>• analyzing the results, and</td>
</tr>
<tr>
<td>• determining future steps in light of those results.</td>
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</table>

Procedures

Comprehensiveness is assured by a process such as the following which has been used to develop scores of successful program assessment and evaluation systems and is utilized by the Auburn University Harrison School of Pharmacy:
Specifying and Defining the Program
Step 1: Write program vision and mission statements.
Step 2: Identify all program stakeholders and their interests.
Step 3: Define the appropriate scope (boundaries) of the program; what it is and what it is not.
Step 4: Identify the top current and future goals for the program; use a 3-5 year time frame.
Step 5: Identify the top products or assets of the current and future program.
Step 6: Provide a description of key processes, structures and systems associated with the program that will be assessed.

Establishing Program Quality
Step 7: Write clear performance criteria that account for most of the quality of the program.
Step 8: Identify up to three pieces of evidence for each criterion.
Step 9: Create a table of measures that includes instruments, timelines, benchmarks, goals, accountability, feedback and CQI mechanisms.
Step 10: Obtain stakeholder buy-in for the program assessment system.

Annual Program Assessment
Step 11: Assess the program for the previous academic year and produce an annual assessment report.
Step 12: Assess the assessment program and make adjustments.

These processes are driven by the Strategic Planning Committee and supported by the Office of Teaching, Learning and Assessment. See the Master Assessment Plan and Schedule table below.

### Master Assessment Plan and Schedule

<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
<th>Participants</th>
<th>Schedule of Administration</th>
<th>Date Last Administered</th>
<th>Next Scheduled Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alumni Survey</td>
<td>The alumni survey solicits perceptions of alumni (entry-level PharmD. program only) about our program's effectiveness in preparing them to perform our outcome competencies. Based on 1998 CAPE Outcomes, the survey was developed by AACP and is administered through their website. The survey gathers information regarding demographics, engagement in professional organizations, perceptions of how well the school communicates with its students and alumni, and how well the curriculum prepares one to enter the profession.</td>
<td>Alumni</td>
<td>three-year cycle</td>
<td>2009</td>
<td>2012</td>
</tr>
<tr>
<td>Name</td>
<td>Description</td>
<td>Participants</td>
<td>Schedule of Administration</td>
<td>Date Last Administered</td>
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<tr>
<td>Course / Teaching Evaluations</td>
<td>The course / teaching evaluations are designed to: 1) evaluate teaching for the purpose of tenure, promotion and reward, and 2) give feedback to instructors about students’ perceptions of their teaching and assessment. This information gives faculty an opportunity to:  • Communicate the goals and objectives more clearly to students so that their assessments are more congruent with the intentions of the course;  • Modify their teaching materials, methods and assessments in order to improve student learning as well as student perceptions about the learning environment.</td>
<td>All students</td>
<td>Each semester</td>
<td>Spring 2009</td>
<td>Fall 2009</td>
</tr>
<tr>
<td>Milestone Assessment</td>
<td>The Milestone Assessment is an Objective Structured Clinical Exam (OSCE) that assesses the ability of students in the P2, P3, and P4 years to assess patients, counsel patients, interact with other healthcare providers, make therapy recommendations, make ethical decisions, and make scientific explanations. The data allow us to compare performance across years.</td>
<td>P2, P3, P4 students</td>
<td>Annually</td>
<td>Spring 2008</td>
<td>Spring 2009</td>
</tr>
<tr>
<td>Graduate Survey</td>
<td>This survey is designed to capture information that will be useful to our program regarding recruitment, graduate placement, and scholarship support.</td>
<td>P4 students</td>
<td>Annually</td>
<td>Spring 2008</td>
<td>Spring 2009</td>
</tr>
<tr>
<td>Learn Team</td>
<td>A Learn Team is a focus group of randomly selected students whose purpose is to provide thoughtful, insightful information about the current course(s). It is an organized avenue for students to address problems efficiently and convey their concerns to faculty. It is the responsibility of the Learn Team to work together (brainstorm) to provide suggestions for problem solution. The Learn Team should also responsibly convey faculty concerns, thoughts, and ideas back to their classmates. Learn teams meet weekly or biweekly with the the Director of OTLA and faculty members. Each student has the opportunity to participate in Learn Team once a year.</td>
<td>P1, P2, P3 students</td>
<td>Weekly</td>
<td>Ongoing</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Name</td>
<td>Description</td>
<td>Participants</td>
<td>Schedule of Administration</td>
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<tr>
<td>P1 Satisfaction Survey</td>
<td>The P1 Satisfaction Survey was first implemented during the inaugural year of the satellite campus in Mobile. It was administered in January and late April of 2008, to assess student perceptions regarding the use of technology and faculty's facilitation with distance education. The data was used to identify potential areas for improvement in terms of providing high quality and equitable educational experiences for students at the two campuses.</td>
<td>P1 students</td>
<td>Annually</td>
<td>May 2008</td>
<td>December 2009</td>
</tr>
<tr>
<td>Peer Assessments</td>
<td>Faculty members ask peers into their classrooms to assess various aspects of the classroom experience – from climate, to learning, to assessment. The goal is to get detailed feedback about issues for which only peers could provide adequate feedback. For example, students are not necessarily able to judge the quality of the curriculum, the appropriateness of tests, or the quality of student input to class discussions.</td>
<td>Faculty</td>
<td>As requested by faculty</td>
<td>Ongoing</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Preceptor Survey - Performance Assessment of First Month P4 Students</td>
<td>The Preceptor Survey solicits preceptors' perceptions of students' preparation for their rotations.</td>
<td>Preceptors</td>
<td>Annually</td>
<td>Summer 2008</td>
<td>Summer 2009</td>
</tr>
<tr>
<td>Standardized Performance Assessment (SPA)</td>
<td>The Standardized Performance Assessment (SPA) assesses problem solving in 6 domains as well as the ability to solve pharmacokinetics problems for aminoglycosides, vancomycin, and theophylline. The problem-solving cases involve hypothesis, identification of learning issues, independent learning, and the creation and justification of a treatment plan based on the learning in the Integrated Pharmacotherapy Course Sequence. If students do not pass any component of this assessment, they are required to undertake supplementary instruction and must pass the assessment before they can begin rotations.</td>
<td>P3 Students</td>
<td>Annually</td>
<td>Spring 2009</td>
<td>Spring 2010</td>
</tr>
<tr>
<td>Name</td>
<td>Description</td>
<td>Participants</td>
<td>Schedule of Administration</td>
<td>Date Last Administered</td>
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<tr>
<td>Stakeholder Focus Group Interviews</td>
<td>This assessment is under development. Formal focus groups will be employed to assess preceptors' and employer's perceptions of graduates' abilities.</td>
<td>Preceptors and Employers</td>
<td>Under development</td>
<td>N/A</td>
<td>TBA</td>
</tr>
<tr>
<td>Preceptor Evaluation</td>
<td>The Student Feedback reports solicits fourth-year students’ perceptions of their preceptor and site for each rotation. Students fill out an online evaluation for each of the 10 rotations they complete.</td>
<td>P4 students</td>
<td>Annually</td>
<td>Spring 2009</td>
<td>Spring 2010</td>
</tr>
<tr>
<td>Educational Effectiveness Survey</td>
<td>The Educational Effectiveness Survey asks students to assess a) the degree to which the curriculum provided learning opportunities for and taught defined skills, abilities and knowledge; b) how well foundational courses prepared them for the Integrated Pharmacotherapy (IP) Course in the P3 year, rotations in the P4 year, or graduation. The goal is to provide preliminary information about potential problems with the curriculum or other aspects of the program. Usually, this preliminary information drives subsequent assessments to determine the validity of the results and pertinent details.</td>
<td>All students</td>
<td>Annually</td>
<td>Spring 2009</td>
<td>Spring 2010</td>
</tr>
<tr>
<td>Educational Climate Survey</td>
<td>The Educational Climate Survey gathers student perceptions regarding how conducive the HSOP environment is to facilitate learning and collegiality.</td>
<td>All students</td>
<td>Annually</td>
<td>Spring 2009</td>
<td>Spring 2010</td>
</tr>
<tr>
<td>Student Perception Survey: Milestone Evaluation</td>
<td>This survey is designed to gather feedback from students regarding the quality of the Milestone Assessment, particularly, how well the assessment aligns with the curriculum.</td>
<td>P2, P3, P4 students</td>
<td>Annually</td>
<td>Spring 2009</td>
<td>Spring 2010</td>
</tr>
<tr>
<td>Faculty Survey</td>
<td>Developed by the AACP and administered through their website, the survey gathers faculty perceptions regarding issues such as the school's administrative system, recruitment and retention of faculty, infrastructure, faculty development, the curriculum, and academic roles of the faculty.</td>
<td>All faculty</td>
<td>Annually</td>
<td>Summer 2009</td>
<td>Summer 2010</td>
</tr>
<tr>
<td>Name</td>
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<tr>
<td>Course Reviews</td>
<td>The goals of the course review process are to (a) determine the extent to which the course development procedure has been implemented, and where incomplete, to help course coordinators complete the process; (b) discuss the reflections of teaching faculty and course coordinators on the differences between the intended course (as given in the planning document and syllabus) and the taught course (what actually happened in the classroom); (c) help course coordinators and teaching faculty develop increasing congruency between the intended outcomes of the course, the evaluations of learning, and the learning outcomes by evaluating each step of the course development document for feasibility and validity; and (d) increase the quality of the course relative to the criteria for content, teaching, learning and assessment.</td>
<td>All faculty</td>
<td>Every course evaluated on a three-year cycle</td>
<td>Ongoing</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

6) HIPAA

The purpose of the policy is to outline the procedure to be followed by AUHSOP faculty and student pharmacists regarding training on the Health Insurance Portability and Accountability Act (HIPAA).

All AUSHOP faculty and student pharmacists are required to complete training on HIPAA annually at the beginning of Fall semester. P3 student pharmacists will be required to repeat this training in Spring semester prior to beginning the advanced practice experiences. This training will be available in Open Blackboard on the PPE site. This training is a professional requirement of student pharmacists.

Training includes a review of a slide set of information on HIPAA and successful completion of an exam to demonstrate understanding of the topic. Completion of this training will be documented in the Open Blackboard assessment system.

Deadlines will be set for completion of this training in Fall semester and Spring semester (for P3’s). Failure to complete this training by the set deadlines will result in notification of the student’s PPE mentors. Student’s who continue to fail to meet set deadlines after discussion with his/her PPE mentors will result in a required individual meeting with the Associate Dean for Academic and Student Affairs and may result in the student not being allowed to complete the current semester’s coursework and/or not being allowed to register for classes in the next semester. P3’s not meeting set deadlines in the Spring will not be allowed to begin advanced practice experiences (APE’s, rotations).
Training material and this policy will be reviewed annually and updated as necessary to ensure current standards and procedures are adhered to and that documentation is completed.

7) **Body Fluid Exposure/Needle Stick Policy and Procedure**

The purpose of the policy is to outline the procedure to be followed by student pharmacists who have received an accidental exposure incident (significant body fluid exposure or contaminated needle stick) while in an educational setting in order to decrease risk of infection with hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV).

An **exposure incident** as defined by OSHA\(^1\) is a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials (contact with a contaminated needle/lancet with puncture of the skin or contamination of an open wound or mucous membrane by saliva, blood or body fluid) that results from the performance of a student pharmacist’s required experiential training. Non-intact skin includes skin with dermatitis, hangnails, abrasions, chafing, etc.

Student pharmacists will receive **annual training** on safety precautions (universal precautions, blood borne pathogens) and post-exposure procedures. All student pharmacists are required to receive or show proof of hepatitis B vaccination series completion. The Auburn University Exposure Control Plan\(^2\) should be reviewed by all students prior to participating in any pharmacy practice experience (PPE) or advanced practice experience (APE). Student pharmacists are also required to show proof of personal health insurance upon admission to the HSOP. This insurance will be needed for coverage of laboratory testing and medications (if necessary) in the event of an exposure incident.

**Safety procedures** to minimize an exposure incident include use of universal precautions, personal protective equipment (PPE-gloves), and use of safety devices (single-use lancets, retractable needles). Student pharmacists should be trained on the proper procedures for finger stick testing and the required equipment. Student pharmacists should never use a patient’s own lancets/lancet device and should not attempt to recap needles or lancets. Only disposable, one-time use, safety lancets should be used by a student pharmacist. If a safety lancet is not available, the student pharmacist should ask the patient to conduct the test on themselves, if possible. Contaminated sharps (needles, lancets) should be disposed of immediately in an approved sharps container or other puncture resistant container (if in a patient’s home). Sharps containers should be located nearby for immediate disposal and as minimal handling of sharps as possible. Student pharmacists should not pass sharps to others or accept sharps from others. Additional safety precautions can be found on the CDC website.\(^3,4\)

All student pharmacists are required to receive hepatitis B immunization.

**Post-exposure procedures**

Student pharmacists, faculty or staff experiencing a body fluid exposure should **immediately** cleanse the wound or mucous membrane with soap and water, or if contact is to the eye(s), flush with water for several minutes. **Exposure involving a known HIV positive source should be considered a medical emergency and post-exposure prophylaxis (PEP) should be initiated within 2 hours of exposure per CDC recommendations.**

The exposure should be reported **immediately** to the appropriate personnel (preceptor, AUHSOP faculty regional coordinator, and/or Director of Experiential Learning) at the school of pharmacy and/or
experiential site. The Associate Dean for Academic and Student Affairs for HSOP will also be notified by the Office of Experiential Learning. An incident report for the facility (if applicable) should be completed as well as an incident report for HSOP (see Addendum A-Body Fluid/Needle Stick Incident/Exposure Report Form). This report should be forwarded to the Office of Experiential Learning (OEL). A copy of this incident report will be forwarded by OEL to the Associate Dean of Academic and Student Affairs for HSOP and to the Auburn University Office of Risk Management and Insurance (316 Leach Science Center). In the case of faculty or staff members, the exposure should be reported immediately to their direct supervisor and/or Department Head. Documentation should include the name and contact information of the student pharmacist that was exposed and the source patient from which the contaminated exposure originated. The time, date and location of the exposure and a description of the incident should also be included in this documentation.

The student pharmacist should immediately contact their preceptor/mentor and AUHSOP regional coordinator and seek care for necessary lab work and evaluation for post-exposure prophylaxis.

Regional coordinators should know the appropriate procedure to follow post-exposure in order to direct the student pharmacist appropriately and in a timely manner to receive medical evaluation and prophylactic treatment if needed.

Students

APE sites

If the exposure occurred at an APE site, the student should immediately notify the preceptor and/or Faculty Regional Coordinator. The student should seek immediate care with employee health at the site or, if directed, with the nearest urgent care center/emergency department, health care facility or personal physician of choice. Some experiential sites will have the student pharmacist receive care through the facility’s employee health center and other sites (retail pharmacies, other stand-alone sites) will require follow-up with the physician of the student’s choice or urgent care center/emergency department. The preceptor should provide guidance to the student regarding the procedure to follow regarding post-exposure medical care. The Director of Experiential Learning and Associate Dean for Academic and Student Affairs should be notified as soon as possible regarding the incident. The individual who is the source of any potential blood borne pathogen should be informed of the exposure by the preceptor or Faculty Regional Coordinator, not by the student pharmacist. The preceptor or Faculty Regional Coordinator should arrange for consent to be obtained from the source for appropriate medical testing. The consent form is included as Addendum B.

Information to be obtained from the source patient includes the following to help determine whether the source is considered high risk:

- HIV status if known
- Whether the source had a blood transfusion between 1978-1985
- IV drug use history
- History of multiple sexual partners or homosexual activity
- History of hepatitis B and C

The source is considered high risk if any of the above criteria is positive. If the source is high risk, it is recommended that the student pharmacist receive post-exposure prophylactic (PEP) treatment within 2 hours per CDC recommendations. Student pharmacists should seek medical evaluation even if the source is not thought to be high risk.
PPE sites

If the exposure occurred during a patient visit for PPE, the student should immediately notify the Director of the PPE program, the Director of Experiential Learning and the Associate Dean for Academic and Student Affairs. The student pharmacist should seek immediate medical evaluation through the student health center, a physician of choice or nearest urgent care center/emergency department. The medical evaluation (lab work and medications, if needed) will be billed through the student’s health insurance. The source should be informed of the exposure by the PPE Director or Director of Experiential Learning, not by the student pharmacist. The PPE Director or Director of Experiential Learning will arrange for consent to be obtained from the source for appropriate medical testing. The consent form is included as Addendum B.

Information to be obtained from the source patient includes the following to help determine whether the source is considered high risk:

- HIV status if known
- Whether the source had a blood transfusion between 1978-1985
- IV drug use history
- History of multiple sexual partners or homosexual activity
- History of hepatitis B and C

The source is considered high risk if any of the above criteria is positive. If the source is high risk, it is recommended that the student pharmacist receive post-exposure prophylactic (PEP) treatment within 2 hours per CDC recommendations. Student pharmacists should seek medical evaluation even if the source is not thought to be high risk.

Other HSOP Sponsored Events

If the exposure occurred during a HSOP sponsored event (other than PPE or APE), the student should immediately notify the faculty advisor(s) involved in the event. The student pharmacist should seek immediate medical evaluation through the student health center, physician of choice or nearest urgent care center/emergency department. The medical evaluation (labwork and medications, if needed) will be billed through the student’s health insurance. The source should be informed of the exposure by a faculty advisor, not the student pharmacist. A faculty advisor will arrange for consent to be obtained from the source for appropriate medical testing and notify the Associate Dean for Academic and Student Affairs.

Information to be obtained from the source patient includes the following to help determine whether the source is considered high risk:

- HIV status if known
- Whether the source had a blood transfusion between 1978-1985
- IV drug use history
- History of multiple sexual partners or homosexual activity
- History of hepatitis B and C.

The source is considered high risk if any of the above criteria is positive. If the source is high risk, it is recommended that the student pharmacist receive post-exposure prophylactic (PEP) treatment within 2 hours per CDC recommendations. Student pharmacists should seek medical evaluation even if the source is not thought to be high risk.

Faculty and Staff Members
If the exposure occurred to a HSOP faculty or staff member, they should immediately notify their immediate supervisor or Department Head. They should seek immediate medical evaluation through a physician of choice or nearest urgent care center/emergency department. The medical evaluation (lab work and medications, if needed) will be billed through their health insurance. The source should be informed of the exposure by their supervisor or Department Head, who will arrange for consent to be obtained from the source for appropriate medical testing.

Information to be obtained from the source patient includes the following to help determine whether the source is considered high risk:

- HIV status if known
- Whether the source had a blood transfusion between 1978-1985
- IV drug use history
- History of multiple sexual partners or homosexual activity
- History of hepatitis B and C.

The source is considered high risk if any of the above criteria is positive. If the source is high risk, it is recommended that the student pharmacist receive post-exposure prophylactic (PEP) treatment within 2 hours per CDC recommendations. Student pharmacists should seek medical evaluation even if the source is not thought to be high risk.

**Laboratory Testing**

Laboratory testing should be conducted for HIV, Hepatitis B and Hepatitis C based on current guidelines and available source patient data. Laboratory testing should be conducted immediately post-exposure and may require additional testing over the next few weeks-months. Results of laboratory testing should be reported directly to the student pharmacist, faculty member or staff member, with confidentiality maintained.

Laboratory testing of the source patient once consent is obtained should be based on current guidelines and available source patient history. Confidentiality of the source patient information and laboratory results will be maintained at all times. Source patient results will be forwarded to the student pharmacist’s, faculty member’s, or staff member’s health care provider to ensure appropriate management and follow-up care. If the source patient refuses testing, the student pharmacist, faculty member or staff member should proceed with the appropriate medical evaluation, follow-up testing and possibly prophylactic medication based upon current guidelines and source patient history if available.

APE and PPE sites are under no obligation to provide medical evaluation or treatment if needed. Some APE sites will treat the student pharmacist as they do employees but sites are under no obligation to do this. Student pharmacist should take an active approach to knowing and understanding the procedures to follow at each training site.

This policy will be reviewed annually and updated as necessary to ensure current standards and procedures are adhered to and that documentation is completed.

**Contact information**

Director of Experiential Learning  
Office phone: 334-844-4329

PPE Director
Additional references

1. OSHA bloodborne pathogen standard

2. Auburn University Exposure Control Plan

3. CDC: Protecting Healthcare Workers from Bloodborne Pathogens
   (http://www.cdc.gov/ncidod/dhqp/wrkrProtect_bp_prevent.html)

4. CDC: National Institute for Occupational Safety and Health (http://www.cdc.gov/niosh/topics/bbp/)
Body Fluid/Needle Stick Incident/Exposure Report Form

Instructions: This form is to be used to report needle stick/sharps injuries/body fluid exposures to HSOP faculty, staff and students. Complete this form and return it to the Director of Experiential Learning or supervisor/Department Head (if faculty or staff) within 24 hours of the injury or exposure.

Name of person exposed/injured: _____________________________________________________________

AU ID#: ___________________________ Contact #: _____________________________________________

Email address: ______________________________________________

Today’s date: ____________________________________________

EXPOSURE
Date of exposure: ____________________________

Time of exposure: ____________________________

Brief description of exposure: ______________________________________________________________

________________________________________________________________________________________

TYPE OF INJURY/EXPOSURE:
___ Needle
___ Lancet
___ Glass
___ Blood or other body fluid
___ Other (specify) ________________________________

LOCATION WHEN EXPOSURE OCCURRED:
___ PPE-patient’s home/residence
___ Community health fair or other event
___ APE site (specify) ________________________________
___ Other: _________________________________________

THE EXPOSURE OCCURRED:
___ Before use of the sharp
___ After use of the sharp
___ During use of the sharp

INVOLVED BODY PART (STUDENT):
___ Arm (but not hand)
___ Face/head/neck
___ Hand
___ Leg/foot
___ Torso (front or back)

Student’s Medical Provider: ______________________________________________________________

Date provider seen: ________________________________________________________________

Patient/Source information:
Name: ______________________________________________________________

Contact information: ________________________________________________________________

_____________________________________________
1. Immediately cleanse the wound or mucus membranes with soap and water or if contact is the eye(s), flush with water for several minutes

2. Contact the appropriate HSOP personnel
   a. PPE: Director of PPE Program, PPE mentor and/or Director of Experiential Learning
   b. APE site: Preceptor, Faculty Regional Coordinator and/or Director of Experiential Learning
   c. Community/campus event: Event coordinator or faculty preceptor/mentor

   **Note- If the exposure involves a known HIV positive source, seek immediate medical attention since, if indicated, post-exposure prophylaxis should begin within 2 hours of exposure**

3. Seek medical attention
   a. PPE: Seek evaluation through the student health center, your physician of choice or nearest urgent care center or emergency department.
   b. APE site: Seek evaluation through the organization’s employee health center or other employee sponsored sites or, if directed by the site, seek evaluation at your physician of choice or the nearest urgent care center or emergency department.
   c. Community/campus event: Seek evaluation through the student health center, your physician of choice or nearest urgent care center or emergency department.

4. When you arrive for care post exposure, inform the provider of the exposure to potential blood borne pathogen(s). All care received (lab testing, prophylactic medications, if indicated, etc.) will be billed through your personal insurance and you may be responsible for any co-pays or other out of pocket expenses.

5. Source testing (testing of the patient) will be requested by an HSOP faculty member.
Auburn University Harrison School of Pharmacy
Post-exposure Consent for Testing: Source patient*
Testing for HIV, HBV, and HCV Infectivity

This form should be reviewed and signed by the source patient and provided to the health care provider responsible for the post-exposure evaluation.

Exposed Individual’s Information
Name (Please Print):___________________________________________
Contact Number:__________________________________________________________________________
Exposure Date:______________________________________________________________________________

Source Patient Statement of Understanding
I understand that my consent is required by law for HIV, hepatitis B (HBV), and hepatitis C (HCV) infectivity testing if someone is exposed to my blood or bodily fluids. I understand that a student pharmacist or faculty member of the Auburn University Harrison School of Pharmacy has been accidentally exposed to my blood or bodily fluids and that testing for HIV, HBV, and HCV infectivity is being requested. I understand that I am not required to give my consent, but if I do, my blood will be tested for these viruses at no expense to me. I have been informed that the test to detect whether or not I have HIV antibodies is not completely reliable. This test can produce a false positive result when an HIV antibody is not present and that follow-up tests may be required. I understand that the results of these tests will be kept confidential and will only be released to medical personnel directly responsible for my care and treatment, to the health care provider responsible for the exposed student pharmacist or faculty member to ensure appropriate medical evaluation and care, and to others only as required by law.

Consent or Refusal
I consent to:
HIV Testing ___
Hepatitis B Testing ___
Hepatitis C Testing ___

I refuse consent to:
HIV Testing ___
Hepatitis B Testing ___
Hepatitis C Testing ___

Source Individual Identification
Source patient’s printed name:______________________________________________
Source patient’s signature:___________________________________________________
Relationship (if signed by someone other than the source patient):__________________
8) Essential Personnel Policy

**Purpose:** Auburn University has a policy for suspending normal operations under some circumstances, i.e., inclement weather. In these events key operations which provide essential services will continue. This policy defines key operations for the Harrison School of Pharmacy and who must remain on duty during these events.

**Definition:** Essential operations for HSOP include patient care services, research in process and administrative services. The following specifically defines the services:

1. **AUPCC Pharmacies** – Both the employee pharmacy and the student medical services pharmacy will remain open. The supervising pharmacist and pharmacy technician for each pharmacy are designated as essential. The hours of operation will not be altered unless there is prior approval from the Dean or his/her designee.
2. **Administrative Affairs** – A member of the HSOP administration will remain on duty during normal business operations to support issues pertaining to student well-being. An administrative staff member will serve as the receptionist during normal business operations route patients and handle telephone communications. Staff and administrators will meet at the time normal operation suspension is announced to determine who serves in each of these roles.
3. **Academic Departments** – Department Heads may maintain normal operations in support of essential and/urgent services and may designate which personnel are required. Staff participation should be voluntary in nature.
4. **Research in Process** – In the event ongoing research cannot be disrupted, the head of the laboratory in question may designate personnel related to the work as essential with prior approval of the Department Head or Dean.

9) Work Order Policy (issued June 9, 2009)

Memo to faculty and staff from the Dean:

In an effort to coordinate and consolidate work that is required for HSOP physical facilities the following policy is being implemented. Improvements will be facilitated through the use of a single contact person with facilities.

**Policy:** All facilities work orders for normal building maintenance issues such as plumbing, ceiling lights outage, etc should be called in to the Work Order Desk at 844-4357 (4-help). Work orders requiring funding, installation, or special arrangements or handling should be routed through the Dean’s Office after receiving approval by the Department Head. Departmental support personnel are to complete the appropriate request forms with funding sources prior to forwarding it to the Dean’s Office. It will be the responsibility of the Dean’s office to submit all these requests to facilities.

10) Recruitment

**Staff Positions** – Staff searches are coordinated through an on-line application system managed by AU Human Resources. Approval to implement a search is routed through the HR liaison in the Dean’s office. The head of the department will make recommendations for search committee members to the Dean.
Dean will send an appointment letter to individuals on the committee. The committee charges can be comprised of any of the following: Developing the announcement; identifying an appropriate advertising campaign; soliciting/screening applications; collecting information on candidates; recommending candidates to the Dean for interview; developing the interview itinerary; participating in the interviews; and submitting an unranked list of qualified candidates to the Dean. The department HR liaison will work with the HR liaison in the Dean’s office to post the position and establish an appropriate search venue, based on the position’s responsibilities, geographic location of the position and other unique factors.

Establishing New Positions - To establish new positions, the head of the department will send a request to the Dean. Once approved, the HR liaison in the Dean’s office will work with the department HR liaison and head of the department to write the position description and process it for approval by the University.

Filling Positions - Once a search is approved, the department HR liaison will work with the HR liaison in the Dean’s office to post the position and establish an appropriate search venue, based on the position’s responsibilities, the geographic location of the position, and other factors. The committee will prepare an interview agenda and interview questions based on the position announcement and responsibilities. Once the position closes, HR will release applications which the committee will review and then make recommendations for interviewees to the Dean. Once interviewees are approved, they will be scheduled for interviews. The committee provides the Dean with a list of unranked, acceptable candidates. No candidate is selected or offered a position without a referral check. Once the top candidate is selected, the HR liaison in the Dean’s office will request a tentative salary referral, which will be approved by the Dean, and can be used as a means to determine if the candidate is interested in the position, taking into consideration the position’s responsibilities and tentative salary. The Dean approves all salaries and conditions and provides the letter of offer once all appropriate procedures have been followed and forms have been processed through HR.

Faculty, Non-Staff Professional, Resident, and Post-Doc Positions - To initiate a search, the Department Head must complete a PROV100 which is then routed through the HR liaison in the Dean’s office and approved by the Dean, then routed to the Provost for final approval. A search committee is appointed by the Dean following recommendations from the Department Head. The Dean then establishes committee charges, which can be comprised of any of the following: developing the announcement; identifying an appropriate advertising campaign; soliciting/screening applications; collecting information on candidates; recommending candidates to the Dean for interview; developing the interview itinerary; participating in the interviews; and submitting an unranked list of qualified candidates to the Dean. The committee will review the applications and make recommendations for interviewees to the respective Department Head who presents the list to the Dean for approval to interview. Once interviewees are approved, interviews are scheduled. The committee provides the Department Head with a list of unranked, acceptable candidates. The Department Head confers with members of the department holding full professorial rank, or if the department does not include full professorial faculty, with those faculty holding associate ranks. No candidate should be selected or offered a position without submission of personal references and academic transcripts. If it is a faculty position, the unranked list and faculty comments about the candidates will be submitted to the Dean. The department completes and submits the request to hire packet to the Dean’s office for review and approval. This packet includes the completed PROV 100, Form B, Form D, copy of the approved Form A, copy of the approved ad, candidate’s
curriculum vitae, and academic transcripts. The Dean will negotiate all salaries and conditions then provides the letter of offer once final approval to hire is gained from the Provost.

Administrative Positions - Administrative searches follow the same process as faculty searches.

11) Distribution of Digital Materials
The Harrison School of Pharmacy Office of Instructional and Information Technology (HSOP OIT) is the centralized entity for collection, recording, and distribution of digital materials for the School. Materials are acquired to support teaching, research, and study needs of HSOP students, faculty, and staff. The collections are made available via DejaView and other means, and are primarily intended for live or on-demand access, including distant and on-site use. In addition to this broad, interdisciplinary core collection of digital materials, DejaView is the primary location for the deposit and viewing of digital course materials.

The majority of materials acquired, archived, transmitted, or projected by HSOP OIT are protected by copyright laws and/or commercial licenses which define and limit the permissible uses of these materials in various contexts. Because this array of laws and licenses is generally complex, and because much of the law is very loosely or unclearly defined, it is often difficult for students and faculty to determine which uses are allowed under the existing laws.

In short, DejaView recordings may not be distributed to other entities without express written permission by HSOP administration and the faculty member featured in the recording.

For full disclosure of existing copyright laws, see:
http://www.copyright.gov

To review AU Appropriate Use policies, see:
http://www.auburn.edu/oit/it_policies/index.php

Violations of any of these laws or policies may be considered as an honor code violation for student pharmacists with resultant penalties. Infractions by others will result in appropriate sanctions.

12) Influenza Policy for Harrison School of Pharmacy (HSOP) Employees
The purpose of the policy is to outline the procedure to be followed by employees (this includes both faculty and staff members) who have contracted influenza or have developed influenza-like symptoms. This policy considers the current high prevalence of both seasonal and H1N1 influenza and the likelihood of a much higher level of infection for the 2009-2010 influenza season. These policies build upon the policies of Auburn University with specific modifications to address unique the HSOP’s unique circumstances.

Influenza continues to be a significant health care burden resulting in absenteeism and is particularly concerning because of the risk of transfer of the virus from one person to another. Influenza infections include seasonal influenza and the current pandemic of H1N1 influenza.

Prevention procedures
HSOP employees are strongly encouraged to receive an annual seasonal influenza vaccination. Employees are also strongly encouraged to receive the H1N1 vaccination or other influenza vaccinations that may become available.

Influenza vaccination will be the employee’s responsibility including any associated cost of vaccination.

Employees should also exercise appropriate prevention measures as outlined by the Centers for Disease Control (CDC) including frequent hand washing, covering mouth and nose during coughing or sneezing, and avoiding, whenever possible, persons that are known or suspected of having influenza.

It is the responsibility of employees to take those actions that will minimize the spread of influenza to other members of the Auburn University community, and particularly to patients. Employees are asked to self-isolate should they develop influenza-like symptoms.

Infection control and management

Policies related attendance

Employees with influenza or influenza-like symptoms (fever, cough, sore throat, headache, muscle aches, extreme tiredness, and possibly diarrhea and/or vomiting) should self-isolate and not come to work. Employees with influenza-like symptoms should not return to work until they have been afebrile for at least 24 hours without the use of fever-reducing medications. Employees are to notify their supervisor of their illness and absence at the earliest possible time. Supervisors may ask employees with influenza-like symptoms to leave the building and return to their place of residence; employees are expected to comply with such requests.

Given the severity of the current influenza outbreak, employees are strongly encouraged to seek medical care should they develop influenza-like symptoms. This will facilitate proper evaluation and the timely provision of antiviral medications to appropriate individuals. Any medical evaluation and treatment will be the employee’s responsibility.

During the current pandemic, it is possible that the demand for medical services will greatly outstrip the supply. Given this, HSOP employees will not be required to provide physician excuses in order to receive excused absences from work, yet medical care is strongly recommended.

Employees with family members who have influenza, but are not ill themselves, will be expected to report for work and not allowed to work from home. This does not preclude the use of sick leave by employees in order to care for sick individuals in their immediate families, as per University policy.

Policies for Faculty Members Located at Practice Sites

In addition to HSOP polices, faculty members based at practice sites are expected to adhere to the specific policies and procedures of the practice site. Return to the practice site will follow practice site policies and procedures, which should be based on CDC recommendations regarding length of time away from the health care setting.

Policy Maintenance
This policy will be reviewed annually and updated as necessary to ensure current standards and procedures are adhered to and that current CDC recommendations are being followed.

Additional references

3. CDC. 2009 H1N1 Flu (Swine Flu); http://www.cdc.gov/h1n1flu/
4. CDC. Influenza; http://www.cdc.gov/flu/

12) Search Procedures

Harrison School of Pharmacy
Faculty/Staff Search Guidelines
October 23, 2009

Staff Searches - Staff searches are coordinated through an on-line application system managed by AU Human Resources.

1. To establish new positions, the Department Head or other supervising administrator (e.g., Associate Dean) will send a request to the Dean. Once approved, the Dean’s HR Liaison will work with the Department HR Liaison and the Department Head/Administrator to write the position description and process required forms for approval by the University.

2. The Department Head/Administrator will make recommendations for search committee members to the Dean. The Dean will send an appointment letter to the committee. The committee charges may be comprised of any of the following: identifying an appropriate advertising campaign; soliciting/screening applications; collecting information on candidates; recommending candidates to the Dean for interview; developing the interview itinerary; participating in the interviews; and submitting an unranked list of qualified candidates to the Dean. Each committee member will sign a confidentiality agreement (See attached template).

3. Once a search is approved by AU HR, the Department HR liaison will work with the Dean’s HR liaison to post the position and establish an appropriate advertising campaign, based on the position’s responsibilities, geographic location of the position and other unique factors.

4. Once the position posting closes (application period), AU HR will release applications that the committee will review and then make recommendations for interviewees to the Dean through the Department Head or other supervising administrator.

5. Once interviewees are approved by the Dean they will be scheduled for interviews. The committee will prepare an interview agenda and interview questions based on the position announcement and responsibilities. After all interviews, the committee provides the Dean, through the supervising administrator, a list of unranked, acceptable candidates. No candidate is selected or offered a position without a referral check.

6. Once the top candidate is selected, the Dean’s HR liaison will request a background check, as well as a tentative salary referral. This tentative salary referral will be approved by the Dean, and can be used as a means to determine if the candidate is interested in the position, taking into consideration the position’s responsibilities and tentative salary.
7. Once all appropriate procedures have been followed and forms have been processed through AUHR, an official salary referral and authorization to make an official offer will be provided. The Dean approves the final salary offer and conditions and provides the letter of offer.

Faculty Searches

1. The Department Head must complete a PROV100 which is routed through the Dean’s HR liaison and approved by the Dean.

2. A search committee is appointed by the Dean following recommendations from the Department Head. The Dean then establishes search committee charges, which may be comprised of any of the following: developing the announcement; identifying an appropriate advertising campaign; developing screening criteria consistent with the announcement; soliciting/screening applications; collecting information on candidates; recommending candidates to the Dean for interview; developing the interview itinerary; participating in the interviews; and submitting an unranked list of qualified candidates to the Dean. Each committee member will sign a confidentiality agreement (See attached). The Department HR liaison and/or the Dean’s HR liaison will work with the committee to complete assigned charges.

3. Once a search plan is established, the Department HR liaison will work with the Dean’s HR liaison to process appropriate paperwork through the Dean, Provost, and AA/EEO for approval. No ads can be posted and distributed until this packet is approved.

4. The search committee will develop a list of criteria, based on the position announcement, to be used to screen applicants. The search committee may prepare interview questions for the candidate to complete in writing and/or for use in telephone screening. A template for the interview agenda will be developed by the committee including a presentation topic (if appropriate/applicable), key individuals to interview applicants and facilities/sites to be toured. The supporting staff member for the search committee will use the template to schedule interviews.

5. Once the committee decides which candidates they recommend for on-site interview, the Chairman of the committee will request approval from the Dean through the Department Head to interview the candidates.

6. Following each faculty candidate interview, evaluations will be sought from all faculty/staff members using a HSOP Faculty Candidate Evaluation Form. In some cases, graduate students, residents, and PharmD students will also complete the evaluation form. Feedback from faculty/staff/students/residents must be received by the deadline determined by the search committee. Feedback via this mechanism will provide the search committee/Department Head and Dean information regarding acceptability of each candidate for employment (See attached template). A summary of these comments for all candidates will be made available to the faculty and submitted to the Provost’s office in the hire packet. The Department Head may confer further with respective faculty to discuss each candidate. In order to prevent delay in the hiring process, this discussion must be completed prior to any action taken on hiring. In addition to obtaining written letters of reference about candidates, the search committee is strongly encouraged to make contacts with others who have worked with the candidates prior to recommendations being made to the Department Head/Dean.
7. The search committee will submit an unranked list of acceptable candidates to the Dean through the Department Head. In the event that recruitment for multiple positions is from a common pool of applicants, a list must be provided for each position. The Dean or designee will manage all negotiations thereafter with all candidates.

8. Once a candidate is selected by the Dean the department completes and submits the request to hire packet to the Dean’s office for review and approval. This packet includes the completed PROV 100, Form B, Form D, copy of the approved Form A, copy of the approved ad, candidate’s curriculum vitae, summary of evaluation comments, Initial Appointment Report for Tenure Track Faculty (if applicable) and academic transcripts. No candidate will be selected or offered a position without submission of names of personal references and academic transcripts. The Dean will negotiate all salaries and conditions and provide the letter of offer once final approval to hire is obtained from the Provost.

Establishing Non-Staff Professional, Resident, and Post-Doc Positions –Non-Staff Professional, Resident, and Post-Doc Positions Searches

1. To establish new positions, the Department Head or other supervising administrator (e.g., Associate Dean) will complete the top part of a PROV100 and submit it to the Dean through his HR Liaison. Once approved, the Dean’s HR liaison will work with the Department/Office HR liaison and Department Head/supervising administrator to write the position description for the advertisement.

2. A search committee is appointed by the Dean following recommendations from the Department Head/supervising administrator. The Dean then establishes search committee charges, which can be comprised of any of the following: developing the announcement; identifying an appropriate advertising campaign; developing screening criteria consistent with the announcement; soliciting/screening applications; collecting information on candidates; recommending candidates to the Dean for interview; developing the interview itinerary; participating in the interviews; and submitting an unranked list of qualified candidates to the Dean. Each committee member will sign a confidentiality agreement (See attached template).

3. Once the PROV100 is approved, the Department/Office HR liaison will work with the Dean’s HR liaison to post the position and establish an appropriate search venue(s), based on the position’s responsibilities, the geographic location of the position, and other factors.

4. The search committee will develop a list of criteria to be used to screen potential applicants based on the position announcement. The search committee may prepare interview questions for the candidate to complete in writing for use during the interview and/or for use in telephone screening.

5. A template for the interview agenda will be developed by the committee including meetings with key individuals and facilities to be viewed. The supporting staff member for the search committee will use the template to schedule interviews. Once the committee decides which candidates they would recommend for on-site interviews the Chair of the committee will request approval from the Dean through the Department Head/supervising administrator to interview the candidates.
9. Following the interviews the committee will provide the Dean through the Department Head with a list of unranked, acceptable candidates. In addition to obtaining written letters of reference about candidates (where appropriate), the search committee is strongly encouraged to make contacts with others who have worked with the candidates prior to recommendations being made to the Department Head/Dean. Once a candidate is selected by the Dean, the department completes and submits the request to hire packet to the Dean’s office for review and approval. This packet includes the completed PROV 100, Form B, Form D, copy of the approved Form A, copy of the approved ad, candidate’s curriculum vitae, and academic transcripts. No candidate will be selected or offered a position without submission of names of personal references and academic transcripts. The Dean will negotiate all salaries and conditions and provide the letter of offer once final approval to hire is obtained from the Provost.

Administrative Positions - Administrative searches follow the same process as faculty searches.
EVALUATION TEMPLATE

Candidate’s Name Here
Position Title Here
Evaluation - CONFIDENTIAL

Please return to ------- no later than ------.

I am a(n):  Administrator ______  Faculty Member ______
Staff Member ______  Pharm.D. Student ______
Resident ______  Graduate Student ______

My Faculty rank is:  Assistant ______  Associate ______
Full ______  Affiliate ______

Identify the context(s) in which you observed the candidate (mark all that apply):

Seminar ______  Meeting with a group of faculty ______
Starback recording of seminar ______  Individual Meeting ______
Other ______  Search Committee ______

If other, what was the context in which you observed/interacted with the candidate?

________________________________________________________________________

How would you rate the candidate’s performance at this meeting?

Excellent ______  Very Good ______
Average ______  Below Average ______

What strengths have you identified in the candidate?

________________________________________________________________________

________________________________________________________________________

What weaknesses have you identified in the candidate?

________________________________________________________________________

________________________________________________________________________

Comments:

________________________________________________________________________

________________________________________________________________________
In your opinion, and based upon your interactions, is this candidate acceptable for the position?

Yes      No

If no, please explain

Evaluator’s Name (optional): __________________________
As a member of the Search Committee for the position of _______________________ at Auburn University, I understand that the ultimate success of our endeavor and the integrity of the University depend on the search being conducted in an impartial, ethical and professional manner. In consideration of my designation as a member of this Search Committee, I hereby agree to the following:

1. I understand that this Search Committee’s role to is recommend candidates to the Department Chair/Dean and/or Provost who has the ultimate authority to appoint faculty or staff.

2. As a member of the Search Committee, I accept the responsibility of conducting myself in a professional manner as a representative of my department, College/School and Auburn University.

3. I acknowledge that all information concerning the candidate pool is extremely confidential and agree to permanently protect the identity of individuals who have expressed interest in exploring this opportunity, including individual qualifications and merits.

4. I agree to maintain absolute confidentiality about all discussions of the Search Committee, both during the search process and after its completion. I understand that any breach in confidentiality could result in considerable damage to the reputations and/or livelihoods of the candidates, the Search Committee and the University.

5. I agree that any and all information in the form of papers, books, files, documents, electronic communications, or in any other form or format, which comes into my possession and relates to the work of the Search Committee, is confidential other than information that is or becomes publicly known other than through my disclosure.

6. I acknowledge that only the Chair of the Search Committee or designee is authorized to speak on behalf of the Search Committee.

7. Upon the request of the Chair of the Search Committee, I agree that I will return or destroy all materials which I have received and that I will return or destroy all remaining materials at the conclusion of the Search Committee’s work.

8. I understand that I may be removed from the Search Committee if I breach any of these confidentiality obligations or fail to act in a professional manner. I also understand that should I be removed all the terms of this agreement are still applicable and binding upon
the termination of the committee.

I have read, understand and agree to abide by all of the terms of this Confidentiality Agreement, as a condition of my service as a member of the Search Committee.

Signed ________________________________ Date __________________________
13) Survey Software User Policy
Memo from the Dean dated 2/15/2010

The Harrison School of Pharmacy has purchased the license to utilize Qualtrics, a survey software package. All faculty have access to this package. In order to insure the appropriate utilization of this tool we will implement the following guidelines.

The Harrison School of Pharmacy Office of Teaching Learning and Assessment is the centralized entity for assessing the curriculum and should be engaged when individual faculty members initiate assessment efforts for their own purposes including educational research. The purpose for their engagement is to assure that duplication of effort in collecting data is avoided and to be of assistance in designing the educational research and surveys. All faculty are encouraged to collaborate with OTLA whenever educational information is to be collected for any purpose. Prior to using survey software for any of these purposes, faculty must gain approval by OTLA.

Survey software is available to be used by all faculty for purposes other than educational assessment. Prior to using the software subscription, faculty must gain approval from their respective department head. Student pharmacists and graduate students must obtain permission from a sponsoring faculty member to use this program.

14) Graduate Student Attire

Many HSOP graduate students are exposed to hazardous chemical, biological, and physical agents. These exposures and the resulting use of personal protective equipment (PPE) may make it uncomfortable and in some cases hazardous to wear typical professional attire. Thus, graduate students pursuing laboratory research are permitted to wear casual clothing, including jeans and collarless shirts. It is expected that attire be in good condition, neat looking and devoid of graphics of questionable taste. Furthermore, graduate students are expected to adhere to accepted standards for bathing and personal hygiene.

Safety issues dictate that hats, bare feet, open-back or open-toe shoes, sandals, flip-flops, miniskirts, shorts, skorts, Capri pants, sweatpants, bare midriffs, neckties, and dangling jewelry (earrings, bracelets, necklaces) are prohibited in laboratories. Visible pierced jewelry is prohibited with the exception of stud earrings. Graduate students are required to wear appropriate personal protective equipment, including but not limited to laboratory coats, latex gloves, face shields, goggles, and safety glasses. However, latex gloves and laboratory coats are not to be worn in elevators, classrooms, offices, or other communal spaces unless absolutely necessary. All HSOP graduate students are required to wear their identification badges in the workplace.

Graduate students offering instruction in the PharmD program, including CAPP lab, are required to adhere to the attire standards of the professional program. Moreover, graduate students wearing attire that does not adhere to the standards of the PharmD program are strongly urged to avoid classrooms, hallways, and gathering places for the PharmD students.
Exceptions to the attire policy will be granted to accommodate accepted cultural or religious practices. Contact the Associate Dean for Research and Graduate Programs for details.

15) Graduate student leave policy and leave request form

Auburn University does not consider graduate students to be employees; hence, graduate students do not accumulate vacation, personal or sick leave time and the provisions of FMLA do not apply. Thus, HSOP graduate students are approved for absence only for official holiday periods as specified by the Auburn University Office of Human Resources. Those HSOP graduate students on assistantship will be granted paid leave only for those official holiday periods. These dates can be found on the web at http://www.auburn.edu/administration/human_resources/holidays.htm.

Requests for exception to the leave policy for vacation and personal leave must be approved in advance by the graduate student’s faculty advisor, assistantship supervisor (if applicable), Department Head and Associate Dean for Research and Graduate Programs.

Requests for exception to the leave policy for sick leave must be submitted in advance, if possible, and approved by the graduate student’s faculty advisor, assistantship supervisor (if applicable), Department Head and Associate Dean for Research and Graduate Programs. If sick leave cannot be approved in advance, please submit a leave form upon your return. All requests for exceptions to the leave policy for sickness must be accompanied by an explanation from a primary health care provider.

Graduate students on assistantship may not be paid for absences during other periods. Excessive unexcused absences may serve as grounds for terminating a graduate student’s financial support and/or their position in the graduate program.

16) Social Media Guidelines – Distributed August 8, 2013

The Harrison School of Pharmacy supports the official use of social media to reach diverse audiences important to the School, such as current students, prospective students, parents of students, academic colleagues, employees, alumni, practicing pharmacists, health care providers, visitors, the Auburn community, and members of the general public.

The guidelines outlined in this document pertain to all forms of social media, including but not limited to: Facebook, Google+, LinkedIn, YouTube, Twitter, Flickr, Instagram, and Pinterest. Harrison School of Pharmacy-affiliated closed-group or invitation-only social media, such as Facebook groups for varying classes, academic units, and student organizations, and Google+, are still bound to these policies.

These guidelines are not intended to limit participation in social media, but to offer a framework to better unify the School’s branding efforts, protect the rights and privacy of individuals, and ensure the School of Pharmacy protects its image and values.

Administrators
All social media sites affiliated with the Harrison School of Pharmacy – including closed-group sites - must have a School-affiliated site administrator; non-HSOP individuals cannot serve as site administrators.

In addition to the primary administrator, at least one faculty or staff member shall be designated to monitor the social media site, identify potential and existing problems that may emerge, and take action as necessary. A designated social media liaison from the HSOP Student Council will also serve as a site administrator, in order to monitor the site and report any problems.

Each site affiliated with the Harrison School of Pharmacy will have at least three (3) total site administrators, as follows:

1. Primary Administrator (ex. President of APhA-ASP chapter, class justices, Director of Recruiting, etc.)
2. Faculty or staff member employed by the Harrison School of Pharmacy (ex. APhA-ASP faculty advisor)
3. Student Council Liaison (Student representative assigned by the Student Council President)

Responsibilities for site administration and monitoring will be divided amongst appropriate staff, faculty, and students to ensure no one individual is over-tasked; the expectation is that each designated administrator will monitor their designated site(s) at least once daily. Continual updates and ongoing dialogue with constituent groups via social media ensures HSOP social media sites remain dynamic and relevant. Site administrators should work together to determine how to divide the responsibilities for updates and oversight to make efficient use of their time as not to defer from their primary job or class responsibilities.

New site administrators may be added or existing ones replaced (for example, following a student’s graduation or end-of-term of office) following approval from the Dean’s Office; the Dean’s Office shall keep a current master list of social media sites and appropriate administrators, which will be made available on the shared drive.

**Approval Process**

Approval to create any social media site as an extension of the Harrison School of Pharmacy is required. This applies to both public and closed student groups on Facebook, Google+, etc. The Dean’s Office (via a designee) will grant approval; all social media sites using the Harrison School of Pharmacy name or likeness are bound by the policies set forth in this document, including those already in existence.

**Inventory of Social Media Presence**

Currently, the Harrison School of Pharmacy’s name is associated with the following social media sites:

*Facebook*

**Official** Harrison School of Pharmacy: [http://www.facebook.com/AuburnHSOP](http://www.facebook.com/AuburnHSOP)
HSOP Admissions: www.facebook.com/AUHSOP.Admissions

Auburn Pharmacist Alumni Association: www.facebook.com/hsop.apaa

Additional affiliated sites are listed in a separate document.

**Distinction between Official and Affiliated HSOP Social Media**

‘Official’ HSOP social media sites serve the primary function of sharing positive news and events of interest to our target audiences (see p. 1).

Sites which are affiliated with the Harrison School of Pharmacy have varying functions, including sharing instrumental information and forging a community among a student organization or class. What may be appropriate for the affiliated sites may not be appropriate for the ‘Official’ sites. Affiliated sites still bear the Harrison School of Pharmacy name/likeness and are bound by the policies set forth in this document.

**Guidelines for Posting**

Items that are posted on all social media sites bearing the Harrison School of Pharmacy name or affiliation should be in good taste and should represent the Harrison School of Pharmacy and Auburn University in the best possible light and should be free of obscenity. This pertains to public and closed/private social media sites.

The following issues should be considered prior to posting content to any social media site:

1. **General Content Issues:** Remember that content posted may be redistributed through the Internet and other media channels and may be viewed by the general public. If deleted or modified, older versions may continue to exist online. Screen captures could also be widely circulated.

   All content must reflect the professional nature and values of the Harrison School of Pharmacy. Content should not be posted unless it furthers the School’s education, teaching, research, and outreach mission. Share only information that is appropriate for the public (*all ages*).

   Students are bound to the HSOP Honor Code and all content on authorized HSOP-affiliated social media sites must reflect the tenants and basic principles inherent in the code. Any content that is disrespectful to the School or to its students, faculty, staff members, patients with which students work, or alumni is in violation of the Honor Code. HSOP faculty and staff are likewise bound by a similar code of conduct; unit heads will be responsible for any issues that may arise with respect to questionable content posted by a faculty and/or staff member in their department.

   In posting content to social media, site administrators should consider a) who the intended stakeholder group is; b) whether the message is appropriate to that audience group; and c) whether the item reflects the values of the School of Pharmacy.

   **A. Allowable Content:**
1. **Events:** Events of interest to HSOP community, including students, faculty, and alumni, such as awards ceremonies, fundraising activities, and open meetings. Events of interest to broader community, such as health fairs, 5Ks, etc., are permissible.

2. **News:** Items including but not limited to: announcement of awards, scholarships, and leadership positions; presentations at regional or national meetings; grants awarded to faculty or students; publications authored by HSOP faculty, students, staff, and/or alumni; human interest pieces, etc. Items which are personal in nature – such as ticket sales, rental property/roommate match, etc. – are not permitted on the ‘official’ HSOP Facebook sites (specifically www.facebook/AuburnHSOP and www.facebook.com/AUHSOP.Admissions); they are permissible on closed/open group pages (for example, Class of 2015, 2016, and 2017 pages for Facebook). Site administrators should monitor these posts to ensure they are in good taste and appropriate for the intended audience, depending on the medium.

3. **Sharing/Promotion among HSOP Sites/Social Media:** Reference back to other HSOP-affiliated sites or HSOP website is permitted. Individuals and site administrators should help drive traffic to other HSOP-affiliated sites, including the Website, and show a connection among various social media. For example, a post that encourages individuals to visit the Auburn Pharmacist Alumni Association or renew their membership is acceptable as long as these types of posts are used sparingly.

4. **Closed Group Content:** On social media sites that are closed or invitation-only (ex. A Facebook group for P2s, or Google+ site), administrators and members can post content related to coursework, upcoming exams, events, etc. Some examples include: study group sessions and student organization meetings; unallowable content would include items such as exam questions or homework answers. This information is instrumental information only and is intended to further communication and foster community among students; all students participating in these sites are bound to the Honor Code.

### B. Unallowable Content:

1. Site administrators should not post items on an official HSOP social media site which represents one’s personal opinion on a subject related to pharmacy practice, health care, or related topic, or reflecting one’s personal political and/or religious views. Personal opinions are best expressed in alternate forums. Content which is inflammatory in nature should be avoided. Site administrators should monitor content posted by others which has the potential to stir controversy and take action accordingly. Some social media limit or block the ability of others to post comments; this mechanism should be utilized as necessary.

Affiliated HSOP social media sites should proceed with caution with regards to material that could be contentious, inflammatory or discriminatory; administrators should apply sound judgment when monitoring this content. Affiliated sites should post somewhere in their description (“About” on Facebook, for example) the following disclaimer:
The opinions expressed at or through this site are the opinions of the individual author and do not reflect the opinions of the Harrison School of Pharmacy.

The intent is not to limit discussion on an item of interest to social media users/members – for example, if students or alumni wish to post an item related to healthcare - but to mitigate liability from the School that reflect one’s personal opinions.

2. Do not include any personally identifiable information that can be used to locate someone offline. This includes anyone’s screen name, personal photo, hobbies, identification numbers, such as social security numbers or student IDs, addresses and phone numbers (other than an authorized business address or business phone number).

3. Do not upload, post, transmit, share, store, or otherwise make publicly available on the Site any private information of any third party, including, addresses, phone numbers, email addresses, Social Security numbers, and credit card numbers.

4. Content that is not clearly suitable for all ages is not permissible.

5. Do not post content that could create a security risk for the University or the School. Examples include but are not limited to images of restricted access research areas and information technology facilities.

6. Do not post content that shows (or may be perceived to show) someone getting hurt, attacked or humiliated, that might be considered racist, bigoted or demeaning to a particular group of individuals, that depicts activity that is (or may be perceived to be) illegal, for example drug use, or that could otherwise put the University or HSOP in a bad light.

2. Photographs:

a. Harrison School of Pharmacy-affiliated events and activities may be photographed or captured on video and used accordingly in HSOP publications and social media sites. Faculty, staff, alumni and student participation in such events represents acknowledgement that one’s image may be used in promotional materials and/or social media sites.

b. Do not post content that might be embarrassing to an individual or that could be construed as placing an individual in a bad or false light.

c. Do not post content that might cause someone to believe that his/her name, image, likeness or other identifying aspect of his/her identity is being used for commercial purposes without permission.

d. Special care must always be taken when dealing with images of “special populations,” e.g., minors, health care patients, research subjects. Stringent legal requirements apply. Generally speaking, such images should never be used in this type of context.
3. **Logos and Style Guides:**

All social media sites must conform to logo usage and style guides, available at [http://ocm.auburn.edu/styleguide](http://ocm.auburn.edu/styleguide). Only official HSOP logos can be used; see the Dean’s Office or the AU Office of Communications and Marketing (OCM) for images and/or questions regarding the use of logos and style guides.

4. **Trademark Information:**

Note that use of Auburn University marks, such as logos and graphics, must comply with the policies set forth by the Office of Trademark Management and Licensing. Information is available at [http://www.auburn.edu/administration/trademark/](http://www.auburn.edu/administration/trademark/). Questions regarding the use of University marks should be directed to the University’s Office of Trademark Management and Licensing at (334) 844-5180.

Regarding the use of copyrighted or proprietary materials, e.g., music, art, copyrighted photographs or texts, snippets of copyrighted video, or information considered to be a trade secret:

- The University would have to secure written permission prior to using/incorporating any copyrighted or proprietary materials. Questions regarding the appropriateness of a posting should be addressed to OCM or the Office of Trademark Management and Licensing.

  The safest course is to use only materials created by the University for such purposes. Contact OCM or OTML for assistance.

**Facebook-specific Policies**

The Harrison School of Pharmacy operates its ‘official’ Facebook page at: [http://www.facebook.com/AuburnHSOP](http://www.facebook.com/AuburnHSOP). This page will serve as the formal and official communication for the School at-large and will be the primary vehicle to communicate news and events and promote public relations within the School’s internal and external community. This page will be maintained daily by a designated representative from the Dean’s Office; the President of the HSOP Student Council will also serve as moderator to share content with the student population and the general public, and a staff/faculty member will also be assigned to assist with site moderation. Permissible and unallowable content described above pertains to this page and all subsequent groups which bear the HSOP name. E-mail remains the primary communication tool within the Harrison School of Pharmacy; Facebook will not supersede those communications, but will supplement those communications with an emphasis on publicity, communication with various stakeholder groups, and promoting positive PR to an external audience.
There are two sub-pages which exist within HSOP which serve specific functions: Recruitment/Admissions and Alumni Communication. These pages are:

Admissions: www.facebook.com/AUHSOP.Admissions

Auburn Pharmacist Alumni Association: www.facebook.com/hsoapapa

Content guidelines also apply in these cases; however, the content of the Admissions page will revolve primarily around providing information of interest to potential students, whereas the Alumni Association page will include information pertinent to the HSOP alumni population. These pages are moderated by at least two HSOP staff and/or faculty members. These pages should “like” and refer its visitors to the primary HSOP Facebook page for more information on the School.

**Facebook Groups:**

Pages created by a student organization or class must be created as “Facebook Group” rather than “Facebook Page” or personal profiles. A Facebook Page is a profile used by an entity (i.e. a non-individual) for business purposes. Such pages may only be created by authorized representatives of the School. Groups can be arranged by class year, such as P1, P2, P3, P4, but should not be separated by Auburn or Mobile locations; if messages apply to one campus over another, posts should indicate ‘Mobile Only’ or ‘Auburn Only’, similar to how e-mail communications are sorted. The purpose of creating unified social media is to enhance communication and foster community spirit within HSOP.

In order to comply with Facebook terms and conditions, and enable the School to track authorized pages, any unit wishing to create a group must provide the HSOP Dean’s Office designee with the name and contact information for the individual(s) who will be authorized by the School to create, operate, monitor, and edit the Facebook group on an ongoing basis (i.e. the “Page Administrator”). That individual must comply with the policies set forth in this document. In addition, an employee of the Harrison School of Pharmacy (faculty or staff member) and a representatives from the HSOP Student Council will also be named as Page Administrators, in order to monitor content and to respond more quickly in the event of a problem, such as the unavailability or departure of the staff member who has administrative control of the page.

The department’s authorized Page Administrator(s) must maintain the security of the Facebook password and identification. These individuals are fully responsible for all use of the account and any actions that take place using the account. Any changes in the designated Page Administrator(s) must be promptly communicated to the HSOP Dean’s Office. Departments may not register for more than one User account, or register for a User account on behalf of another individual, group or entity.

**Collecting User Information**

University departments should not use Facebook to collect personal information of users, as Facebook terms and conditions, as well as state and federal law, impose significant requirements and restrictions on the collection of personal information of users. In the case of minors, significant additional penalties can apply to violations.
Additional Comments and Policies for all Social Media

Statement on Social Media Etiquette

Statement prepared by the OIT Advisory Committee, Reissued 8/2/12

HSOP acknowledges and supports the use of social media as a means to interact with others through the Web and other media. HSOP personnel (students, staff, and faculty) are encouraged to be diligent in establishing and maintaining their social media persona, including but not limited to: picture creation and sharing, video creation and sharing, “friending”, status updates in social networks, tagging of you and others in pictures and other media, blogs posts/comments, location updates, etc. HSOP personnel should be aware of some of the consequences that have occurred elsewhere:

1. 45% of employers use social media sites to screen potential employees.
2. Stalking has occurred using information posted in a social networking site.
3. Investigations have been conducted of potentially racially insensitive behavior following picture postings on a social networking site.
4. A college student was expelled for comments about a police officer made on a social networking site.
5. Four college students were placed on disciplinary probation for negative comments made about a professor on a social networking site.
6. A graduate was denied a teaching degree because of questionable behavior discovered on a social networking site.
7. A dental student was placed on probation, required to perform 100 hours of community service, and required to publicly apologize to his class for inappropriate blog posts about fellow students and professors.”

Best Practices for a Successful Social Media Presence

Modified from Vanderbilt University Social Media Handbook, available at:

Be respectful.
Anything you post in your role as a HSOP employee/faculty member or student reflects on the institution. Be professional and respectful at all times on your social media site. Do not engage in arguments or extensive debates with naysayers on your site.

Be transparent.
Make it clear that you are blogging / tweeting / Facebooking, etc. in your role as a staff/faculty member or student pharmacist for AU Harrison School of Pharmacy.

Listen.
Being a consumer of social media is essential to your ability to be a successful producer of social media content. “Listen” to online conversations on your preferred tools – be they blogs, Twitter, Facebook or
anything else – to maintain a clear and current understanding of what is relevant and of interest to the community.

**Be active.**
Social media presences require diligent care and feeding. These sites should be checked on at least a few minutes each day, and fresh content should be posted several times a week. Your site is only as interesting as your last post – if that post is several months old, visitors will consider it mothballed.

**Be timely.**
One of the great benefits of social media is the ability to share information almost instantly with a global audience. This timeliness is also one of the expectations of that audience. Be prepared to move quickly in response to new developments, announcements, or emergencies with relevant information on your site. A short amount of accurate information delivered at the time of need can sometimes be more valuable than a full report delivered well after the issue has passed.

**Remember, everything you do online can and will live forever.**
Think before you post, remembering that anything you share within social media, even within a closed network, is not private. It can and will be shared, stored and spread globally. Don’t post anything online you wouldn’t feel comfortable seeing on the front page of the newspaper, or on the CNN Web site.

### Additional Policies
Social media content and usage is also bound by the policies outlined in the Harrison School of Pharmacy Policies and Procedures Manual, as well as beholden to the policies and procedures of Auburn University. For additional guidance on HSOP policies, standards for professional conduct, and privacy information, including the Family Educational Rights and Privacy Act (FERPA) and Health Insurance Portability and Accountability Act (HIPAA), consult the HSOP Policies and Procedures Manual at: [http://pharmacy.auburn.edu/policies_procedures_reports/p_p/full_pp_manual.pdf](http://pharmacy.auburn.edu/policies_procedures_reports/p_p/full_pp_manual.pdf).

### Questions and Reporting Problems:
Problems, concerns or violations regarding the use of any social media sites which bear the Harrison School of Pharmacy name should be reported immediately to the Dean’s Office.
Graduate Student Request To Be Absent
(Please submit at least seven days in advance)

Graduate Student’s Name (Print): _____________________

Department: ______

Student Appointment Type: GPA  GRA  Not Applicable

Reason for Absence:

_____ Personal illness/injury

_____ Death in family

_____ Other (explain): ______________________________

Dates of Requested Absence:

From ____________ AM/PM to ____________________________________

Month   Date   Year

Through ________ AM/PM to ____________________________________

Month   Date   Year

______________________________________________________   ____________________________
Graduate Student Signature                                             Date

______________________________________________________   ____________________________
Faculty Advisor Signature                                              Date

______________________________________________________   ____________________________
Graduate Assistant Supervisor Signature (IF APPLICABLE)               Date

______________________________________________________   ____________________________
Department Head Signature                                             Date

______________________________________________________   ____________________________
Associate Dean for Research and Graduate Programs Signature           Date
VIII. School Committees

A. General Guidelines
School Committees are comprised of faculty, students, alumni, and staff. The Executive Committee evaluates each employee’s workload and recommends their placement on appropriate committees to the Dean. Annual goals for each committee are set, based on the School’s Strategic Plan, critical issues, progress by the previous year’s committee, and recommendations from the previous year’s committee. Ad Hoc committees are formed on an as-needed basis. The purpose of each standing committee is as follows:

B. Admissions
The Committee on Admissions is responsible for overseeing the selection of applicants for admission to the HSOP. The committee operates under academic standards that are approved by the faculty. Recommendations from the Committee are forwarded to the Associate Dean for Academic and Student Affairs and the Dean for approval and implementation.

C. Academic Requirements and Professionalism
The Committee on Academic Requirement and Professionalism (CARP) is responsible for overseeing the academic and professionalism standards required for progression of student pharmacists in the program. CARP also is responsible for program remediation. The Committee operates under academic standards that are approved by the faculty. Recommendations from the committee are forwarded to the Associate Dean for Academic and Student Affairs and the Dean for approval and implementation.

D. Professional Education Committees (PEC)
The Professional Education Committee (PEC) represents intent to integrate all aspects of curriculum development and improvement by capturing the synergism of groups of individuals working on similar tasks. It is anticipated that through the development of subcommittees and narrowing the focus of their work and deliberateness, quality and timeliness of work can be enhanced. The PEC I – IV sub-committees, with assistance from OTLA, must provide feedback to faculty and respective Department Heads regarding how to improve or modify course content, teaching methods (i.e., ensuring that the educational process involves student-centered active learning) and recommend assessment measures as part of the process.

Steering Committee – The Steering Committee is the oversight body that oversees the work of the Professional Education Sub-Committees and brings final curricular recommendations to the faculty for consideration.

PEC I – Maintains a continuous curricular improvement process for the following integrated sequences: PCS, Law/Ethics, Drug Lit, PP DME I/II, CAPP of the curriculum, in total, based on assessments of
established and approved ability-based outcomes. OTLA will provide data from individual courses and annual assessments from Academic and Student Affairs for use in the process.

PEC II – Maintain a continuous curricular improvement process for the following course sequences DAD I-IV, IP I and II, and CAPP of the curriculum, in total, based on assessments of established and approved ability-based outcomes. OTLA will provide data from individual courses and annual assessments from Academic and Student Affairs for use in the process.

PEC III – This committee is responsible for the curricular improvement of experiential educational courses. The committee serves dual purposes: 1) oversight of the academic issues related to the curriculum, 2) advisory to OEL re: PPE and APE operations.

PEC IV – This committee specifically addresses issues related to outreach education. Outreach education is the responsibility of the faculty as is the outreach curriculum. All Post Graduate Education offerings must be presented to the Steering Committee and subsequently approved by the faculty.

E. Strategic Planning
This committee reviews the annual Productivity/Quality/Assessment Data of the School and makes recommendations for improvement in our performance to be included in the Strategic Plan. They prepare the annual Strategic Plan and Strategic Plan Progress Report based on the current and projected environment and through the HSOP faculty strategic planning retreat.

F. Faculty and Student Honors, Awards and Scholarship
This committee nominates/selects individuals for student awards and scholarships, and updates and revises the description of the routine awards that are presented by HSOP to be posted on the web. They identify extramural scholarships/grants that are available to student pharmacists and place links on the web site, and consistently monitor the distribution of student scholarship funds to ensure maximum utilization and provide necessary documentation to the Dean’s office upon request. They also make recommendations to the IT advisory committee for the purpose of maintaining the web site providing information to prospective and current students regarding scholarships, their history (e.g. information about donors), criteria and application information. In addition, routine student competitions for scholarships offered by external sponsors are included.

G. Office of Information Technology Advisory Group
This committee provides information to the Office of Information Technology (OIT) concerning faculty and student needs relating to informational technology, effectiveness of existing technology-based programs, and recommends maximum utilization of HSOP technology capabilities in the traditional and non-traditional, graduate education and continuing education efforts as well as maximization of off-site faculty time. They review on-going technology developments, which could be utilized to increase the effectiveness of School’s educational programs and communication, and recommend faculty development programs which would facilitate optimal utilization of the HSOP technological resources and maximize utilization of HSOP technology capabilities in the traditional and non-traditional, graduate education and continuing education efforts as well as maximization of off-site faculty time. They review the content and organization of information contained on the HSOP web site. The committee serves as the clearinghouse for all information that is added and or deleted from the site. They also review and recommend necessary security and privacy policies related to data collection, management, storage, and
distribution.

**H. Honor Board**
This committee performs the duties and responsibilities of The Board of Ethical and Professional Conduct as established in the Code of Ethical and Professional Conduct. They also revise the Code of Ethical and Professional Conduct to reflect appropriate professional attitudes and behaviors consistent with professional standards (Professional Standards of Practice, Oath of Student Pharmacists, Curricular Outcomes, Covenant Between Faculty and Students, and Educational Philosophy).

**I. Clinical Services Advisory Committee**
This committee will serve in an advisory capacity for AUPCC (AUPCC-Clinic, and AUPCC-Pharmacies). The goal of these operations is to decrease the health care expenditures of the University, improve patient outcomes and generate a revenue source for the School.

**J. Health Services Board**
Serves in an advisory capacity regarding the operation of health services and provision of clinical activities provided by the School of Pharmacy.

**K. Executive Committee**
This committee facilitates multi-directional communication between faculty, School and University Administration, assists in establishing the vision and direction for the School, and participates in establishment of policy. They also assist in developing and maintaining quality teaching, research, outreach, faculty development and other special programs within the School. They also provide assistance in budgetary issues.

**L. Office of Teaching, Learning, and Assessment (OTLA) Advisory Committee**
This committee review and make recommendations to improve the overall faculty development programs, and designs on-going faculty development programs. They make recommendations for programming themes that include consideration of topics in education, research, and professional practice. The committee is encouraged to submit their recommendations to the Associate Dean for Academic and Student Affairs in a timely manner to facilitate scheduling and acquisition of funding through the Executive Committee.

**M. Clinical Software Committee**
This committee assists the end users of clinical software to improve HSOP program functionality. Members determine feasibility and desirability of recommendations for improvements made by end users. The committee maintains point of contact with software developers and guides future software development collaboration.

**N. Graduate Programs**
This committee evaluates the curriculum and admissions policies of the graduate program and makes recommendations regarding program improvements. The committee is also responsible for nominating/selecting recipients of awards and scholarships and coordinating recognition with the Faculty Student Honors and Awards Committee.