### Action Plan in Response to the Academic Program Review of the School of Pharmacy

#### Introduction

The School of Pharmacy (SOP) supports strongly the majority of the recommendations of the APR team and has begun to implement strategies to address them. Several of the recommendations do not have financial, human resource or infrastructure implications. However the recommendations regarding the move to a new entry level qualification will require financial support to adequately address the operational and human resources needed. Additionally, sufficient and appropriate space will be required. As we move forward on this specific recommendation a comprehensive plan will be developed.

### **Action and Status of Recommendations**

Detailed below is the School's response to the APR recommendations.

Recommendation 1: Explore other ways by which the SOP is able to align with the strategic plans and frameworks of the University (research, teaching-learning and engagement).

Action and Status: The School is currently in the process of updating its Strategic Plan (SP). Faculty and staff made a conscious decision not to embark on a comprehensive SP process and develop a new plan at this time as they thought it was important to involve a new Dean in that process. Nonetheless as the plan is reviewed we will take into consideration the current university-wide strategic plans/frameworks and not only align our plan with those but to enhance it where possible.

Recommendation 2: Review the Strategic Planning Process including the roles of the Strategic Planning Committee (SPC) and the Curriculum Planning and Development Committee (CPDC).

Action and Status: There appears to be some confusion on the part of the APR review team with respect to the role of the SPC and the CPDC. There is no intention for the SPC to act on the goals and objectives identified but for the respective committees or faculty personnel to complete the work. The SP sets the course on a grander scale, it doesn't micromanage other Committees. In the case of the example cited in the review document regarding "further skills development", collectively we have deemed the most appropriate group to be the skills faculty. To suggest the CPDC would do that work would not be appropriate. It is our opinion that the roles of the SPC and the CPDC are clearly defined and work well for the School.

Recommendation 3: Update the Plan that is currently in place and consider developing more specific activities to focus on some of the major changes taking place with legislative changes in the province, pharmacy education in Canada, and the need to build capacity in research.

Action and Status: As noted in Recommendation 1 the School is undertaking a review of the current SP. With the current Dean's term ending in December 2013, faculty members thought it would be more appropriate to delay a major revision of the SP to allow for the engagement of our new Dean in the process of developing a long term plan and setting the future direction of the School. The SP is reviewed regularly and although a major revision was postponed, faculty

recognized that a number of significant changes within the profession at a national level (e.g. changes to entry -to -practice degree requirements and an expanding scope of practice for pharmacists including prescribing, treatment of minor ailments, and the administration of vaccinations) would have significant impact upon the program and were not reflected in the current SP. At the time of the APR site visit the SPC was in the midst of updating the current plan to reflect these changes but unfortunately the work had not been completed by the time the site visit took place. Since the APR was conducted a mini-retreat with faculty and staff was held in mid-May to review the SP and begin updating. A second mini-retreat to complete the review will take place at the end of August. During this process the current and pending legislative changes and enhanced scope of practice will be addressed. Additionally, our desire to build capacity in research will be explored and incorporated into the plan. It is important to note that even though these changes had not yet been reflected in the SP, the School has been active in planning their implementation. For example components of the curriculum have already been revised to prepare graduates for an advanced scope of practice including immunization training as well as prescribing for minor ailments. Additionally the School has received approval to hire a Director to oversee the development and implementation of a new entry-to-practice degree program – PharmD.

# **Recommendation 4:** Explore the Aboriginal designated seats program to recruit undergraduate students from this group.

Action and Status: This matter has been reviewed and discussed on several occasions and we have made a conscious decision **not** to designate seats at this time. Students of aboriginal heritage currently may declare their status on the admission application. Students are advised they may request special consideration if they feel they have been disadvantaged in anyway in meeting the admission requirements of the School, and are encouraged to provide a written statement or explanation to the chair of the Admissions committee to supplement the committee's consideration of their application. Despite receiving several applications each year from students who self-declare their aboriginal heritage, it is extremely rare that a student will opt to request special consideration for admission. Our experience has been that most aboriginal students obtain entry to the program on their own merit in competition with other students. We feel that the designation of specific seats may give the impression that students were successful in entering the program because of their aboriginal status **not** their academic accomplishments. Based on some discussions it is evident students support this position. We are mindful of ensuring access of aboriginal students to our program but we do not intend to review our practice at this time.

Recommendation 5: Create a permanent position or at least a term appointment sufficient to ensure that the curriculum mapping work can continue and create the foundation for a solid ELPD degree program.

Action and Status: We strongly support and appreciate this recommendation. It will not be possible to meet the accreditation requirements for program evaluation without a dedicated individual with an expertise in curriculum assessment. We will submit a request to the Provost and VPA once we have developed a position description and determined the best model (i.e. staff versus faculty) for such a position.

Recommendation 6: In the planning that will be required for the new ELPD program explore the inclusion of greater interprofessional education for areas of the curriculum such as professionalism, ethics, and health care systems.

Action and Status: MUN is a leader in interprofessional education (IPE) and the School requires its students to complete several IPE learning modules. The concept of professionalism within a team is addressed in a first year IPE module (Professionalism in Interprofessional Teamwork) which pharmacy students complete with nursing and medical students. While the review team made this recommendation, it needs to be noted that our students currently have more structured IPE activities than any other pharmacy students in the country. The Centre for Collaborative Health Professional Education (CCHPE) is always exploring new opportunities for IPE and the School engages actively in these where possible. As we move to ELPD we will incorporate the current learning modules and other IPE activities and we will continue our involvement as much as possible within the new curriculum. We need to ensure a balance between IPE activities and other curriculum demands. The School and its faculty are committed to IPE.

**Recommendation 7:** Revisit preparation for preceptors and their identified needs and how to assist them in meeting these needs, e.g., conflict resolution and giving feedback to students.

Action and Status: This is a reasonable recommendation but it can be difficult for preceptors to access the programs because of their remote locations, work schedules, etc. We have explored offering educational programs on-line but have faced funding challenges with this model. We will explore generic on-line learning modules which may be beneficial to preceptors and we will continue to offer live sessions as demand warrants. We continue to be a part of a national group regarding pharmacy experiential training where the development of national tools for preceptor training is being explored.

We recognize that as the School embarks upon a new ELPD curriculum, the preceptor pool will undoubtedly expand and as part of this process the School will explore ways to educate preceptors with respect to expectations, student assessment, evaluation and feedback.

Recommendation 8: Prepare an academic and resource plan to ensure that recent and proposed scope of practice changes are included in the current undergraduate curriculum and involve the necessary stakeholders both within and outside the University in this planning.

Action and Status: We agree with this recommendation but think it is important to recognize what has been done already. The faculty and in particular the faculty who are responsible for the Pharmacy Skills stream of the curriculum has always acted quickly to respond when practice changes have occurred and to incorporate new material/skills as necessary. Since our entire pharmacy practice faculty engage in clinical practice, they are well aware of the changing practice landscape and respond accordingly in reflecting these changes in their teaching and the curriculum. A learning module for immunization has been developed in the past few months and will be offered to students in the 2013-14 academic year. This module is in response to legislated changes in other provinces and is in anticipation of this practice in NL. As another example of our responsiveness, because of the active involvement in practice and connections with regulatory and advocacy

bodies, by the time documentation forms were approved for the newly mandated medication review process a related skills lab for students and a continuing education session for practicing pharmacists had been developed and were delivered the following week. Faculty have also started working on the development of a teaching plan relating to prescribing for minor ailments, another enhanced scope of practice. In such development the appropriate stakeholders are always engaged. We are not sure that developing an academic plan is the best approach in this matter as we respond as practice dictates. A plan could pre-date or lag legislative changes. Our faculty is small enough to be able to work collaboratively to respond to such changes.

**Recommendation 9:** Prepare an academic and resource plan to convert the current BScPhm to an ELPD degree program, including a transition plan for some of the existing classes of students.

Action and Status: A request to recruit an ELPD program director has been submitted to the Provost and VPA and approved in principle. A position description has been developed and different models are being explored (i.e. pharmacist versus curriculum specialist, staff versus faculty position). This individual will be responsible for overseeing the development of the curriculum, a comprehensive program evaluation strategy, a resource plan (i.e. human, financial and infrastructure) and identifying and enhancing experiential learning sites.

A transition plan will be important, but our priority at this time will be to address the immediate need to move to ELPD by 2020. As we proceed with our planning we will be mindful of the need to have a transition/bridging program in place.

Recommendation 10: Within the academic planning in recommendations 8 and 9 consider on-line learning approaches and increased use of technology as a means of enhancing student self-directed learning and more optimal use of resources (space and faculty).

Action and Status: We continue to expand our use of technologies (e.g. clickers to assess pre and post lecture knowledge) including on-line learning (e.g. herbals on-line modules, self-directed continuing education on-line models, use of D2L for content, submitting assignments, completing evaluations and practice quizzes). Developing, maintaining and updating on-line still takes a significant amount of time especially when the technology undergoes significant updates or changes. It is our intention to continue with this approach and to expand as opportunities arise. Until a curriculum plan is developed we will not know the specific areas where technology could be incorporated and used most effectively.

Recommendation 11: In particular explore a variety of means of obtaining experiential learning experiences for students that will meet academic and professional standards as well as licensing requirements and engage stakeholders, in particular Regional Directors of Pharmacy, in this exploration so that concerns of this group can be addressed.

Action and Status: As part of the development of the new ELPD curriculum we will explore different experiential learning opportunities. As was discussed during the visit, approximately 10 to 12 years ago the School utilized a variety of non-direct patient care experiential learning sites but we were criticized for this at the time by the accrediting body. While we believe these

opportunities develop a richer, more broadly educated practitioner we will be cautious in our approach given our previous experience. As has been our practice, stakeholder engagement will be critical for our success. Our experience with engagement of the Directors of Pharmacy of the RHAs has been that, while supportive in offering experiential learning, sites have not been well developed clinically and they frequently encounter financial and staffing challenges which limit our opportunity for placements.

Appropriate experiential placements will be critical for the success of the program and the ELPD Program Director will be responsible for identifying and engaging potential clinical sites not only in the RHAs but within community pharmacy practice. We will consider partnering with community pharmacies to assist with the development of advanced care practice sites which will be utilized in the program.

#### **GRADUATE PROGRAMS**

Recommendation 12: Consider reducing the number of areas of study within the graduate programs and instead focus on building capacity and a critical mass of students in a couple core areas of study.

Action and Status: This matter will be referred to the Graduate Studies and Research Committee for consideration. While this is a sensible suggestion from the perspective of developing a critical mass of students and expertise, faculty members need graduate students to sustain their research programs. Without their research they will be challenged to meet promotion and tenure requirements. If research areas are restricted, we will disadvantage certain faculty members from expanding or exploring viable research.

Consideration will be given to developing an SOP research strategy which will have implications for the graduate program.

Recommendation 13: Develop a SOP-specific orientation program for the graduate students and explore other ways they can be better integrated into and know more faculty within the SOP.

Action and Status: An orientation program for new graduate students has been implemented since Fall 2010. Newly registered graduate students take part in a pharmacy related orientation held by the Associate Dean of GS&R, the administrative secretary who supports Graduate Studies and the grants facilitator during the first week of September each year. During this session, various aspects of the graduate program are discussed including course work requirements, courses offered internally and externally, the supervisory committee and its role/responsibilities toward students and vice versa, teaching assistantships, scholarships/fellowships, PHIA, areas of activities of different faculty members, etc..

#### **FACULTY RESEARCH AND SCHOLARSHIP**

Recommendation 14: Make the Grants Facilitator position permanent to give stability to that position and allow the position to develop to its fullest potential.

Action and Status: A request has been submitted to the Provost and VPA for the position to be made permanent. He has expressed concern that we have requested a full time position and has asked that we explore a shared position with another faculty. To date the only half time position of which we are aware is in Business and the fit between the two disciplines would not be suitable for a shared position. The benefit of a full time contractual position which we have had in place for 18 months has been evidenced by the dramatic increase in both applications and success in grants competitions. It is also important to note that our grants facilitator provides support to the entire faculty in the SOP, which represent very diverse areas of research expertise (pharmaceutical sciences, pharmacy practice and social/administrative pharmacy). To expect one individual to further expand her repertoire could significantly reduce her usefulness to the faculty who are availing of her expertise and support quite heavily now. We are extremely concerned with the suggestion of sharing this individual with another unit and do not support this position.

**Recommendation 15:** Establish a formalized research mentorship program for junior faculty members.

Action and Status: This matter will be referred to the Graduate Studies and Research Committee for consideration. This is an appropriate recommendation but mentorship has personal elements which may not benefit from assignment of individuals to new faculty. Nonetheless a program which provides guidance to mentors and support for mentees is warranted.

Recommendation 16: The pharmacy practice and social-administrative faculty meet with the Directors of Pharmacy in the Regional Health Boards and with the provincial pharmacy association to discuss research/evaluation and funding opportunities around demonstrating the value and return on investment of the newly expanded scope of practice of pharmacists.

Action and Status: We may consider this recommendation. Unfortunately to date, the pharmacy departments in the regional health boards and the Pharmacists' Association of NL (PANL) have not had the capacity to assist us with such endeavours. The RHAs are struggling to establish clinical programs and PANL is preoccupied with the many pharmacy reimbursement, generic pricing issues etc.. However it should be noted that clinical faculty do not have a shortage of research opportunities – they all have abundant opportunities through their clinical practices and professional affiliations, but the issue is the lack of support, time and resources to carry out research on a consistent basis throughout the academic year due to the high demands for clinical student supervision during the winter semester. Seeking more research opportunities/collaborations without the necessary supports in place will only burden them more.

Recommendation 17: We suggest the SOP explore the utility of developing promotion and tenure criteria specific to the faculty activities within Pharmacy and to consider the different types of scholarship valued and produced by nature of the required work in the discipline.

Action and Status: Two faculty members have already taken a leadership role to explore the potential and interest in developing specific criteria for the pharmacy practice faculty.

## UNIVERSITY SUPPORT Resources

Recommendation 18: There needs to be a concentrated effort on the part of the University to develop/obtain sufficient and quality space for the SOP to fulfill the mandates of teaching and research. This is an urgent matter.

Action and Status: The matter of adequacy of space has been repeatedly addressed with the senior administration for several years now but without success. Interim measures which will result with the repatriation of faculty from Tiffany Court will continue to limit the School with respect to its development. Current space affects pedagogical approaches, student life, research capacity and productivity. The deficiencies of the School's infrastructure have been identified repeatedly in previous reviews of the School. It is reasonable to assume that if a concrete plan for new space is not in place by the next accreditation review (Fall 2105) the School will not be fully accredited.

Recommendation 19: In the shorter term, the University ought to consider any of the space that will be vacated when Medicine moves into their new building and allocate as much of that space to the SOP so as to improve some of the negative consequences of their current situation.

Action and Status: We understand this is being considered by the Provost and VPA. Care must also be taken to ensure that any future moves do not result in further fractioning of the faculty/staff and students, for example, by distributing faculty over a large area separating them even more and further compromising opportunities for collaboration. Additionally we must ensure that the current space functionality provided at Tiffany Court continues. A move to repatriate faculty must not create further negative consequences for the unit.

#### **Strategic Initiatives Grant**

Recommendation 20: Release Strategic Initiative Funds to put in place the necessary resources for planning for inclusion of the required content in the undergraduate program necessitated by the legislated expanded role for pharmacists and the move to the ELPD degree, as well as, any additional resources to implement the plans.

Action and Status: As noted earlier, approval in principle has been given to recruit a Program Director for ELPD and we anticipate SI funds will be utilized although this has not been discussed. A curriculum specialist to develop a comprehensive curriculum development strategy will also be required and will have to be funded. As we proceed with the development, funding needs and the appropriateness of the use of SI funds will be explored.

#### **SUCCESSION PLANNING**

Recommendation 21: Put in place a search process for a Dean of Pharmacy as soon as possible to effect a smooth transition in this position.

Action and Status: In progress, although it is unlikely that a new Dean will be identified by the end of the term of the incumbent.

**Recommendation 22:** Begin the process of consulting for the positions of the Associate Deans for Undergraduate and Graduate Programs and Research.

Action and Status: The recommendation of two new Associate Deans has been received and the Dean is in discussions with the recommended candidates.