A Novel Co-Curricular Approach to Addressing ACPE Standards 3 and 4

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The Gregory School of Pharmacy developed a co-curricular program to augment didactic and experiential learning and meet the requirements of the Accreditation Council for Pharmacy Education (ACPE) standards. The program was designed to facilitate student learning, provide feedback, document achievement of outcomes and track student progression. The Assistant Dean for Students along with faculty and student members of the School’s Student Affairs committee reviewed the 2016 ACPE standards and developed the co-curriculum to address the key elements of Standards 3 and 4. The goals of the program include professional development and engagement, community service, and spiritual development. The co-curriculum was developed as a longitudinal zero credit hour course series, comprised of 8 courses occurring every semester of the four-year program. Co-curriculum outcomes were developed according to ACPE standards 3.4, 4.1, 4.2, 4.3, and 4.4. along with a total of nine co-curricular requirements related to professional development and engagement, community service, and spiritual development. An Individualized Professional Development Plan (IPDP) was developed to document a student’s developmental needs and desires in order to facilitate achievement of targeted short and long-term professional goals. Using the IPDP, students complete a biannual self-assessment on their skills and abilities related to leadership, professional development, communication, and career planning. Outcomes are measured via student reflections, student surveys, and faculty advisor feedback. A learning management system is utilized to track completion of co-curricular requirements. A comprehensive co-curriculum was developed to enhance curricular learning and address ACPE Standards 3 and 4. Initial evaluation of the co-curriculum has revealed positive impacts on student development along with areas for improvement.

A PharmD Pathway for the Next Generation Pharmacy-Student

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The student-pipeline landscape is evolving, and next generation learners are integrating information from virtual and firsthand experiences. Growing up as genuine digital citizens, potential student cohorts entering the pharmacy academic environment will be looking to engage in learning modalities that complement their development and acquisition of knowledge. As part of a campus-wide initiative to identify new program opportunities, St. John Fisher College (SJFC) and the Wegmans School of Pharmacy (WSoP) evaluated the need to develop an online pathway for the PharmD program. WSoP identified an online pathway as a new approach that capitalized on the interests and abilities of faculty and filled an unmet need in the marketplace. Grounded in the sciences, a clinically oriented hybrid PharmD pathway provides an experiential, student-centered approach to education. Simultaneously, it utilizes high levels of technology for online coursework, coupled with clinical rotations and immersion experiences. SJFC established a collaborative partnership with online provider, 2U, Inc., to support the WSoP in development, implementation and ongoing delivery of the online pathway for the PharmD program. Partnership with 2U provides the required infrastructure/support of advanced technology to deliver the rigorous curriculum and ensure an equivalent online PharmD pathway. Representatives from the SJFC offices of admissions, registrar, financial aid, marketing, technology and library have engaged in meetings with 2U staff to prepare for this new pathway. At the WSoP, smaller workgroups focused on admissions, curriculum, experiential educations, IPE and assessment have started plans for online design and delivery of the respective areas in the new pathway. Through these collective efforts, we believe our Fisher PharmD online pathway will diversify the
recruitment pipeline and engage the next generation of pharmacists.

Adaptable, Practice and Team-Ready Graduates: The Goal of a Transformative Curriculum
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Objective: Describe key aspects of the process and design of a transformative curriculum that aims to prepare graduates who are practice and team-ready plus adaptable to pharmacy practice challenges. Background and Process: In 2016, Samford-McWhorter faculty recognized a need to revamp the current Doctor of Pharmacy curriculum to better prepare graduates to advance the pharmacy profession and adapt to the dynamic healthcare environment. A faculty-led Curricular Transformation Task Force organized curricular retreats, implemented workgroups, and designed a broad curricular framework. The Assessment Committee developed program competencies using academy-endorsed documents (eg, CAPE, EPAs, IPEC, ACPE standards). The Curriculum Committee created course names and key content, reviewed new syllabi, and formulated a remediation plan and grading scale. The proposed curriculum was reviewed by key external stakeholders plus an external curricular consultant. In order to produce graduates who are practice and team-ready, faculty agreed to incorporate key aspects that include: early immersion to APPEs (begin APPEs in P3 spring); a program of content reinforcement— not using a one-and-done teaching model (via SPRINT weeks); a unique model for transition to practice at the end of the P4 year (required advanced coursework after APPEs); manageable number of credit hours per semester (16-18); and an ongoing wellness program within all 4 years. In addition, the Curriculum and Assessment Committees developed a model of quality assurance in order to monitor the curriculum as each year is implemented. After many hours of collaborations plus multiple debates, retreats, meetings, and discussions the faculty approved a new curriculum consisting of 146 credit hours. The incoming students beginning in the fall 2020 semester will embark on this new curriculum advancing pharmacy education and the profession.

Applying the Recruitment Funnel to Maximize Pharmacy School Enrollment
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Despite the nationwide decline in pharmacy applications that has impacted admissions numbers, University of Louisiana Monroe (ULM) College of Pharmacy (COP) Doctor of Pharmacy (PharmD) program has experienced continued success in recruitment and retention of outstanding pharmacy students. The ULM COP’s Recruitment Funnel has created unique programs targeting students of different ages and stages of the educational process. Our programs attempt to provide prospective students with opportunities to learn about the diversity of pharmacy careers, the pre-pharmacy and professional curricula, information about the application and interview process, and experience life as a pharmacy student and a pharmacist. For prospective students, the COP pairs classroom presentations with hands-on activities about life as a pharmacist for middle school students, then engages them in our Future Pharmacy Club to exchange ideas, create relationships, and ask questions. Daily Facebook posts are made to stimulate continued interest. High school students are invited to ULM to explore “a day in the life of a Pharmacist” through programs such as PharmFUTURE, ULM President’s Academy, AHEC of a Summer, and Browse on the Bayou. Students participating in these events experience hands-on activities designed to give an overview of many areas of the pharmacy profession. Once students become potential applicants, we encourage early commitment to the ULM COP through early or provisional entry programs and articulation agreements with other Louisiana institutions. We provide continued support to advisors at our feeder institutions and hold an on-campus workshop for advisors to meet and learn from each other. As applicants, we provide ongoing support and mentoring for students in the pre-professional courses and step-by-step directions on Applicant Day to assist them in applying to our professional program.

Approaches to Professional Identity Formation with First-Year Student Pharmacists to Develop the Pharmacist Provider
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The University of Washington School of Pharmacy’s new PharmD curriculum, launched in 2019, features several components intentionally designed to foster pharmacist provider professional identity formation in student pharmacists. This work begins in the first year with focused effort in two coordinated and complementary course series, Foundations of Being a Pharmacist (FBP) and Pharmacists Provider Series (PPS), as well as
the co-curricular Professional Development Program (PDP). In FBP, students are introduced to what it means to be a pharmacist provider and have a patient care practice. Students apply the Pharmacists’ Patient Care Process including learning about fundamental therapeutic options through a longitudinal patient care assignment. Students’ self-awareness, personal and professional development are enriched through personal style assessments, interactive workshops on values, leadership, and teamwork, and guided reflections. The PPS includes provider-readiness courses with hands-on skill development and pharmacist provider experiences with experiential learning at practice sites through Wednesdays-in-Practice. The series standardizes and personalizes curricula by using Entrustable Practice Activities as threads where students must meet a defined level of competence in each domain. Preceptor-led debriefs based on performance and key take-aways for the day encourage reflective practice and self-awareness. Students receive personalized guidance from an assigned faculty mentor and discuss learning across a variety of practice settings with peers during on-campus sessions. The PDP engages students in experiences outside the classroom that help develop key personal and professional attributes (CAPE Domains 3 and 4). Students tailor participation based on individual interest and developmental goals with academic advisors providing feedback at the end of the year. Students are guided through the first two quarters by PY2 and PY3 peer mentors and transition to practitioner mentors in spring.

Beyond the White Coat and Professionalism: Engendering Professional Identity Formation in Student Pharmacists

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On the journey to becoming a pharmacist, student pharmacists undergo a gradual yet continual transformative process of professionalization, known as Professional Identity Formation (PIF). Along that journey, students are shaped by professional opportunities and encounters, both planned and serendipitous, which result in professional knowledge, skills, abilities, self-awareness, empathy, and leadership development growth. These opportunities present themselves to students via the didactic and experiential curriculum and co-curriculum. They are shaped by encounters with faculty/staff, advisors/mentors, peer/ upper class students, preceptors/workplace personnel, and alumna/professional role models. At our institution, to date, students are introduced to the topics of PIF, Continuous Professional Development, Self-directed Lifelong Learning, and Reflective Practice during the required P1 Foundations of Pharmacy (FoP) course; students could delve deeper by electing one of these topics (among other choices) to write an in-depth graded Topic Exploration Paper within the FoP course. New with the incoming P1 class, we will be introducing PIF during P1 Orientation; we have elected to replace a longstanding 1-hour Professionalism Case Series with a PIF interactive workshop, hosted in small groups by members of the Pharmacy Experiential Education Committee PIF Task Force, which includes a P3 student; we will assess the effectiveness of this exercise in bringing forth student awareness to PIF. The PIF theme will subsequently be expanded within FoP with instruction and graded exercise on creation of a PIF Developmental Plan. A new elective on Pharmacy Professional Development immerses P2 students into PIF, critical reflection, career and professional writing skills development has also been offered this spring to 15 students. Lastly, a 30-minute Continuing Education Webinar on PIF was presented last fall to 50 preceptors and recorded for online participants.

Characteristics and Impact of an Early Clinical Experience on Student Learning About Ambulatory Care Practice

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Background: We describe an Introductory Pharmacy Practice Experience (IPPE) ambulatory care course that provides second-year student pharmacists (SP) exposure to ambulatory care pharmacy practice. Description: This 13-week course consists of classroom sessions that focus on relevant introductory ambulatory care topics and case presentations. SP earn 15.5 IPPE hours through clinic sessions in which they observe and participate in the Pharmacists’ Patient Care Process (PPCP). Methods: Data were collected from SP patient encounter documentation, course evaluations, and a survey administered before and after course completion. Survey questions evaluated SP confidence in knowledge of ambulatory care pharmacy, practice skills, and career interest in ambulatory care. Data were analyzed using descriptive statistics and Wilcoxon signed-rank test. Results: All 86 SP who completed the course documented patient encounters and submitted evaluations. 85 SP completed both the pre- and post-survey. Over half (58.1%) of SP completed their...
IPPE in a patient centered medical home, the rest rotated through specialty clinics. Most SP (43%) engaged in 4 to 6 patient encounters/week; most encounters involved patients with endocrine (54.1%), cardiovascular (16.7%), or hematologic/oncologic (11.9%) disorders. Median survey scores increased in seven of eight domains (p < 0.001): describing the role of the pharmacist on the ambulatory care team, caring for patients, identifying where to obtain information in the electronic health record, finding literature to contribute to patient care, describing the role of patient counseling, motivational interviewing, and how to apply the PPCP in ambulatory care. SP interest in a career in ambulatory care remained unchanged (p = 0.72). Conclusions: This ambulatory care IPPE provided considerable early exposure to the PPCP in ambulatory care and increased SP confidence in describing the pharmacist’s role in this setting.

Creating Curricular Threads Using Backwards Design

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Objective: To describe the utilization of backwards design in the development of curricular threads within a renewed curriculum. Introduction: One goal is to strategically connect and advance topics and skills throughout our renewed curriculum. This transformative goal has manifested into the creation of curricular threads that support indicators of success for our graduates and are congruent with outcomes and standards. These five themed threads are: Leadership and Teamwork, Professionalism, Practice Management, Population Health and Health Advocacy, and Health Information and Decision-Making. Our threads develop students into practice-ready pharmacists committed to evidence-based patient care and effective team collaboration. Methods: The curriculum committee undertook three innovative processes to incorporate the threads into the new curriculum. First, the threads were created utilizing the college’s indicators of success, published literature, initiatives from other schools, faculty input, graduate survey data, and alumni expertise. Second, using backwards design, a Leadership and Teamwork example was developed integrating components throughout P1-P4 courses. The example was mapped to accreditation standards and included objectives, activities, and assessments. Finally, faculty members were divided into teams for each thread and identified where their thread should be taught and reinforced throughout the curriculum. Teams placed colored stickers representing their thread on large posters displaying the curriculum. Based on anecdotal feedback, this workshop led to buy-in and empowered the faculty to partake in thread integration. Conclusion: The principles of backwards design can help to identify and integrate meaningful threads throughout a curriculum.

Curricular Transformation for the “Profession-ready” Pharmacy Student

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The University of Wyoming School of Pharmacy (UWSOP), in alignment with the 2016 ACPE Standards, continues to evolve its curriculum to prepare students who are advanced pharmacy practice experiences (APPE)-ready, practice-ready, and team-ready. This is accomplished through the modification of the standard curriculum as well as an expansion of unique opportunities available to students. By rearranging the content of our Therapeutics courses to align with a newly implemented Longitudinal Pharmacy Skills course, we now provide students consistent opportunities to practice skills that are discussed in didactic lectures and frequently used on rotations. Students in the P1, P2, and P3 years practice skills of SOAP note writing, patient counseling, drug information requests, literature evaluation, and physical assessment techniques. Within APPEs, students historically completed two faculty-led rotations in internal medicine and one faculty-led rotation in ambulatory care. We have adjusted this model to offer the choice of an advanced ambulatory care rotation instead of a second internal medicine rotation, which provides individualized learning experiences. New opportunities have also been developed to further equip our students to be advocates of diversity, inclusion, and social equity. These include internships at the Student Health Service Pharmacy and Downtown Clinic as well as select-participation in the UWSOP Leadership Academy and/or Health Equity Leadership Program, which exists in partnership with Howard University. These unique opportunities and the aforementioned curricular changes help ensure that all UWSOP students are confident professionals ready to practice in a dynamic, changing pharmacy profession landscape.

Design and Implementation of a Rural Health Initiative in Experiential Education

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Background: In rural areas, patients may have more contact with pharmacists than with primary care providers. However, availability and utilization of experiential PharmD training sites tends to be lower in rural areas, leaving an unmet healthcare and education need. The Pharmacy Advancement In Rural Experiential Development with the Palmetto Experiential Education Partnership (PAIRED with PEEP) was developed to increase experiential education opportunities and interprofessional collaboration in these counties through Student Career Development and Preceptor Development components. Methods: The Student Career Development component of the PAIRED with PEEP program begins with a student application process. Students assigned at least one externship in a targeted rural county are eligible to apply. Accepted applicants are required to identify and interview a rural healthcare provider career mentor, complete a health service plan specific to their rural area, and present their findings to their pharmacist preceptor at the conclusion of the rotation experience. The Preceptor Development Process aims to increase availability of externships in targeted rural counties through cultivating partnerships for new experiential sites and preceptors. Results: Deliverables of this project to date include a web-based toolkit for both students and preceptors. The Student Toolkit includes a guide for rural career mentor interviewing, a health service plan guidance document, a health service plan template, and a variety of rural healthcare resources. The Preceptor Toolkit includes similar documents and others that are tailored for preceptor use. Conclusions: A rural healthcare initiative can be successfully implemented through the avenue of experiential education.

Design of the Module-Related Skills Labs (MRSLs) – A Multilayered Approach to Enhance APPE Readiness

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The module-related skills labs (MRSLs) sequence is the core component of the new integrated PharmD curriculum at the University of Houston College of Pharmacy designed with spiral integration to optimize the development of students’ readiness for advanced pharmacy practice experiences (APPEs). The MRSLs sequence starts in the P2 fall and continues through the P3 spring semester. Each one- or two-credit hour MRSL course supports concurrent system-based integrated modules while enhancing content and skills gained in other concomitant and previous courses. The MRSLs activities are divided into three broad categories: content reinforcement activities (CRA), patient-care related activities and focused activities. The building block approach is utilized for increasing intensity and expectations over time. The emphasis of the CRA is to allow a learner to enhance foundational knowledge by engaging the content from various scenarios. The patient-care related activities focus on patient work-up and communications skills. Patient cases are designed purposefully to enhance the Pharmacist’s Patient Care Process. The focused activities are designed to allow dedicated time on selected areas such as navigation of clinical practice guidelines and primary literature. Deliverables for MRSLs include accurately completed assignments and performance on the objective structured clinical examinations (OSCE)-like assessments. This poster will include specific examples of MRSLs activities per category and the OSCE-like assessments based on the implementation of the first two semesters of MRSLs. Along the way we have implemented minor adjustments to ensure the intensity of the MRSLs is increasing at an appropriate rate for the students’ learning. To date we have observed that the students have had an increased opportunity to systematically apply knowledge in this integrated course sequence.

Developing a Community-Focused, University-Owned Community Pharmacy

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One issue facing pharmacy schools is the need for strong practice sites for students to attain their introductory and advanced pharmacy practice experiences (IPPE/APPE). Cedarville University School of Pharmacy (CUSOP) is located in a rural town; in 2017, the town’s only pharmacy was purchased by a larger corporation and subsequently closed, forcing citizens to drive elsewhere for prescriptions. CUSOP recognized the opportunity to provide an excellent student experience while addressing a need in the community by opening a teaching pharmacy with the intent to supply clinical and medication services. The university purchased a building in town to open an independent pharmacy through a Limited Liability Company (LLC) of which the University is the sole member. Establishing the entity as a separate LLC provided appropriate structure for organizational, tax and legal purposes. A partnership was made with the university’s healthcare plan; the pharmacy is a convenient
Developing Standout Pharmacy Residency Candidates Through a Pre-Residency Track (PRT)

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Objective: To prepare and train graduating PharmD students to be competitive residency candidates with a higher match rate compared to the national average of 62.1 percent. Methods: The program is a longitudinal training transitioning from a prerequisite didactic PRT elective in PharmD to APPE PRT rotation during their 2nd and 3rd year respectively. Students are required to apply upon completing a didactic PRT elective followed by an interview to be considered for an APPE PRT. Out of the didactic PRT requirement, two selected students per block will be enrolled into four 6-week long rotations consisting of three required and one elective respectively. Results: Upon completion of APPE PRT, the students will be resident-ready with an anticipated improved match rate of 75 percent compared with 62.1 percent nationwide. Conclusion: The PRT will help guide and support the student as early as possible. While on APPEs the students will expand their clinical knowledge, develop strong presentation, communication, and interprofessional team readiness skills ensuring its PharmD graduates to be ultimately making them a more competitive one of the most competitive residency candidates in the nation to compete for any post-graduate residency programs.

Development of an Accelerated Pharmacy Student Pathway with a Specialized NYC High School

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We aimed to create a pharmacy pathway program with a specialized science based high school in NYC. The program offered assured early pharmacy school admission to senior high performing students and the opportunity to complete the pharmacy program in five years instead of six. Students were exposed to expanded opportunities to complete pharmacy program pre-requisites while still attending high school. Pre-requisites were
completed in the form of advance placement classes, CollegeNow™ courses and College Level Exam Programs (CLEP). High school students completed the program during Junior and Senior years. Pharmacy school faculty collaborated with high school faculty to offer lectures within the high school. Students also prepared for the pharmacy technician exam. Upon completion graduating seniors were surveyed on program satisfaction. A total of 25 high school students completed the inaugural program. Among the students fifteen (60%) continued on to major in pharmacy. Ten enrolled into LIU Pharmacy (66%) and five enrolled into a neighboring university (34%). Additionally, 100% of students strongly agreed/agree they would recommend the program to other students. Upon program completion 52% noted they see themselves practicing in pharmacy in the future. High school students exposed to pharmacy pre-requisite courses early on went on to major in pharmacy. Students demonstrated high satisfaction with a pharmacy pathway program in high school. Developing relationships with science based high schools may provide a steady stream of high performing students into the pharmacy profession.

Development of Co-curricular Continuing Education and Microcredentialing Program to Enhance Professional Identity Formation and Career Readiness

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The ACPE CAPE Standards 2016 compel pharmacy schools to guide personal and professional development of students through implementation and assessment of a co-curricular program centered around six key affective domains. Meaningful capture of these competencies is challenging as the co-curriculum exists outside the core curriculum and students may develop these skills through varied pathways. Building off of a model proposed by Manchester University, the University of North Texas System College of Pharmacy designed a novel co-curricular framework with elements mirroring continuing education programs and incorporating optional university-level microcredentialing. Rather than a prescriptive co-curriculum menu, students may earn co-curricular education (CCE) credits by a-la-carte selection of approved activities in each affective domain. The co-curricular committee identified existing activities satisfying CCE requirements through a survey of the curriculum and existing student organizational activities. The committee then augmented existing offerings by creating additional opportunities to earn CCE. Activities are worth variable numbers of CCE units based on time commitment and level of complexity. Additionally, point values for some activities decrease as the student progresses through the curriculum and develop advanced skills (eg, CCE credit membership vs. leadership in a student organization vary by year). Realistic minimal thresholds were set to achieve required CCE in each domain based on pilot calculations by student members of the co-curricular committee. Additionally, students can earn pharmacy- and university-level microcredentialing badges based on earning additional CCE credit within one or more domains. Tracking of the CCE program will occur through the learning platform Canvas and the e-portfolio system Portfolium. This novel framework allows students to form their own unique professional identities through flexible co-curricular offerings and optional attainment of microcredentials.

Development of OSCEs to Facilitate an Advanced Pharmacy Practice Experiences (APPE) Readiness Program

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To better prepare students for practice, the School of Pharmacy – Boston, in Spring 2018, enhanced its APPE readiness program for future graduating classes. Based on GPAs and lower than acceptable PCOA scores, students were identified for participation in a weeklong APPE readiness program prior to the start of APPE rotations. The program consisted of a baseline written assessment, followed by daylong activities related to each core APPE rotation, culminating with an OSCE assessment. Formative feedback was afforded to all students. The positive student feedback from this program allowed the School to expand the program to the Class of 2021. At the end of the PY-3 year and prior to starting rotations, all students will be required to complete four OSCEs related to core APPE rotations and a physical assessment. Students are expected to meet a minimum professionalism threshold within each OSCE to successfully fulfill the competency. Students not meeting the minimum competency within each OSCE, will be required to attend a subsequent weeklong APPE readiness program. Although there are currently many opportunities throughout the curriculum for students to work collaboratively in small group settings to assess simulated patient case scenarios, these OSCEs will allow faculty to evaluate a student’s individual ability, a skill sometimes overlooked in a small group setting. Whereas previously other metrics (course grades, overall GPA, PCOA) were the determining factors used to predict APPE readiness, this program will facilitate individual faculty feedback for the student to reflect on as they transition to their advanced experiential rotations.

Digital Solutions to Analog Problems: Innovative Application of Computer Science in Pharmacy Education

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Embracing Promotion of Well-Being and Resilience (ePower) in Pharmacy

Stephanie Hunziker, Southern Illinois University Edwardsville, Kelly N. Gable, Southern Illinois University Edwardsville, Misty L. Gonzalez, Southern Illinois University Edwardsville, Jessica L. Kerr, Southern Illinois University Edwardsville, Jennifer R. Rosselli-Lynch, Southern Illinois University Edwardsville.

Background: As pharmacy schools continue to focus on well-being and resilience, Southern Illinois University Edwardsville (SIUE) School of Pharmacy (SOP) has prioritized development of wellness-based programs. Description: In 2019, SIUE SOP implemented a Mental Health and Wellness Task Force (MHWT) that includes sciences faculty, staff and student representatives from each class (P1 – P4). The MHWT meets monthly with a focus on improvement and promotion of student mental health wellness, resilience, and reduced burnout. Growth and Development: Successes of the MHWT include development of a SOP well-being and resilience webpage, and implementation of wellness driven initiatives. These initiatives include blocked time for monthly “Wellness Wednesday,” sessions for all students, faculty, and staff; a wellness program for APPE students; regularly scheduled counseling services onsite for student access within the SOP; an ePower calendar of local and university wellness events, and curricular implementation of Mental Health First Aid (MHFA) certification for all first-year pharmacy students. Preliminary data suggest a powerful impact from the incorporation of MHFA into the curriculum. Student assessment of their own confidence in their knowledge of where to seek out information about mental illness shifted from 70 to 99% at the completion of the training. Willingness to talk about mental health or seek treatment also improved. Future Directions: SIUE SOP continues to prioritize well-being and resilience within our pharmacy community. MHFA will be a required certification for all newly enrolled SOP students. We will begin assessing student-perceived stress, resilience, and burnout annually. SIUE SOP believes in development of a community that supports open conversation about mental health wellness, easy access to a variety of wellness resources, and programming focused on stress reduction and enhanced well-being.
individualized attention are highly valued at our institution and were integrated throughout the experience. The camp included relevant and innovative topics to engage Generation Z students. Example sessions included: an escape room that applied science-related knowledge, naloxone training, IV Prep: Glo Germ, technology demonstrations for advancements in diabetes care, and tips and tricks for surviving college. Keys to successful sessions were active engagement and methods of delivery that allowed the students to learn new skills with hands-on experience. Sixty percent of students that attended applied to the pre-pharmacy program and 73% of those students were accepted. There will be several changes for the upcoming camps in 2020. Given the high demand, Wilkes will be offering a second camp session. A session on academic planning will be incorporated to provide advice for students who are interested but may not qualify for the pre-pharmacy program. Upon obtaining IRB approval, results of a student survey from the June 2020 camp will be presented.

Engaging Stakeholders to Craft a Strategic Plan and Modernize a Curriculum
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Objective: Engage internal and external stakeholders utilizing various methods to guide strategic plan development, curricular modernization principles, and the self-study process. Methods: In fall 2018, individual committees were formed and empowered to lead the processes of strategic planning, self-study, and curricular modernization. After preliminary meetings, events were planned over the following two years to engage various stakeholders (students, faculty, staff, preceptors, alumni, community partners, and potential employers) in creative ways to ensure authentic feedback and input was gained for all three committees. Results: Over a two-year period, several faculty and staff retreats were conducted. Informational and process-related updates were delivered at monthly faculty/staff meetings. Focus groups were held with faculty, staff, students, preceptors, and career day employers using a TED talk video to stimulate discussion on the future of pharmacy practice. A Shark Tank competition was held with faculty and staff to present novel ideas regarding student recruitment, marketability, and faculty and staff support. A panel of local education experts and faculty from institutions with recent curricular revision presented at a retreat to discuss best practices. Curricular modernization work-groups were formed each semester and charged with development of evidence-based proposals. Regular stakeholder emails and listening sessions were initiated to provide updates and receive feedback on strategic plan, self-study, and curricular modernization progress. Conclusion: With multiple initiatives occurring concurrently, efficiency is key when engaging stakeholders during times of increased workload. Committee collaboration allows for a streamlined approach and increases inclusion and transparency for both internal and external stakeholders. Engaging a large, diverse group of stakeholders will have long-lasting benefits on the program, students, and alumni as we endeavor to meet present and future needs.

Enhancing Pharmacy Education Through Advancing Pharmacist Collaborative Care Models
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Introduction: The scope of pharmacists’ roles within our healthcare system is expanding. It is therefore crucial that schools of pharmacy adequately prepare Doctor of Pharmacy (PharmD) students to fulfill the continuously advancing role of pharmacists across healthcare settings. Faculty in the Division of Clinical Pharmacy at University of California San Diego Skaggs School of Pharmacy and Pharmaceutical Sciences (SSPPS) have established several successful innovative clinical practice models in varied settings, which in turn have allowed for enhanced educational opportunities for PharmD students. Summary: Clinical faculty at SSPPS have successfully developed and implemented three types of innovative pharmacist collaborative care models across healthcare settings: 1) pharmacist with physician oversight, 2) pharmacist-interprofessional teams, and 3) physician-pharmacist teams. Each clinical practice is funded by its respective health system and each faculty member operates under a collaborative practice agreement. These practice models encompass a wide breadth of clinical areas including diabetes, heart failure, medication therapy management, chronic kidney disease, oncology, pain and
Palliative care, solid organ transplant, transitions of care, family medicine, geriatrics, and psychiatry. These faculty-developed practice models have expanded opportunities for PharmD students to experience a variety of innovative clinical practices on interprofessional teams, notably via experiential education opportunities. These practice models have also allowed SSPPS clinical faculty to bring their diverse clinical expertise into didactic PharmD training and have provided students additional learning opportunities including clinical research. Conclusions: The variety of innovative clinical practice models implemented by clinical faculty at SSPPS has enhanced and diversified the education of PharmD students in didactic and experiential education, as well as clinical research, to provide students dynamic learning opportunities with which they can continue advancing the practice of pharmacy.

Enhancing Practice Readiness for Future Pharmacy Roles Through Continuous Curricular Improvement
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The mission of the Duquesne University School of Pharmacy is to educate and mentor students who advance the profession of pharmacy and pharmaceutical research to improve the health outcomes of patients and their communities. To accomplish this mission, the curriculum must be a dynamic document. Our school has been committed to preparing pharmacists for future roles prior to the 2016 ACPE requirement that programs prepare students who are practice-ready and team-ready. In 2010, the School embarked on its first major curricular revision since implementing the entry-level Doctor of Pharmacy Program in 1996 and made a commitment to a mandatory five-year cycle of curricular review and revision. Features of this 2010 revision included the implementation of a horizontally and vertically-integrated abilities-based laboratory experience in all three professional years that culminates in a capstone assessment and a continuous-professional development course series. Concentrations in acute care, pediatric pharmacotherapy, geriatrics, entrepreneurial pharmacy, management, research, health outcomes, community, and ambulatory care were enhanced to provide opportunities for specialization. Over 62% of graduates complete a concentration. Another feature of this 2010 revision was the inclusion of two required certificate programs, immunization and dyslipidemia management, to provide our graduates with practice-ready skills. In 2013-2014, a menu of certificates was offered: diabetes care, medication therapy management, tobacco cessation and pain management in addition to the required immunization. Certificate options were further expanded to include cardiovascular risk reduction, anticoagulation, asthma and point of care testing, bringing the total to eight. In 2018-2019, a required pharmacogenomics certificate was added. Currently our graduates complete five certificate-bearing courses as part of the required curriculum, thus enhancing practice readiness for future roles.

Equipping Student Pharmacists to Become Practice Leaders in Precision Medicine
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Harding University College of Pharmacy (HUCOP) is preparing future pharmacists to implement pharmacogenomics into practice and to become leaders in the promotion of pharmacogenomics and precision medicine. As an emerging field, pharmacogenomics offers a fertile environment to combine the development of clinical practice skills with training student pharmacists to become practice leaders in precision medicine. HUCOP is committed to optimizing clinical pharmacogenomics education for student pharmacists across both didactic and experiential settings. In 2018, HUCOP implemented an interdisciplinary and collaborative approach to teach foundational science principles of pharmacogenomics in the didactic curriculum using the Pharmacists’ Patient Care Process model. In 2020, the Test2LearnTM Community-Based Pharmacogenomics Certificate Program, organized by the National Association of Chain Drug Stores, was incorporated in the curriculum of the third professional year. This program engages students in the application of pharmacogenomics knowledge to meet high-level pharmacogenomics competencies through active-learning experiences. After completing the program, students will be prepared to decipher genetic tests, interpret patient results, make appropriate recommendations for patients, counsel patients on their pharmacogenomic profile, and collaborate with prescribers to help optimize patient medication regimens. Strengthening problem-solving skills using pharmacogenomics in the experiential setting is ideal for developing student pharmacists into future clinical experts. Because precision medicine is still limited in some geographic areas, HUCOP plans to develop opportunities for increased student exposure in the experiential setting by making the certificate training program available to preceptors. Furthermore, as a participant in the Academia-CPESN...
Transformation Pharmacy Collaborative, HUCOP will support the transformation of community-based pharmacy practice by serving as a center of knowledge and resources to aid pharmacists in the state interested in integrating pharmacogenomics into community-based pharmacy care.

**Everything is Science: A City-Wide Science Festival to Engage and Recruit Future Pharmacists**

Jarrod Creameans, Dr., Michelle Pitts, Dr., Olivia White, Kellen Greenwell, Kristie Colon, University of Kentucky, Sylvie Garneau-Tsodikova, University of Kentucky, Vincent J. Venditto, University of Kentucky.

The University of Kentucky College of Pharmacy has developed a week-long, city-wide science festival called Everything is Science (EiS) focused on engaging the community, improving scientific literacy and creating a pipeline of applicants who would not normally consider STEM of Pharmacy as a profession. The festival serves as a platform for presenters from diverse professions to give engaging talks (without PowerPoint slides) to the public, free of charge, in restaurants and bars around town. The second annual EiS festival was held in Lexington, KY from March 4-8, 2019. Evaluation cards available to each attendee during the festival provided a five-point Likert scale assessment of the events, venues and speakers. At the conclusion of the week-long festival a reflective survey was disseminated to the event coordinators to assess their impressions, preparedness and evaluation of the festival. Approximately 350 people attended ten events held in restaurants and bars in Lexington, KY over five days with 33 speakers. Altogether, 220 (63%) evaluation cards were returned, which offered support for the festival with strong ratings (out of 5.0) for the speakers (4.6 +/- 0.7), venues (4.3 +/- 0.8), and overall experience (4.5 +/- 0.7). Nine session coordinators also provided strong ratings (out of 5.0) for experience (4.6 +/- 0.5) and venues (4.0 +/- 1.0) and supported that this EiS festival improves science literacy (4.1 +/- 0.6) and improves their perception of the University of Kentucky College of Pharmacy (4.0 +/- 0.5). In conclusion, the Everything is Science festival serves as a no-cost method to engage with the community to create a new pipeline of candidates with potential for adoption in other cities.

**Health Sciences Center Collaborations for Pharmacy Services to Improve Patient Care and Learner Experiences**

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The University of Oklahoma College of Pharmacy is located on a health sciences campus (HSC) along with the OU Medical Center and multiple outpatient clinics. The college of pharmacy owns three outpatient pharmacies located throughout the HSC campus. It is documented that outpatient prescriptions equate to almost 4 billion prescriptions per year and about 50% of these are taken incorrectly. Numerous studies found use of pill packaging, chronic medication management (CMM), and transitions of care services improve various components of the triple aim. Studies have shown that adherence packaging improved adherence scores greater than 45% above baseline compared to use of pill bottles. One of the most common medication discrepancies occur from non-intentional, non-adherence, meaning the patient did not understand they were supposed to be taking a medication, which stresses the importance of medication counseling. Either through CMM or discharge medication counseling, studies have found a 36% reduction in medication-related hospitalizations, significantly less 30-day readmission rates, and an estimated annualized cost of avoided admissions of $6.6 million. Transitions of care between the inpatient and outpatient setting is an important factor in patient health outcomes and is one of the biggest contributors to patient safety and high readmission rates. With the increasing emphasis on improving adherence and reducing readmission penalties for inpatient and outpatient facilities with transitions of care, the college of pharmacy partnered with key stakeholders with the OU Medical Center to develop and implement the following services: meds-to-bed, meds-to-desk, adherence pill packaging, and transitions of care. Students play an integral role with these services to not only provide medications and ensure medication access, but to provide timely comprehensive medication reviews and medication counseling.

**High School Day: An Interactive Approach to Recruitment**

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The purpose of this abstract is to describe our annual full-day high school recruiting event at the University of Rhode Island College of Pharmacy highlighting community outreach, diversity, and prospective student engagement. The morning event showcases our medicinal garden, simulation lab, and compounding area to approximately 30 students from a local high school offering a pharmacology course. New this year, we hosted a group of 10 high school students who identified as being part of an under-represented minority to run a parallel educational session with a campus tour and professional panel session. The two events come together the final hour when
all students participate in a series of interactive activities facilitated by our faculty and student pharmacists. Activities include physical assessment, mock patient counseling, virtual reality goggles, sterile technique, and naloxone education. In the afternoon, we continue our interactive activities and extend the invitation to any high school student interested in experiencing what it is like to be a student pharmacist at URI. We advertise through local high schools, guidance departments, and college faculty/staff connections, and we have observed a consistent trend in attendance over the past three years, averaging about 40 students each year. Many prospective students attend multiple events at the University, and several students ultimately enroll because of these programs. Our students and faculty are passionate and excited to participate, and they consistently serve as our best ambassadors to promote the positive culture that exists. At a time when recruitment initiatives are critical, especially as a direct entry program, we continue to attract a healthy pipeline of students from local high schools to attend this successful event.

Impact of Specialty Tracks on Workforce Preparedness: Student, Post-Graduate Training Coordinators, and Employer Perspectives
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Background: Specialty focus areas (“tracks,” “certificates,” or “pathways”) allow students the option to study one area more intensively in the PharmD curriculum. Schools market them as a competitive edge to students. Areas of focus and pedagogical designs vary widely among programs and little is known about their success in attracting and distinguishing students. UCSOP opened its first track in spring 2019, with four applicants and one active student. Before further investment into additional tracks, measurement of perceived value and demand were warranted. Purpose: To determine the perceived value of track offerings at a school of pharmacy by its students and partnering stakeholders. Methods: The Academic Affairs Committee was charged with evaluating track offerings regarding demand and perceived value to students, post-graduate training coordinators, and employers. Electronic surveys were administered to 195 P1-P4 students, 300 post-graduate training coordinators, and 155 employers in spring 2020. Results: Post-graduate training coordinators and employer results are in progress. Among 135 student respondents, 49.6% agreed that a PharmD is sufficient for getting hired, and 37.0% had considered specialty opportunities when choosing schools, 64.4% consider specialty tracks advantageous for getting hired, and 67.4% would have been interested in pursuing one. Specialties attracting strong interest were ambulatory care, substance abuse, and pediatrics. A commitment of five hours weekly or less was preferred by 93.3%. Conclusion and Future Directions: Interest in specialty tracks is robust among current students, who consider them helpful for gaining employment. Employer and post-graduate training coordinator surveys will be analyzed to determine correlation. Surveying prospective candidates and a broader sample of pharmacist employers would be informative. UCSOP will likely consider expansion of track offerings based on these preliminary results.

Implementation of an Integrated Patient Assessment and Counseling OSCE
Michal Mingura, Marshall B. Ketchum University, Kim Vo, Marshall B. Ketchum University, Henry Hua, Marshall B. Ketchum University.

Objective: To describe the implementation of an integrated objective structured clinical exam (OSCE) that improves resource utilization while maintaining academic performance. Methods: Marshall B. Ketchum University (MBKU) administers approximately five OSCEs per quarter and, as a novel and small institution, is looking for ways to streamline the process. Two courses were identified during the P1 winter quarter as opportunities for alignment: PHM 505 (Patient Assessment II) and PHM 541 (Pharmacy Communications, Management, & Leadership). Both courses assessed student ability to interact with patients and apply critical thinking skills through the collection and dissemination of medical information. The courses required approximately 30 and 15 standardized patients (SP) minutes per student, and 30 and 20 faculty proctor minutes per student, respectively. The course coordinators collaborated to design and implement one integrated OSCE that assessed skills taught in both classes. Forty-eight students completed the integrated OSCE. Combined, the two OSCEs used approximately 37 SP and 38 faculty proctoring minutes per student. On average, students received 93.04% of the points allotted to patient assessment (PHM 505), and 95.04% of the points allotted to counseling skills (PHM 541). Conclusion: Integrating OSCEs from two unique P1 required courses streamlined resource utilization while allowing students to successfully apply patient care skills.
Implementing a Culture of Professional Identify Formation Through Intentional Career Pathways Reflection and Aligned Mentorship

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Annual portfolios have provided a framework for student reflection and curricular feedback for decades. Through this process, the University of Arizona College of Pharmacy recognized that students wanted more exposure to career options and additional mentoring. To address this, a committee comprised of faculty, staff, and PharmD students collaborated on the development of an online, digital toolbox of career exploration resources. Three themes emerged from this work; (1) we wanted to create more opportunities for students to explore all career pathways, (2) we sought to foster students’ professional identity, and (3) we aligned student interests with mentors. This collaboration resulted in the development of a Pharmacy Career Pathways Interest online survey (adapted from ‘APhA Career Pathway Evaluation Program’) and a Laboratory-Based Basic Science Interest online survey. The Career Pathways Interest survey was incorporated into a first semester course in tandem with a semester long reflection journal developed to foster professional identity exploration. The Laboratory-Based Basic Science Interest survey was developed to assist students interested in exploring careers in research and provide opportunities for mentored student research opportunities. The mentor network was expanded to connect students with experts in the field and faculty bios were aligned with the surveys to ease identification of faculty mentors. Finally, recognizing that students’ interests evolve over time, the Pharmacy Career Pathways Interest survey was integrated into the annual portfolio meeting; creating a tool for mentors to use, to guide students through their individual professional identity, to encourage connection with new mentors, and to link students with opportunities in their areas of interest.

Importance of English Language Reading Comprehension at Admissions for Pharmacy Student Didactic Success

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Objective: To determine which pharmacy student characteristics at admission may be risk factors for failure in a required school of pharmacy course. Methods: This retrospective review defined poor student performance as Student Promotion and Academic Review Committee (SPARC) attendance for academic reasons. Students attend SPARC following a letter grade of D or lower. Student admission characteristics included Pharmacy College Admission Test (PCAT) subscores, grade point average (GPA) at application, gender, English as a second language (ESL) and chemistry grades. Either a Student’s T-test or Fischer’s Exact Test was used to determine statistical significance between those who attended SPARC versus not. Results: Over three years, records from 428 students were available and 41 students attended SPARC. Mean PCAT reading subscore was statistically significantly lower among students who attended SPARC versus those who did not (52.8 and 68 respectively; p=0.0002). There was also a lower PCAT composite score among students who attended SPARC versus those who did not (p=0.003). When considering ESL status, 31.1% of students who self-identified as ESL in PharmCAS had SPARC attendance compared to 7.1% among non-ESL students (p<0.001). General chemistry and GPA at application were statistically significant but not meaningfully different. Gender, organic chemistry, and remaining PCAT subscores were not statistically significantly different. Conclusions: Math and science performance is often emphasized during admissions for Doctor of Pharmacy programs. However, PCAT reading subscores were significantly higher among successful students in this analysis. This is especially important for students with low PCAT reading subscores and students who report ESL. Additional support must be made available for those students.

Integrating Impact-Driven Community Engagement Through Curricular and Co-Curricular Transformation

Veronica S. Young, The University of Texas at Austin, Renee Acosta, The University of Texas at Austin.

The evolving health ecosystem necessitates curricular transformation in health professions education. Future practitioners must not only be prepared to deliver clinical care, but ready to competently address upstream determinants that influence 80% of health outcomes. A structured, collegewide community engagement (CEn) program strengthens student pharmacists’ readiness to address social determinants of health while meeting real-world, unmet community needs. Our college CEn efforts are grounded in the following principles: 1) respond to community needs; 2) promote patient-centered care and population-oriented health; 3) foster sustainable community-academic partnerships; 4) encourage student-led initiatives; and 5) grow interprofessional collaborations.
Opportunities are embedded through required and elective coursework, experiential learning, and co-curricular activities available to all students. Experiences are designed to bolster all four domains of the 2013 CAPE educational outcomes. Our four key program areas consist of: 1) providing patient care services, 2) responding to current epidemics, 3) addressing social determinants that impact communities and population health, and 4) engaging in global health. Our CEn program successfully collaborated with 103 community partners, impacting 601,126 direct beneficiaries at the local, regional, national and global levels. The number of individuals indirectly impacted by our efforts exceeds 3 million people. Specific outcomes vary by individual experience. Commitment to sustainability is demonstrated by the active involvement by all student pharmacists from years 1 to 3, and by all practice faculty serving as advisors and mentors to students and consultants to community partners. Field-based experiences that address real world, unmet community needs prepare students to address upstream factors that influence health. Success of an impact-driven collegewide CEn program requires leadership support, curricular integration, faculty and student commitment, and value to community stakeholders.

Interprofessional Curriculum for the Care of Older Adults (ICCOA) to APPE Students

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Sullivan University College of Pharmacy and Health Sciences (SU COPHS) is a three-year accelerated Pharm.D. program who has partnered with the University of Louisville Trager Institute to offer the Interprofessional Curriculum for the Care of Older Adults (ICCOA) to its third-year student pharmacists (P3s). This curriculum is geriatric-centered and involves learners from pharmacy, nursing, medicine, social work, and dentistry, as well as professionals from community-based organizations, practicing community organizers, and community navigators. P3s participate as part of the college’s Interprofessional Education (IPE) curriculum. Five case-based online modules are completed as prework before meeting for a live session known as the Interprofessional Case Management Experience (ICME). Sessions provide a fictitious case (a total of four have been created), and students participate in a case conference. Participants are assigned an interprofessional group with each group being led by a faculty facilitator. Through discussions and use of video scenarios highlighting the patient interacting with clinicians, learners assess the needs of an older adult and provide recommendations. The culmination of this event assigns students to roles different than their chosen professional identity and has them role-play a care planning or family meeting addressing the health of the patient holistically. Recommendations are made not only emphasizing the medical care of the patient but also addressing all social determinants of health. Pre- and post-assessments are conducted using the Self-Efficacy for Interprofessional Experiential Learning Scale (SEIEL), which measures student self-efficacy perceptions related to learning collaboratively in interprofessional teams. P3s have benefitted from this experience and current plans are to involve second-year physician assistant learners as well as the expansion of case scenarios to include narcotic misuse.

Involvement of Stakeholders Improves the Authenticity of a Practice Ready Curriculum

Karen F. Marlowe, Auburn University, Bradley Wright, Auburn University.

The Accreditation Council of Pharmacy Education (ACPE) has called for all schools of pharmacy to have as an outcome, “Practice Ready” and “Team Ready” graduates. As a result, learning from and with stakeholders such as alumni, practicing pharmacists, and other healthcare providers is increasingly important to understanding the role of the practice ready pharmacist. Auburn University Harrison School of Pharmacy’s (HSOP) fully integrated Practice Ready Curriculum (PRC), which began in the Fall of 2017, includes several partnerships with stakeholders allowing students to learn new material not in isolation but hopefully in relation to “real world” practice. Each course includes relevant information from basic sciences, clinical sciences, and behavioral sciences to support deeper learning and enhance long term retention and application of the material. Incorporation of stakeholders including practicing pharmacists, advocates for the profession and leaders within the industry allow students to form a strong professional identity as they learn the components of curricular outcomes derived from ability-based outcomes. Practicing pharmacists are involved in multiple courses from orientation through the P3 year. As well, stakeholders are included in school co-curricular activities and electives. Various professionals have also been asked to give feedback in the development or review of aspects of the curriculum. A sampling of the involvement of stakeholders within the HSOP curriculum will be provided from orientation through P3 year.
including linkages to the school’s competencies. In addition, a description of the stakeholders involved in various courses and activities throughout the curriculum will be included. Finally, recommendations for future plans to utilize HSOP stakeholders in our continuous quality improvement will be presented.

Involvement of Stakeholders in the Practice-Readiness of Pharmacy Graduates

Bradley E. Hein, University of Cincinnati, Laura Carnaghi, University of Cincinnati.

The University of Cincinnati James L Winkle College of Pharmacy has a long history of partnering with stakeholders to ensure its graduates meet the needs of the changing workforce. The purpose of this review is to highlight stakeholder engagement in the college’s preparation of student pharmacists for their careers. This engagement is demonstrated through a variety of mechanisms: strategic planning, accreditation, admissions, curriculum and diversity and inclusion. The college involves its internal stakeholders—students—in the areas of strategic planning, accreditation, admissions, and curricular governance. Students are able to help guide the direction of the college and help link academia and practice. Students also give feedback on how the college can improve student pharmacist preparation through a variety of surveys and focus groups. The college is working on a process to connect students to our alumni for career mentoring. The college involves its external stakeholders—preceptors, alumni, employers—through an assortment of opportunities where they can directly influence the graduate’s ability to be practice-ready through the assessment of entrustable professional activities. These stakeholders have important roles in strategic planning, accreditation, admissions, and the curriculum. This group provides feedback through surveys and focus groups to help ensure graduates are ready to enter the workforce. Finally, the college has engaged with the academic health center, its board of advisors and diversity council to ensure that (1): we are taking advantage of the center’s interprofessional environment, (2) we receive external feedback on student pharmacist preparation from key stakeholders in the field and (3) the experiential and didactic curriculum prepares students to enter a diverse workforce environment.

It Takes a Village: An Interprofessional Model to Recruit Pharmacy Students for the 21st Century

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More than ever, interprofessional communication and teamwork are essential in healthcare delivery. Positive outcomes reach beyond successful discharges, filled prescriptions, or 5-star ratings. Positive outcomes depend on members of the healthcare team collaborating and communicating effectively. This effort takes time to develop. In order to complete our mission, we expect each graduate to, “function effectively as a part of an interdisciplinary team.” To foster this interprofessional development, students need training in team dynamics, time, and experience working in teams to gain functionality and efficiency. In an effort to integrate interprofessional practice early and stress its unwavering importance in healthcare, CPHS is developing an innovative interview protocol. Health science programs from across the college collaborated to produce an interprofessional interview day proposal. Candidates for each health science program will interview in a shared setting, rather than in discipline-exclusive setting using multiple mini interviews (MMIs). Interprofessional teams have negotiated the schedule, items, rubrics, and assessment strategies for this novel admissions proposal. Prior to launch, interviewers will be trained, calibrated, and utilized as raters for short performance-based stations. Shared stations were developed based on key mission outcomes (eg, interprofessional behaviors, leadership qualities, communication). In addition to identifying shared performance targets, the teams recognize that each discipline is unique and has its own admissions needs. Therefore, each discipline developed two departmental/discipline-specific stations. Following a pilot, assessment feedback will be gathered from interviewers, interviewees, and admissions team members and evaluated before the full-scale launch. A continuous assessment mechanism has been developed to ensure timely revisions are upon implementation.

Layered Programming to Support Student Professional Development, Academic Success, and Life Circumstance Management

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Objectives: To design and implement a network of programs intended to promote student professional development by impacting student progression, retention, and growth. Methods: A framework of programs was developed incrementally to support student success. Special attention was paid to the needs of, students with lower levels of academic preparedness, from economically disadvantaged backgrounds, or underserved and underrepresented populations. Offices of Academic Affairs, Experiential Education, and Student Affairs worked with students, faculty, and other stakeholders to identify outcomes tied to student development in the affective domain and growth in student knowledge, skills, and mindsets. Strengths and weaknesses of existing supportive programs were explored, and literature searches were completed to aid in the development and improvement of systems and programs. Platforms, operations, and assessment methods were also evaluated. Results: Strategies for early identification and support of students at risk academically were identified and implemented with guidance from the Office of Academic Affairs and the Academic Performance and Standards Committee. Curricular elements including structured programming and self-reflective portfolios were implemented. Student progress towards meeting global and programmatic learning outcomes is tracked through performance on competency assignments and faculty mentor assessments. Information is housed in Learning Management Software and can be used in faculty mentor discussions with students regarding professional development. Implications: Implementation of multiple programmatic support mechanisms can be used to support student professional development, academic success, and promote retention and on-time progression.

Leading Change in Pharmacy Education: Operationalizing Faculty and Stakeholder Engagement to Support Curricular Innovation

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Objective: To describe an organizational process involving faculty and key stakeholders to inform curricular change. Background: Standard ten of the 2016 ACPE Standards states that curriculum must be designed, delivered, and monitored by the faculty. While curriculum is faculty-driven, stakeholder input is vital when considering curricular change. Operationalizing curricular change can be difficult given the diverse needs and opinions of all involved. In 2019, Virginia Commonwealth University School of Pharmacy designed a process to engage faculty and stakeholders in curricular change. The initiative is called “Next Generation Pharmacists (NGP)” and focuses on creating curricular modifications to address the future needs of graduates. This process was developed based on the books Leading Change (JKotter) and Our Iceberg is Melting (Rathgeber and Kotter). Process: This was designed as a four-stage process. The first involved a faculty task force that defined Next Generation Pharmacists, gathered information from key stakeholders (faculty, preceptors, National Advisory Council), and identified a strategic vision to guide the process. The second stage included an expanded group of faculty, called the NGP Coalition responsible for outlining urgency for change, developing educational competencies, and identifying complementary curricular assessment measures. Stage three focused on curriculum gap analysis with faculty engagement through retreats, committees, and departmental discussion related to curricular development. Stage four is implementation, including curricular design based on NGP principles. Outcome: To operationalize an inclusive, efficient curricular change process to create an innovative curriculum that prepares Next Generation Pharmacists.

Leading Transformation of Pharmacy Practice: IPE Grand Round in Stroke Management and Transitions of Care

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Objectives: To facilitate the acquisition of the knowledge and skills for the interprofessional care and clinical management of stroke and transitions of care (TOC), we designed an IPE Grand Round activity (IPE-GR). Methods: 96 M1, 129 P3, and 8 Psy2 (233) students participated in a Case-Based Learning IPE-GR in 11-13 membered interprofessional teams. IPE-GR unfolded in three phases: ER presentation, hospital admission, and discharge and facilitated the development of skills for 1) acute care management, 2) pathophysiology comprehension and pharmacotherapeutic management, 3) TOC,
and 4) interprofessional teamwork and communication. Pre-reading included the 2019 AHA/ASA clinical guidelines for acute ischemic stroke management and content from previous years. IPE-GR commenced with a pre-recorded patient evaluation video by a neurologist in the acute care setting, and a lecture with integrated IPE case-based questions. Performance was evaluated using a post-quiz and post-activity confidence and student perception surveys. Results: Mean scores on the 12-item post-activity test, with equal evaluation and pharmacotherapeutic questions, were 95% (SD, 0.95) for pharmacy and 92% (SD, 0.90) for medical students. Eighty students (43 medical and 37 pharmacy; 34%) responded to the post-activity confidence survey. 98% pharmacy students reported confidence in all four learning objectives. 92% medical students reported confidence for acute care management and recognition of TOC, and 95% confidence for pathophysiology and hospital management. 21% pharmacy and 7% medical students reported complete confidence in TOC and pathophysiology respectively; 89% medical and 84% pharmacy students felt satisfied with IPE teamwork and communication, while 94% medical and 89% pharmacy students felt they understood the responsibilities of the other participating professions. Conclusions: IPE-GR facilitated learning in the historically challenging interprofessional educational field of stroke and TOC management.

LEAP-AHEAD: Cultivating Self-Awareness, Professionalism, and Personal and Professional Development Among Student Pharmacists

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Objective: To describe a longitudinal initiative encompassing student advising; interprofessional education; Leadership, Entrepreneurship & Innovation, Assessment of Self, and Professionalism (LEAP) workshop series; student portfolio; and other co-curricular experiences designed to foster student personal and professional development across professional training experiences. Methods: Based on the guidance of the Accreditation Council for Pharmacy Education’s Standard 4 for Personal and Professional Development, the School of Pharmacy established LEAP-Assessment of Health Education Awareness Development (AHEAD). This overarching and intentional approach marries co-curricular and curricular experiences with student documentation of achievement and self-reflection. Through a re-branding and education campaign to familiarize both faculty and students with this new structure, this initiative will allow all stakeholders to appreciate this newly integrated approach to cultivating student development and self-awareness. Results: At this time, ten faculty champions and three administrative staff members, representing various components of the LEAP-AHEAD initiative and professional curriculum, have worked to develop pilot activities and new approaches for documentation, reflection, and assessment of student activities. Implications: A new initiative, LEAP-AHEAD, which encompasses aspects of student personal and professional development from curricular and co-curricular experiences, has been implemented. Through this unified process, simplification of requirements for the student portfolio and improved ability to track student development and achievement of personal goals will be attained. Further, this initiative serves to enhance existing academic and career counseling and assurance of timely feedback from faculty advisors and preceptors.

Lessons Learned: Data-Driven Changes to a School’s Co-Curricular Program Development

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Introduction: Fairleigh Dickinson University School of Pharmacy and Health Sciences (FDU SOP&HS) developed and implemented a co-curricular program to facilitate student learning and reinforce ACPE Standards 3 and 4. The objective of this poster is to highlight changes made after the first year of the co-curricular program derived from student learning outcomes assessment and program evaluation. Methods: FDU SOP&HS formalized its co-curricular program in AY2018-19 around its core tenets and select CAPE outcomes. Program requirements were established to optimize student engagement and attainment of competencies in domains 2, 3, and 4. An assessment and evaluation plan was written, and CampusLabs was deployed as a software solution. Data were collected from multiple sources using multiple methods. Quantitative and qualitative data analysis resulted in descriptive statistics and key themes. A report was generated detailing insights about each cohort and the overall program, and formed the basis of improvement initiatives enacted for AY2019-20. Results: Changes made to the co-curricular program in response to student feedback,
included offering more and varied co-curricular activities, increased marketing of CAPE outcomes for each domain and refining activity scheduling to optimize student attendance given timing of their classes. Changes in response to faculty feedback included disseminating co-curricular activities calendar at the beginning of the semester, and arranging blocks of time to facilitate faculty-student advising. Based on positive findings of student engagement and learning, we extended program requirements to students in their final year. Conclusions: Data analysis generated evidence of a robust, student-centered co-curricular program. Program refinements were made, which emphasizes the importance of timely data collection from multiple program stakeholders to catalyze implementation of meaningful changes.

**Make It V-Real: Applying Virtual Reality Technologies to the PharmD and Prospective Student Experience**

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Introduction: Virtual Reality (VR) is innovative technology enabling the overlay of digital information over a simulated world. Its immersive environment can be like the real world but with add-on digital features, or it can be conceptual. VR is emerging to be the next step for the evolution of the 21st century education. Particularly, it can enhance student pharmacists’ participation by creating clinical scenarios that immerse the learners in such an interactive manner that can motivate them to better understand the clinical subjects. Continuing from our efforts on chemistry lab safety training, we expanded our VR-based teaching contents to include clinical topics such as counseling patients on their blood glucose, conducting blood pressure monitoring, immunization, emergency preparedness and ProAir inhaler instruction. These clinical modalities constitute our HUCOP Virtual Reality Teaching Library. Purpose: Our goal is to compare the effectiveness of courses that are delivered using VR-based teaching versus traditional classroom andragogy. Furthermore, we plan to introduce the VR-based program to the candidates at our prospective student interviews and evaluate its impact on recruitment and engagement. Methods: Students in select courses will be randomly assigned to one of two instructional settings through the use of a stratified, randomized block method. The instructors, content, assessments, and lecture time will be kept equivalent for both modalities. PharmD learning outcomes will be assessed and compared. Expected results/hypothesis: We will report the student mean exam scores and expect that VR-based method improves student achievement relative to the traditional lecture andragogy. Intergroup analysis will be performed with Chi Square tests for nominal scale outcomes. Conclusion: In summary, this innovative technology could transform the learning experience for a new generation of PharmD students.

**Marshall University: Use of a Recruitment Task Force to Re-energize Faculty Involvement in Recruitment**

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Pharmacy student recruitment is challenging. To address this issue, a faculty and staff driven “Recruitment Task Force” was charged to examine our recruitment processes and develop new approaches. Each faculty member was asked to select one of two teams: Recruitment or Admissions. The “Recruitment Team” was required to participate in at least two “on campus” recruitment events per semester. Additional training regarding recruitment “best practices” was required for all participating faculty. Faculty feedback from each event was shared with the executive council, admissions and faculty/staff. Augmenting these efforts, the “Admissions Team” implemented strategies to enhance the admissions process and school visibility to Marshall University students. Notable deliverables here included increasing school participation in existing campus health and wellness initiatives and campus speaking opportunities. Focus groups with current P1 students were conducted to determine additional recruitment strategies. Data from the focus groups, other student input along with faculty and staff suggestions were used to develop new marketing tools and materials. The “Admissions Team” was also charged with reviewing and recommending changes, where needed, to on-site recruitment activities. New outcomes included the use of “multiple mini interviews” (MMI) where students were given different problems or scenarios to solve. Prospective candidates were also evaluated using a group dilemma problem and a critical thinking assignment. Results obtained thus far are encouraging and included increased faculty participation and buy in for the recruitment and admissions process. In
addition, early estimates suggest that this new approach may be useful in increasing our student recruitment numbers.

**Moving the Profession Forward Through Strategic Partnerships**

Timothy E. Welty, *Drake University*, Renae J. Chesnut, *Drake University*, Erik D. Maki, *Drake University*.

The profession of pharmacy is undergoing rapid change. This presents a challenge for pharmacy education and preparation of students for a changing workforce. Exposure to innovative practice opportunities is possible to incorporate within experiential training. However, this is highly dependent on external experiential sites, making full integration into the pharmacy curriculum difficult. To address many of the concerns in preparing students for an evolving workforce, Drake University has established a number of innovative initiatives. These include risk-sharing contracts with physician practices, partnerships with private enterprise for innovative practice models, and engaging with organizations and agencies who are promoting the transformation of healthcare delivery. Through these partnerships, we are able to provide unique experiential training directly connected with the college and incorporate expertise from these sites into the entire curriculum.

**Multimodal Network Models for Innovation and Career Exploration**

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Career development, interprofessional education and entrepreneurship are embedded in ACPE’s Standards 2016. Networking between students and pharmacy partners create an environment for students to investigate future roles, responsibilities and alternative practices while meeting key leaders of the transformation process. Downsizing in health care employment emphasizes expansion of entrepreneurial employers and business owners. Three key forums were established to optimize student contact – the Futures Summit, open houses conducted at institutional sites and mentoring activities. The annual Futures Summit invites traditional and nontraditional health care businesses to display on campus. Created for Pharmacy students, interest from medical, nursing and business students stimulated expansion. Over 150 businesses, 345 Pharmacy students, 46 medical students, 18 nursing students, 27 business students and 52 pre-professional students interacted at the fall 2019 event. Sixty five percent of presenters were traditional pharmaceutical industry based, while 35% were a growing vocation of non-traditional pharmacy practice. Thirteen open houses were conducted at experiential sites where preceptors expose students to specialty practice, team-based care and futuristic opportunities. Exposure to new concepts of diagnosis, monitoring and electronic interactions highlight and accelerate entrepreneurial solutions to better serve patients in the future. A parallel shadow program allows students to experience the future world offered by the profession. Student organizations hold co-curricular events where mentors discuss career and residency planning and the importance of being active in professional associations. During the 2019-2020 academic year, 3 major events were attended by over 200 students, and 80 mentors. Students gained insight that potentially affected experiential selections, residency ranking, and career plans. These events laid the foundation for ongoing collaboration and college initiatives that foster overall curricular goals.

**One College’s Multifaceted Approach to Leading Practice Transformation**

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As the pharmacy profession continues to evolve, the needs of students, faculty, practitioners, and community members continue to change. To better prepare and ensure we meet the needs of students and the profession, faculty at Idaho State University (ISU) College of Pharmacy partnered with alumni, students, and leadership to establish a multifaceted strategic plan. Innovative practice-based and student service models were employed to help develop, trial, and grow pharmacist-provided health services. Practice transformation projects, driven by identified practice site needs, were at the forefront of ISUs “incubator model” for change. Subsidized faculty across clinical practice sites were used to trial and study innovative reimbursement models and sustainability strategies. Assisted living home immunization initiatives and student-driven emergency preparedness programs were also launched, increasing community visibility and interdisciplinary engagement. To ensure an agile curriculum that meets the changing needs of future pharmacists, a more nimble mechanism to evaluate and adapt curriculum on a yearly basis was established. In addition, training programs such as a statewide, interprofessional continuing education (CE) seminar series used an innovative, tailored, and dynamic approach to support credentialing and privileging of practicing pharmacists with payers. This CE program supported existing providers in establishing mechanisms for reimbursement of non-dispensing services. Lastly, relationships with state health agencies, community pharmacy networks, and underserved
communities have become more multidirectional resulting in focused clinical, educational, and advocacy initiatives such as a student-driven Legislative Day supporting practice transformation.

**Partnering with Institutions to Initiate a Longitudinal Institutional Introductory Pharmacy Practice Experience (IPPE)**
Lindsay M. Saum, Butler University, Kendra Damer, Butler University.

**Background:** Experiential programs strive to provide meaningful learning experiences for pharmacy students. However, the current healthcare environment and significant IPPE requirements present barriers to overcome, particularly for the institutional setting. The utilization of innovative experiential learning models presents an opportunity to benefit the pharmacy program, the students, and the health system. At present, there is a paucity of data describing longitudinal IPPE. The available literature reports potential benefits of longitudinal advanced pharmacy practice experiences (APPE), including mutually beneficial outcomes for both students and institutions. Objective: The longitudinal IPPE was designed to expose students to the institution’s practice model and a variety of practice areas and health care professionals. Integration into the practice model and completion of specific tasks and direct patient care activities provides the students hands-on practical experiences in the hospital setting. Methods: The longitudinal institutional IPPE consists of orientation and rotating weekend shifts. The students are assigned specific units to complete patient care activities. The students are tasked with medication histories on newly admitted patients, patient educations, a daily medication review, and workbook activities. Students meet with an assigned pharmacist throughout the day to ask questions, review patient care completed, and discuss assignments. Results: Preliminary results indicate that the current students have completed 209 medication histories and 119 medication educations over 9 weeks. These figures translate to over 650 hours of pharmacist time per year, permitting the pharmacists to complete additional activities requiring licensure. Initial student feedback from the longitudinal rotation is positive. Implications: A longitudinal IPPE appears to facilitate high level student learning and integrates students as functional members of the health system. Additional benefits include increased Institutional IPPE site availability and APPE readiness.

**Partnering with the Pennsylvania Harm Reduction Coalition to Prepare Students for Change through Grassroots Advocacy**
Roshni P. Emmons, Thomas Jefferson University, Amber King, Thomas Jefferson University, Devin Reaves, Sean Fogler

Objective: To determine the impact of an advocacy symposium on health professional students’ knowledge, confidence and likelihood to advocate for issues relating to harm reduction strategies for patients with substance use disorders. Methods: The Jefferson College of Pharmacy partnered with the Pennsylvania Harm Reduction Coalition (PAHRC) to deliver a 4-hour active-learning advocacy training to equip learners with tools and actionable steps to engage policy makers and advocate for change. Voluntary pre- and post- surveys using Likert scales were employed to determine the impact of the training, and descriptive statistics were used to describe the results. Results: Of the 91 program participants, 76 completed both the pre- and post- workshop surveys (response rate = 84%). Responders included pharmacy students (n=44), physician assistant students (n=31), and a licensed physician assistant (n=1). At baseline, only 3/76 (4%) had prior advocacy experience, and the majority (70%) indicated they had little to no confidence in their ability to advocate for harm reduction issues. Following the workshop, confidence increased for 58/76 (76%) participants and the likelihood of contacting representatives for these issues also increased from 12% to 43%, with email being the most preferred method of contact. Although not a requirement, 6/44 pharmacy students proceeded to email their local and state representatives. Conclusions: Advocacy skills for promoting change are limited in health professions’ curricula but are essential to keeping abreast of the changing healthcare climate. Collaborating with organizations who serve as key stakeholders in the state and are dedicated to bringing forth policy change can better prepare students to engage in advocacy efforts.

**Partnership with Regional Grocery Chain Brings Student Insight to the Future of Pharmacy**
Jeremy Ashley, The University of Texas at Tyler, Michelle Beall, Brookshire Grocery Company, Chris Felton, Brookshire Grocery Company, Charlotte Weller, Brookshire Grocery Company.

Background: The Ben and Maytee Fisch College of Pharmacy at The University of Texas at Tyler has been seeking additional health and wellness opportunities and experiential practice sites. Recently, the university discovered an opportunity for students to experience retail pharmacy with an innovative prospective. Methods: The Fisch College of Pharmacy partnering with Brookshire Grocery Company established a unique opportunity for students to experience community pharmacy. The Pharmacy Innovative Learning Lab (PILL) houses clinical pharmacists whose primary role is to develop, implement, and support pharmacy health services. Students participate in a variety of learning experiences where they
develop as autonomous clinicians while enveloped in a team-based learning environment. Building a strong foundation in effective communication skills with a focus on motivational interviewing and learning the importance of professional advocacy and involvement are key. APPE students develop management skills, discuss their ability to impact current legislative and regulatory issues, train extensively on completing and documenting MTM services, work with community stakeholders, understand the economics of pharmacy, develop and implement sustainable business models for novel services, and present various topics at local schools. IPPE students improve patient outcomes through adherence counseling, vaccine clinics, and wellness screenings. Other departments introduced include specialty pharmacy and central fulfillment. Results: Since 2018, over 150 pharmacy students have gained clinical experience through the PILL. Conclusion: It is projected that pharmacy student participation at the PILL will continue to grow because of the unique and innovative retail pharmacy experience that it offers. As the profession of pharmacy advances, the PILL is dedicated to exploring new health services that may evolve and exposing students to potential new patient care experiences along the way.

**PittPharmacy Recruiting RxTalent**

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The well-documented decline in applications has increased the need for schools of pharmacy to employ creative and effective strategies to recruit the next generation of student pharmacists. PittPharmacy implemented the RxTalent team of faculty, staff, and current PharmD students to develop and execute numerous programs to attract the best and brightest students to the pharmacy profession and specifically to the University of Pittsburgh. The backbone of the team is comprised of PharmD students who lead four major recruitment initiatives: RxAmbassadors, RxPlore, PIER (Pharmacy Innovation Experience Research), and RxPrep. Each initiative targets different groups of prospective students, encouraging them to pursue interests and opportunities in pharmacy and providing guidance during the pharmacy school application process. RxAmbassadors work with the University of Pittsburgh Office of Admission and Financial Aid and PittPharmacy Student Services to lead tours, information sessions, and recruiting events for prospective pharmacy students and their families. RxAmbassadors also facilitate hands-on active learning sessions in area high schools and health science camps. RxPlore is an immersive, week-long, residential summer camp for high school juniors and seniors to explore pharmacy career pathways. For PIER, PharmD students develop curricula and serve as peer mentors in the pharmacy immersion programs in Miami, FL and Pittsburgh. RxPrep is a student-led organization that provides information about the pharmacy profession and advice to prepharmacy students applying to pharmacy school. PittPharmacy has continued its success in recruiting and enrolling highly qualified students prepared to forge their own paths in the pharmacy profession. These four initiatives, which have been developed by creative student pharmacy leaders with the support of school faculty, staff, and leadership, are responsible in large part for PittPharmacy’s recruiting success.

**Pivoting Community Pharmacy Practice – Empowering Community Pharmacist Practitioners Through a Community Pharmacy Practice Center of Excellence**

Traci M. Poole, *Belmont University*, Angela S. Clauson, *Belmont University*.

Objectives: (1) Establish a community pharmacy practice Center of Excellence (CoE) within Belmont University College of Pharmacy (BUCOP). (2) Serve as leaders in the profession to advance community pharmacy practice initiatives amongst all stakeholders through a college-led community pharmacy practice CoE. (3) Graduate pharmacists who are practice-ready for the emerging business and patient care models within the community pharmacy. Methods: In September 2019, a multi-phased timeline was established to launch a CoE. Phase I included joining the ACT Collaborative and participating in all components set forth, identifying key resources and stakeholders to participate in the CoE, including a faculty member in an independent pharmacy that participates in practiced-based initiatives such as Flip the Pharmacy, and ramping up curricular implementation of essential and timely community pharmacy topics such as clinically-integrated networks, eCare planning, and the Appointment-Based Model. Phase I is ongoing and Phase II planning is underway to include the collection of data on key performance indicators of the college’s imprint in community practice, development of a practitioner professional development education program, creation of a community pharmacy residency program, and establishment of an alumni resource database for student pharmacist mentorship and experiential placement within high performing and innovative community pharmacies. Phase III will round out our efforts with strategic planning of a formal CoE in order to establish leadership in the areas of scholarship, education, and innovation within the area of community pharmacy practice.
Preparing Graduates for Contemporary Community Pharmacy Practice in Rural and Medically Under-served Areas

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Community pharmacy practice is undergoing intense transformation in response to evolving patient care roles, shifting payer priorities, increased scrutiny of workplace processes, and other disruptors. The necessity for practice transformation is urgent in rural and medically underserved areas where community pharmacists are often one of the only accessible health care providers. However, despite the critical role of community pharmacists in caring for vulnerable populations, market pressures on traditional dispensing models have led to an alarming trend in rural pharmacy closures over the past two decades. Recognizing that practice transformation is a means of survival for community pharmacies, and that its graduates practice in nonmetropolitan areas at approximately twice the national rate, East Tennessee State University Gatton College of Pharmacy mobilized two distinct but complementary initiatives in 2018 to facilitate transformation in practice and education: the Community Pharmacy Initiative (CPI) and the Rural Health Initiative (RHI). The efforts of the CPI and RHI are preparing students for entry into contemporary, innovative community pharmacy practice environments in rural and underserved care settings through development of specialized and transformative learning experiences and practice-based scholarship. These activities have required development of stakeholder partnerships at local, regional, and national levels. Key stakeholders include community pharmacy owners and preceptors, Community Pharmacy Enhanced Services Network (CPESN USA) regional networks, state and national pharmacy organizations, and college alumni, among others. This poster will showcase our best practices in stakeholder engagement and working group collaboration toward a common goal of practice transformation and preparing graduates for the future of community pharmacy practice.

Preparing Student Pharmacists to Lead Changes in Practice in an Evolving Environment: An Integrated Approach

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Change and innovation have been part of the DNA at Western University of Health Sciences College of Pharmacy (WesternU); stated in our vision statement, “Develop leaders in pharmaceutical care and research who will advance global health outcomes through innovative pharmacy practice, interprofessional collaboration, scholarship and service.” Our curriculum can be described as “stable yet nimble.” Given the evolving environment in pharmacy practice, WesternU is working with our student pharmacists to enable their leadership in adapting to the environment and bringing change to practice models. The curriculum has integration blocks that serve to ensure retention of cumulative knowledge and skills previously acquired. A series of high-stakes assessments designed to assess clinical knowledge, communication skills, pharmacy practice skills, and critical thinking are administered throughout the course. These high stakes assessments are linked to the Entrustable Professional Activities (EPA) and ensure APPE-Readiness of the student pharmacists. Informatics and data science have been incorporated into the didactic and experiential curricula; to familiarize students to applications of artificial intelligence (AI) and advanced algorithms in pharmacy practice and health care as well as serve to expose them to career opportunities in this rapidly expanding field. Students are introduced in the Practice Management course, to emerging practice models such as Transitions of Care (TOC), Community Pharmacy Enhanced Service Network (CPESN), and innovative shared-risk value-based payment models. Practice faculty have embedded these models into their practice sites; an example is CPESN-CA, where faculty coach community pharmacies to provide and document clinical services through Flip the Pharmacy. Students on rotation receive practical experience with these models. Student and site response to these innovations have been positive; faculty see benefits through teaching evaluations and scholarship.

Preparing Students for Interprofessional Practice Through Curricular and Co-Curricular Interprofessional Education

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Anna K. Morin, MCPHS University–Worcester/Manchester.

The movement towards the provision of team-based health care in the United States has created an immediate need for health care workers across professions to collaborate effectively to provide optimal patient care. Interprofessional education (IPE) activities provide a forum for diverse groups of health professions students to learn about/with/from each other, foster a culture of mutual respect, and engage in team-based problem solving. MCPHS University School of Pharmacy – Worcester/Manchester (SOP-W/M) has an IPE Working Group charged with preparing students for interprofessional practice. The Group has membership from nine health care programs within the University including interdisciplinary leadership, and is co-chaired by a pharmacy faculty who is the SOP-W/M’s Director of IPE. In required pre-Advanced Pharmacy Practice Experience coursework, there are four IPE activities involving student participants (550-850 per activity), as well as student and faculty facilitators from all participating programs. Additional IPE co-curricular activities are also offered. The SOP-W/M has partnerships with a medical center and medical school from which medical students and residents work with pharmacy students during required didactic sessions pertaining to clinical assessment and ethics. All curricular and co-curricular IPE activities must involve learners from at least two health professions, link to Interprofessional Education Collaborative (IPEC) core competencies, have an interactive component, and include an assessment of student learning. During introductory and advanced pharmacy practice experiences, students submit IPE field encounters that describe their contributions to interprofessional practice and identify their interactions with other healthcare professionals and learners.

Preventing the Next Generation of Providers: Expanding Pharmacists’ Impact on Caring for Underserved Populations

Sigrid C. Roberts, Pacific University Oregon, Edward M Saito, Pacific University Oregon, John E. Begert, Pacific University Oregon, Nicola Carter, Pacific University Oregon, Danielle Backus, Pacific University Oregon, Ian C. Doyle, Pacific University Oregon.

The pharmacy workforce is seeing dramatic changes with a contrasting landscape of oversupply and shortages. Rural and underserved populations represent one area with urgent needs for more pharmacists. With the establishment of collaborative practice agreements, pharmacists in these communities can work alongside other healthcare professionals to manage chronic disease states, educate patients, evaluate the safety, appropriateness and effectiveness of medication regimens, and improve medication adherence. Highly trained and passionate pharmacists within these areas, as well as globally, can provide valuable patient care services, ultimately closing the healthcare gap, addressing health disparity, and improving patient outcomes. Pacific University School of Pharmacy has developed a Care for Underserved Populations Learning Track (CUP) and recently merged this Track with the Oregon Area Health Education Centers (AHEC) Scholars program, to provide a unique blend of training opportunities for our students. Our pharmacy students interact with health professions students from several programs, focus on team-based experiential and didactic education in rural and underserved care, and develop capstone research projects to hone critical thinking and interprofessional skills. Importantly, AHEC Scholars students are eligible to apply for the Primary Care Loan Forgiveness program, designed to meet workforce needs in rural Oregon. Two of our first four applicants in 2020 were the first pharmacy students in the state to be selected for loan forgiveness and upon graduation will complete a year-long service obligation in rural Oregon. This joint CUP/AHEC Track continues to strengthen our external collaborations and partnerships with health systems and pharmacies throughout the state and abroad.

Promoting Professional Identity Formation by Emphasizing Student Pharmacists as Advocates for Community Health and Wellness

Jessica L. Johnson, William Carey University, Donna M. Breese, William Carey University, Samantha Odem, William Carey University, Charles R. Breese, William Carey University, Timothy K. Fincher, William Carey University, Morkisha Dobard, William Carey University, Robin R Vidal, William Carey University.

Literature suggests that a student pharmacist’s Professional Identity Formation (PIF) depends on the development of a longitudinal, intentional, and integrative curricular approach. The William Carey University School of Pharmacy (WCUSOP) purposefully utilizes a broad and varied approach to ensuring student pharmacists form their professional identity in an appropriate and timely manner. Our PIF curriculum is founded in the theory of professional socialization and is carefully developed to introduce students to the profession, continually provide opportunities for growth and development, and ultimately support the self-development of professional identity by our student pharmacists. One specific and innovative component of our School’s PIF curriculum is an emphasis on student pharmacists as advocates for community health and wellness. To achieve this outcome, a curricular and co-curricular practice-based
approach provides our students opportunities to think, feel and act like pharmacist advocates. Ethics discussions on topics such as drug shortages and student engagement in “Brown Bag” wellness events, health fairs, and Legislative Days enable students to think like a pharmacist advocate. Shared readings, participation in culture festivals and poverty simulations, and use of professional white coats in daily dress encourage students to feel like a pharmacist advocate. To ensure student pharmacists act as advocates, training as pharmacist immunizers, service-learning opportunities, and wellness education events engage student pharmacists directly with members of the community. At WCUSOP, the curriculum and co-curriculum support student pharmacists in their development of a professional identity centered on community advocacy, providing them a foundation on which they transform the future practice of pharmacy.

**Put Me In, Coach. I’m Ready! Professional Identity Formation Through a Career Coach Program**

Priti Patel, University of Florida, Kathryn J. Smith, University of Florida, Sarah Mazorra, Karen Whalen, University of Florida, Shauna M. Buring, University of Florida.

Pharmacy students often start pharmacy school with a narrow understanding of the roles pharmacists play in the world. To develop a strong professional identity, the University of Florida College of Pharmacy matches each student with a Career Coach based on areas of interest in pharmacy practice and other Career Coach experience, such as current position title or involvement in professional organizations. Career Coaches are practicing pharmacists who volunteer their time to meet with students twice a year starting in the students’ first semester of pharmacy school and continuing until graduation. This co-curricular mentoring offers students an additional perspective on pharmacy practice beyond their faculty, co-workers and preceptors. Career Coaches meet with students to review student curriculum vitae, provide guidance in best practices in internship and job searches, reinforce the importance of involvement in professional organizations, and challenge the pharmacy student to consider ways they would like to grow as a pharmacist. Continuing Professional Development (CPD) assignments provide a framework for student-coach meetings. The CPD process, completed in annual cycles, asks the student to reflect on their current knowledge and skills, develop short- and long-term goals, and identify learning activities to achieve those goals, all with Career Coach guidance. The students complete the selected learning activities and in the last step in the CPD cycle, evaluate their progress, with further Career Coach feedback. The Career Coaches evaluate the student self-awareness and professionalism. Students evaluate coaches on their ability to serve as a role model, display professionalism, and provide quality feedback. Our unique Career Coach mentoring program ensures our students are well positioned to enter the workforce upon graduation.

**Putting Together the Pieces: Curricular Transformation for the Changing Future of Pharmacy**

Elizabeth A. Hall, The University of Tennessee, Kenneth C. Hohmeier, The University of Tennessee, Chasity M. Shelton, The University of Tennessee, Dawn E. Havrda, The University of Tennessee, Marie A. Chisholm-Burns, The University of Tennessee.

Objective: To prepare student pharmacists to adapt to and be knowledgeable of the shifts in the profession.

Methods: The University of Tennessee Health Science Center College of Pharmacy implemented four key curricular changes. Two sequential, three-credit hour courses were added to the second professional year to create a "problem and solution" approach to health systems leadership, management, and innovation. The fall course introduces students to the current healthcare status quo whereas the spring course focuses on a longitudinal project that involves students developing an innovative solution or service to address a problem identified in the current healthcare system. A new capstone course was developed and implemented directly prior to APPEs to evaluate student readiness ("APPE readiness") and assure the student is at the pre-entrustable level. Two certificate programs were moved to prior to beginning APPEs: the APhA Delivering Medication Therapy Management Services certificate and the NACDS Community Pharmacy-based Point-of-care Testing certificate. Lastly, career exploration and preparation were incorporated longitudinally into a professional development course series.

Results: A total of 200 students are currently completing the leadership course series, and 160 students have completed APPE ready and the certificate programs this academic year. Three student classes (n = 548) have participated in the career exploration and preparation activities. Additional data collection is ongoing and will be presented at the 2020 AACP Annual Meeting. Conclusion: Collectively, these four curricular transformations will better equip students to succeed in a changing professional environment.

**Required Spanish Coursework and Expanded Experiential Opportunities to Meet Community Needs and Improve Patient Care**

Russell T. Attridge, University of the Incarnate Word, Jeffrey Copeland, University of the Incarnate Word, Joanne Fazio-Gosser, University of the Incarnate Word, Amalia M. Mondriguez, David F. Maize, University of the Incarnate Word.
Revising a Professional Development Course Series to Enhance Professional Identity Formation

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In the Fall of 2019, Creighton launched a revised professional development course series to enhance professional identity formation and integrate development of self-awareness, leadership, innovation, and professionalism, integral parts of Standard 4 of the ACPE accreditation standards. Professional identity formation is developed in the four-course series through leadership education, co-curricular activities, IPPES, academic advising, and capstone reflection projects. The series also incorporates the use of a professional portfolio, called the Magis Plan. Magis is the Latin term used in Jesuit education to describe the value of excellence and working for the common good. Moreover, it embodies the importance of reflection and discernment in personal and professional development. The Magis Plan is used to ensure students achieve the learning objectives for the professional development series. As part of the plan, students set goals each fall and evaluate these goals each spring through a reflection paper or project. They also participate in a variety of activities, including Strengths Finder, revising their CV, and co-curricular activities. The final part of the Magis Plan is a professional development self-assessment, that is submitted to the academic advisor for their feedback and consultation. The Magis Plan is meant to simulate a continuous professional development plan and annual performance review process that many companies and health systems use in the profession. This poster will describe Creighton’s professional development course series, the Magis plan, and the scaffolding of professional identity formation throughout the pharmacy program. Initial assessment results demonstrating the success of this revised course series will also be shared.

Robot Webside Manner: Using Telepresence Robots to Teach Telehealth Communication Skills in Interprofessional Education

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Interprofessional education (IPE) remains a challenge for health professions schools across multiple campuses and in rural settings. The use of telepresence robots increases participation in high fidelity simulation for IPE for students across a state using telehealth scenarios. In addition, the students are able to practice communication strategies that are specific to telehealth such as introductions, explain different healthcare professional roles, practice camera and microphone use, and experience personal spacing with the patient and the telepresence robot. This pilot telehealth IPE addresses implementation challenges and recommendations for improvement. Telepresence robots were utilized by pharmacy students in Hilo, which is on the island of Hawaii, and with nursing students in Honolulu, which is on Oahu. Pharmacy students via robot were able to participate with a manikin patient and nursing students at the nursing simulation center to interview the patient and solve a medication-related problem. Debrief sessions after each scenario facilitated discussion on communication strategies that were challenging and/or effective and how to improve communication using the robot. At the end of the IPE, all students were asked to fill out a survey to evaluate their satisfaction, concerns, and recommendations.
for improvement. An activity such as this helps transform curriculum for the future of pharmacy as telehealth is growing at a rapid rate. With practice, students become more comfortable communicating with patients and other healthcare professions from a distance. This can be especially useful in situations where healthcare access is limited or if there is concern about communicable disease spread.

SBIRT Training: An Interprofessional Approach in Pharmacy Education
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The opioid crisis has made it essential to identify patients at risk for substance abuse and assist patients in avoiding and/or treating addiction. Pharmacists are well positioned to identify at risk patients, and provide education, support, and referrals. Screening, Brief Intervention, Referral to Treatment (SBIRT) is an evidence-based model that provides a systematic framework in assisting healthcare providers in performing substance abuse screenings and interventions. A multidisciplinary approach is crucial in ensuring that patients receive comprehensive care in preventing and battling addiction, therefore, together with Shenandoah’s Program of Physician Assistants (PA) Studies, the Shenandoah University School of Pharmacy developed and implemented an interprofessional education (IPE) SBIRT training event. The IPE event was integrated into a Patient Centered Care Laboratory Course for professional-year 3 student pharmacists and included professional-year 1 PA students. The three-hour event incorporated a guest speaker from Alcoholics Anonymous, an overview of SBIRT, and three rounds of case-based role-play exercises. Students worked interprofessionally in groups and practiced utilizing SBIRT. Each group consisted of at least one pharmacy and one PA student, and every student had the opportunity to role-play as the healthcare provider and patient. Large group debriefings followed each exercise and allowed for discussion and clarification. Survey feedback from both pharmacy and PA students was overwhelmingly positive, and as a result, SBIRT training will be incorporated into the PA Studies curriculum with the effort of both programs to continue this IPE event in future years. Because substance abuse training is encouraged for all healthcare professions, utilizing IPE is an excellent opportunity to prepare students from various disciplines to learn and incorporate these skills and prepare them for future practice.

Stakeholder Engagement to Enhance Student Learning
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The UNC Eshelman School of Pharmacy is committed to leading change in practice transformation. In 2015, the Center for Medication Optimization (CMO) was launched to bring together stakeholders to conduct research, disseminate best practices, and advance the role of the pharmacist in value-based care delivery. The Center was launched in alignment with implementation of a new PharmD curriculum. Critical to our success has been the role that external stakeholders play in helping ensure our students are well positioned to meet the needs of the changing workforce. Specifically, the Center has: 1) implemented a required course, Introduction to the US Healthcare System, where students are exposed to business leaders, payers and policy makers; 2) implemented a Health Policy and Managed Care elective with Blue Cross NC to expose students to emerging opportunities in managed care; 3) hosted CMO roundtables to foster student networking with leaders in the field; 4) engaged 40 CMO scholars in applied research with practitioners across healthcare settings; and 5) implemented postdoctoral fellowships in implementation science and health policy with local partners. In addition to the work of CMO, the School has engaged stakeholders to advance student learning through collaborations with: 1) the Schools of Business, Public Health and Medicine to design course offerings in the Business of Healthcare; 2) communities in rural Western, North Carolina to offer students experiences in interdisciplinary healthcare delivery; and 3) health systems, the industry, and independent community pharmacies to ensure our students are trained to meet the ever-changing roles of pharmacists in these settings. Insights will be shared on building strategic partnerships that provide rich learning experiences, while positioning students for contemporary and evolving careers in healthcare.

Stepwise Advocacy Training as a Means of Forming a Professional Pharmacy Practice Identity
Ryan S Ades, Manchester University, Kathryn K Marwitz, Manchester University, Sara N. Trovinger, Manchester University.

Objective: To demonstrate a commitment to introducing and shaping doctor of pharmacy students for professional advocacy through legislative action at Manchester University College of Pharmacy, Natural, and Health Sciences. Methods: Manchester University developed a longitudinal program where students are progressively exposed to legislative advocacy within the pharmacy curriculum. First year PharmD students begin by learning legislative structure, advocacy and lobbying
Take 5! Integrating Well-Being into a Required Course Sequence in a PharmD Curriculum

Kristine Mason, The Ohio State University, Maria C. Pruchnicki, The Ohio State University, Marjorie Winhoven, The Ohio State University, Brianne L. Porter, The Ohio State University, Ruth E. Emptage, The Ohio State University, James W. McAuley, The Ohio State University.

Literature assessing provider well-being has primarily focused on burnout with physicians, medical housestaff, and medical learners (students and residents). [eg, Siegell. Mitigating Burnout. Surg Clin North Am. 2019;99(5):1029-1035] One study of pharmacy residents found stress levels were comparable to those of cardiology medical residents. [Le HM, Young SD. Evaluation of stress experienced by pharmacy residents. Am J Health Syst Pharm. 2017;74(8):599-604.] Burnout is associated with negative outcomes including heart disease, inflammation, sleep disturbances, and changes in mood. [Skodova Z, Lajciakova P. The effect of personality traits and psychosocial training on burnout syndrome among healthcare students. Nurse Educ Today. 2013;33(11):1311-5.] Overall, the impact of burnout on medical providers, and similarities to pharmacists and pharmacy trainees, reinforces the need to further investigate strategies to prepare future pharmacists with resilience and self-care skills. As we prepare our students through rigorous curricula and experiential training, it is vital that we provide resources to promote well-being during their training to help them both now and in the future. Through Take 5’s, students gain awareness of the skills, engage in professional development around well-being, and practice selected techniques in the classroom setting. This project aims to implement and evaluate integrated solutions for pharmacy learners to promote well-being. This program describes a step-wise implementation of well-being promotion activities. These activities, including “Take 5’s,” have been tested in a newly-developed pharmacotherapy sequence and were informed by faculty and student input in the continuous design and improvement processes. Student and faculty experiences in the classroom have been well received.

Teaching to Practice: Aligning Curricular Change with the Transforming Role of the Pharmacist

Elizabeth M. Bald, The University of Utah, Diana I. Brixner, The University of Utah, Heather A. Nyman, The University of Utah, Hanna Raber, The University of Utah, Kyle Turner, The University of Utah.

As the pharmacy profession evolves, curricula must adapt to the needs of patients and the health care system. The University of Utah underwent curricular revision in 2016 to develop forward-thinking educational offerings regarding the critical role of in diverse practice settings. Four courses will be highlighted to demonstrate preparation for the future of pharmacy practice. Advanced Therapeutics: This didactic course prepares students to practice as members of a high-functioning clinical team. Through a case-based learning format, students work in groups to integrate their knowledge across multiple disease states to develop critical thinking and clinical-decision making skills. Pharmacy Practice Skills Lab: This longitudinal skills lab was developed with nursing faculty to prepare students to communicate effectively as a members of an interdisciplinary team and perform physical assessment skills across care settings. Video recording and simulation with standardized patients a provide students with hands on experience for peer feedback and self-reflection. Managed Care: As the cost of health care continues to rise, managed care health plans and pharmacy benefit managers increasingly rely on pharmacists for their expertise. The course is co-taught between a faculty member knowledgeable in managed care policy and a managed care executive, supplemented by a certificate program entitled “Student Fundamentals in Managed Care Pharmacy.” Creating Change in Pharmacy Through Leadership and Advocacy: The course offers students practical experience about various advocacy roles for pharmacists. Formal advocacy learning centers on the legislative process and how pharmacists
and professional organizations play a role in leading change for the profession at the state level. Informal advocacy learning takes a grass-roots approach to creating and fostering change within teams and organizations regardless of formal leadership positions.

The Impact of High School Health Camp Attendance on University Enrollment and Choice of Major

Daniel J. Hansen, South Dakota State University, Jane R. Mort, South Dakota State University, Greg Heiberger, Nathan Bylander, South Dakota State University.

Objective: Evaluate the number of students admitted to the University and their career/job pursuit after participating in an on-campus summer health camp. Methods: The Avera Health Professions Career Camp (AHPCC) is held every summer at South Dakota State University (SDSU). The Camp allows soon-to-be high school juniors and seniors opportunities to interact with health care professionals, engage in hands-on collegiate level scientific labs, observe health demonstrations, and tour regional health care facilities. Students learn about important aspects of health care professions including pharmacy, medicine, nursing, medical laboratory science, dentistry, chiropractic, optometry, physical therapy, athletic training, nutrition, and more. Data from the 2012 to 2015 cohorts were compiled to evaluate the number of students who ultimately enrolled in the University and if so, their major. Results: A total of 174 students attended the AHPCC in 2010-2014. Of those, 58.6% (n=102) enrolled in a South Dakota Board of Regents (SDBOR) institution, including 43.7% (n=76) who enrolled at SDSU. Of those who enrolled at SDSU, 75% (n=57) pursued a health-related major. Conclusions: Students who attended the AHPCC were more likely to attend an SDBOR institution after high school as opposed to attending an undergraduate institution, directly entering the workforce, going out-of-state, or attending a vocational school. Additionally, students were most likely to attend SDSU and pursue a health-related major during their academic career.

The Role of a School-Based CPESN Coordination Center in Transforming Community Pharmacy Practice

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Objectives: In California (CA), schools of pharmacy (SOP) partnered with the Community Pharmacy Enhanced Services Network (CPESN) to help transform community pharmacy practice in this state. To aid in this effort, study authors from this institution established a coordination center that manages the CPESN CA network in partnership with CPESN national leadership and faculty from other CA SOP. This study’s objectives are to describe the implementation, organization, and outcomes of a school based CPESN coordination center. Methods: This is a descriptive study that details the structure, processes, and outcomes of a school based CPESN coordinator center. Results: Seven CA SOP, led by the coordination center at this institution, partnered together with CPESN to transform community pharmacy practice in this state. This coordination center helped recruit 48 community pharmacies into the CPESN CA network along with 17 faculty who are assigned to work with individual pharmacies in their transformation efforts. A quality improvement process was also implemented by this coordination center which consists of monthly site surveys and progress reports to further aid the faculty. Conclusions: The CPESN CA network is an example of an academic collaboration to help transform community pharmacy practice. Lessons learned include the need to monitor each pharmacy’s progress as they work to meet CPESN CA network requirements, the role of pharmacy staff in transforming their own practice, and the role of faculty in engaging these pharmacies to help in this transformation effort. As the CPESN CA network continues to evolve, we will look to recruit additional community pharmacy sites, SOP, and individual faculty.

The University of Mississippi School of Pharmacy’s Strategic Leveraging of Partnerships in 21st Century Student Recruitment

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Objective: As national applications continue to decline, the University of Mississippi School of Pharmacy (UMSOP) is leveraging our internal and external partners to expand our reach to prospective students. Internal Partnerships: UMSOP utilizes Pharmacy Champions, alumni and/or friends who help identify prospective students in their hometowns and provide education about the profession in local schools. Alumni also assist by representing UMSOP at high school awards programs. UMSOP partners with our parent university to offer Summer College, a summer program where rising high school seniors learn about pharmacy and earn 6 college credits. UMSOP also hosts 2 one-week interactive summer Rebel Camps for 9-12 graders that highlight the profession. UMSOP Student Ambassadors assist in event communication efforts; they also offer tours, facilitate lab activities, and serve on student panels during campus visit and interview days. External Partnerships: UMSOP has executed preferred admission agreements with four other Mississippi higher education institutions and has initiated
a pre-pharmacy club in another. In 2020 UMSOP will join Mississippi HOSA (Future Health Professionals) to host a Pharmacy Science 101 Workshop specifically designed for high school science teachers and HOSA advisors. This workshop will give participants an overview of HOSA’s pharmacy science curriculum and 1 hour of CEUs. The goals of this interaction are to foster HOSA student development and to cultivate a UMSOP recruitment pipeline. Conclusion and Next Steps: UMSOP program evaluations and feedback from partners have been positive and have led to additional recruitment opportunities.

Training Student Pharmacists to Provide Clinical Community Pharmacy Services
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Faculty at Washington State University believe the role of the pharmacist in the community setting is transforming to include direct patient care responsibilities. Teaching future pharmacists the skills needed to excel in pharmacy practice involves providing education on innovative new clinical community services. To address this evolving direction WSU faculty created a new 2-credit course, Point-of-Care and Clinical Services, beginning in 2015. The goals of this course are to provide an educational experience focused on specific clinical services that can be provided in a community setting, to develop the knowledge, skills, and abilities needed to provide those patient care services, to instill independent clinical decision making skills, and to utilize collaborative drug therapy agreements for prescriptive authority when appropriate. Topics covered during this course includes performing point-of-care screening for influenza, group-A streptococcus, and human immunodeficiency virus, adult and pediatric immunization needs assessment and administration techniques, providing travel medicine consultations, and identifying and treating minor ailments and conditions. Additionally, this course is designed to meet the 2016 Accreditation Standards and Key Elements, specifically standards 2.1 Patient Centered Care, 2.4 Population-Based Care, and 3.3 Patient Advocacy, for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree. This course utilizes a non-traditional delivery model involving teaching and facilitating the entire course during the first week of the semester. Logistically, this is very challenging as it requires all other second-year courses to postpone instruction until the second week of the semester. This school poster describes the implementation of this new course and scholarship of teaching and learning research conducted to assess student learning and interest during the first four years.

Transforming Curriculum Using Micro-Credentials on the Pharmacist Patient Care Process
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The American Council of Pharmaceutical Education (ACPE) Standards for PharmD programs released in 2016 state that the Pharmacists’ Patient Care Process (PPCP) must be embedded into courses and experiences. Our school has transformed our curriculum by developing collaborative content consisting of five stackable modules on the PPCP, which can be used across pharmacy and health education professional and post-graduate programs. Completion of the modules results in an earned micro-credential (all badges completed) or digital badge (individual badge completion). Modules are composed of video vignettes used to model pharmacists effectively executing the PPCP foundational elements and patient care steps in various practice settings (eg, community, inpatient, ambulatory care). Each module contains an authentic assessment in which the learner demonstrates that specific skills were acquired. These modules were developed with input from students and build competency beyond that taught didactically. In addition to pharmacy students, the modules can be used by other healthcare professionals and students as part of Interprofessional Education (IPE) and prospective students (to understand the role of pharmacists). To ensure the PPCP is infused into all aspects of the curriculum and student experience, one introductory module is dually purposed as professional development to orientate faculty, staff and preceptors to the PPCP. This curricular transformation contributes to our preparation of work-ready pharmacists. The first module of the micro-credential for pharmacy students was offered in Fall 2019 and the second module was offered in Spring 2020. These included a pre- and post-assessment of knowledge and a post survey to evaluate the content. The results of these assessments will be presented which demonstrate an increase in knowledge on the PPCP and positive ratings of most content.
UIC Summer Pharmacy Institute: Impact on Interest in Pharmacy and Matriculation
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Background: Recruiting talented students to the profession is a strategic priority for UIC College of Pharmacy (COP). Starting in 2015 UIC teamed up with community partners to develop the Summer Pharmacy Institute (SPI) to educate undergraduate students on the profession and showcase the College. Methods: The UIC SPI curriculum consists of community, hospital, ambulatory care, and pharmaceutical industry presentations, activities, panel discussions, exercises, and site visits. Initially offered annually, the one-week program’s success prompted an expansion to two programs a year in 2019; funded by grant dollars and participant fees. Demographic data are collected and a series of satisfaction questions are assessed on a 1 to 5 Likert scale. Open ended questions for positive and constructive feedback are included. Application and matriculation rates into UIC COP are tracked. Results: The SPI has hosted 152 participants over five summers (2015-2019). The majority were juniors (48.7%). Top majors included chemistry (19.7%), biology (18.4%), and pre-pharmacy (15.1%), and biochemistry (12.5%). From 2016-2019 the top three areas represented were Illinois (43.1%), Puerto Rico (23.1%), and Wisconsin (8.5%). Ethnicity/race data collection began in 2018, of these participants 50.6% were underrepresented minorities. Data from 2015-2018 revealed 52% applied and 35% matriculated into UIC. Participants have reported a better understanding of the profession (4.99/5), a strengthened interest in pharmacy (4.93/5), and overall satisfaction with SPI (4.92/5). Discussion/Conclusion: UIC has demonstrated exceptional SPI participant satisfaction and successful recruitment into the College. Caution should be exercised with data interpretation, attendees may have prior interest in UIC and their application decision may be made prior to attending SPI. Regardless, SPI remains a good tool to develop a better understanding and interest in pharmacy.

Unique Learning Opportunities for Students Pharmacists in a Changing Workforce
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Pharmacists roles are expanding in patient care, leadership, and research and discovery. Our College offers students several unique experiences to meet these expanding roles. Students gain knowledge and develop skills in a number of focus areas with faculty mentors through didactic, experiential, and self-directed learning. In the interprofessional mental health focus area, students learn collaboratively with psychiatric doctor of nursing students to gain additional interprofessional practice and mental health care skills. The AMCP students partner with local managed care pharmacists, providing a network for focused education, experience, and networking opportunities. Students have opportunities to engage in pharmacogenomic (PGx) discovery, translational and implementation research projects. Others engage in PGx practice opportunities. Advanced students are involved in building PGx education for healthcare professionals. Additional experiences are available in the Research Emphasis Area tracks in Experimental and Clinical Pharmacology, Social and Administrative Pharmacy, or Medicinal Chemistry, or the Leadership Emphasis Area track, where additional required curricular coursework and experiential learning is necessary for completion. Dual degrees in Masters in Business Administration, Masters in Health Informatics, and Masters in Public Health are offered as well. Additionally, we continue to explore new ways to expose our students to unique pharmacy practice areas, such as facilitation of internship experiences through partnerships with external practitioners and micro-credentialing based on College and external experiences, along with continued expansion of offerings for experiential learning. A recently developed interprofessional remote discharge process is an educational opportunity where pharmacy students perform medication reconciliation in parallel with medical students preparing discharge summaries for hospital providers who are preparing patients for discharge. These offerings for our students provide career forming opportunities for our evolving profession and changing workforce.

Utilization of a Telehealth Center to Prepare Students for a Changing Healthcare Environment
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Background: For the past decade, the healthcare system has been transitioning from a fee-for-service to a value-based care reimbursement model. The profession of pharmacy is expanding its role in collaborative care and is simultaneously faced with serious reimbursement challenges in the traditional dispensing environment.
Pharmacy educators must provide experiences to students that develop and enhance their communication skills, engage them in entrepreneurial endeavors, and allow them to create and participate in the provision of services outside of traditional pharmacy settings. Objectives: The University of Findlay College of Pharmacy has developed an on-campus Telehealth Center (THC) which provides students opportunities to identify and resolve medication-related and health-related problems for real-life patients, as well as for providers and payers for services. Methods: The THC partners with multiple external stakeholders in the delivery of healthcare services to identify their medication-related health and financial outcome priorities. A plan is then collaboratively developed to address these priorities. Students are involved in the development and execution of new services, compliance, daily operations, marketing, and clinical initiatives. In this way, students are being trained to meet the changing needs of the healthcare workforce. One-on-one peer training and group discussions also serve to foster comradery and a positive coaching relationship between pharmacists and pharmacy students in the THC. Outcomes: Students are involved in the THC as part of didactic curriculum, internship, IPPE, APPE, residency and fellowship experiences. Individuals trained in the THC have been nationally recognized for their ability to perform clinical and drug information services. Discussion/Conclusion: The Telehealth Center continues to expand practice and research opportunities in a variety of clinical and non-clinical settings to provide non-traditional and innovative opportunities for students.

Utilizing Jesuit Principles to Engage Pharmacy School Applicants
Megan Leeds, Regis University, Erika Freitas, Regis University, Peter Clapp, Regis University, Allyson L. Spence, Regis University, Stephanie F. James, Regis University.

Regis School of Pharmacy was founded on the Ignatian Catholic principles of Regis University, which focus on the moral and ethical character of its students. As such, it is important that our admissions process selects students who align with Jesuit values and seek to participate in a uniquely collaborative learning environment. Nationally, the number of highly-qualified students with an interest in the pharmacy profession has dwindled. As colleges and schools of pharmacy are dropping PCAT requirements and reducing target enrollments, Regis has remained focused on recruiting students who want a personally transformative education. To accomplish this goal, we have been working with regional high schools and organizations that provide educational opportunities for underserved students (eg, Colorado Student Leaders Institute). In our efforts to address the underrepresented minority groups in the field of pharmacy and produce culturally competent pharmacists, we have been conducting outreach programs that reach diverse student populations (eg, through the Regis SNPhA chapter). Our admissions strategy is anchored by a holistic applicant review process that considers a multitude of factors including empathy, social justice and cultural sensitivity (evaluated through Multiple Mini Interviews), as well as more traditional factors such as grade-point average and test scores. By maximizing our effort to establish an institutional identity, we work to strengthen the diversity and commitment to our guiding principles for each incoming class.

Utilizing Teleprecepting for Experiential Education Within a Pharmacist-Led Diabetes Service
James J. Sterrett, Medical University of South Carolina.

Introduction: Federally Qualified Healthcare Centers (FQHCs) provide care to underserved communities with complex medical needs. Health disparities present in this population evince a disproportionally higher risk of diabetes-related morbidity and mortality. Unfortunately, the FQHCs that serve these patients often have limited access to expert-led diabetes care teams such as those in academic health centers. Creating a new model leveraging technology and incorporating student pharmacists allows students to experience telehealth services (telecare and teleconsulting) and onsite practice supported by faculty (teleprecepting) and improves patient health outcomes. Objectives: Evaluate the impact of an innovative service model leveraging telehealth on patient outcomes and student confidence and satisfaction. Methods: Single center, retrospective cohort study of adult patients with diabetes mellitus type 2 who had at least one diabetes management/education visit between January 1, 2018 and December 31, 2019 and who had at least one A1c value recorded before and after the visit. Data collection occurred through electronic medical record reporting. Pre-and post-diabetes knowledge and practice confidence surveys and an end of rotation student satisfaction survey were provided. Results: 254 patients were included in the study of the 300 participating in diabetes service programming. The median (IQR) beginning A1c was 10.1% (8.9 to 11.8%) and the median (IQR) ending A1c was 8.5% (7.5 to 10.3) which is a 1.6 point decrease (p value <0.001). Knowledge self-assessment and student satisfaction scores of the preceptor, the telehealth technology, and the practice experience were all high due to a sense of greater responsibility, autonomy, and felt professional growth. Conclusions: A Pharmacist-led diabetes service augmented with both student pharmacists and telehealth
technology is an innovative and effective practice and training model.

Wellness as a Component of the Curriculum and Co-Curriculum at the University of New England

Sarah B. Vincent, University of New England, Sydney P. Springer, University of New England, Emily K. Dornblaser, University of New England, Ashley Barba, University of New England, Jean M. Woodward, University of New England.

The educational literature is replete with data suggesting the positive impact of wellness behaviors on student success in the 21st century. Pharmacy graduates with a background in wellness and integrative/complementary medicine will become increasingly important as we expand our understanding of the role social determinants, such as emotional and cognitive influences, have on health. The University of New England College of Pharmacy has adopted both a curricular and co-curricular approach to wellness. We have established a specialty track in Wellness and Integrative Medicine that will prepare students, through both didactic and experiential coursework, to employ evidence-based treatments that enhance a patient’s whole well-being. In addition, the college has established a Wellness Task Force with the goal of enhancing the mental and physical health of all members of the college community, which includes stress management and preventing burnout. We believe that an essential component of transforming contemporary pharmacy practice is to ensure graduates are prepared to provide optimal patient care through an understanding and validation of alternative medical treatments that emphasize patient well-being. Moreover, in order for students and faculty to successfully navigate the challenges associated with learning and teaching in today’s environment, an appreciation for the value of embracing behaviors that enhance personal and professional well-being is essential.