UC Irvine
School of Pharmacy &
Pharmaceutical Sciences

Experiential Accreditation Requirements

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representing the California Pharmacy Council

Standards 2025

- Accreditation Council for Pharmacy Education (ACPE) maintains standards for schools/colleges of pharmacy education
- Standards 2025
  - Approved by ACPE Board of Directors June 14, 2024
  - Released July 1, 2024
  - Effective date July 1, 2025

Standards 2025 – Key Differences

- Format
  - One document
  - Standards 2016 included standards as well as guidance document
- Philosophy and Emphasis
  - Graduates should be practice-ready and team-ready
  - Diagnose and prescribe as part of therapeutic treatment planning

  Standards focus on

  1) development of students' professional knowledge, skills, abilities, behaviors, and attitudes, including scientific foundation, knowledge application, and practice competencies

  (2) the manner in which programs assess students' acquisition of knowledge and application of knowledge to practice

  (3) mastery of skills and achievement of competencies

  (4) the importance of both curricular and co-curricular experiences in advancing the professional development of students

Standards 2025 – Key Differences (cont'd)

- Importance of assessment
  - Use of outcome data
  - Means of determining and improving the quality of pharmacy education
- Organization of standards
  - Same critical areas
  - Restructured, clarified, simplified
- Innovation
  - Programs may choose how to meet standards
  - Provide evidence of meeting standards
- Style
  - Chicago Manual of Style, 15th Edition

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ACPE Standards 2025

Standard 1: Organization and Governance
Standard 2: Curriculum
Standard 3: Experiential Learning
Standard 4: Students and Student Services
Standard 5: Faculty and Staff
Standard 6: Resources
Standard 7: Assessment

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Standard 3: Experiential Learning

- 3.1: Introductory Pharmacy Practice Experiences (IPPEs)
  - Common contemporary pharmacy practice models
  - *No less than* 300 hours
    - 75 hours community
    - 75 hours hospital/health system
    - Remaining 150 hours various settings but must include patient care
  - Simulation cannot be used towards this requirement
  - Students can “place out” of some required hours
    - Document achievement of outcomes
    - Replace with other patient care IPPE hours

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Standard 3: Experiential Learning

- 3.2 Advanced Pharmacy Practice Experiences (APPEs)
  - Emphasize continuity of care and incorporate acute, chronic, and wellness-promoting patient-care services
  - Expose students to diverse populations
- Duration is *no less than* 1440 hours (36 weeks)
  - Each APPE at least 160 hours
  - Majority focused on patient care
    - Electives may be non-patient care
    - Max 320 hours
- Required APPEs include community, ambulatory care, hospital/health systems, inpatient adult care

Total hours: 1740

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Standard 3: Experiential Learning

Documents required by ACPE

- Overview of IPPE and APPE curriculum (duration, types of required and elective rotations, etc.)
- Student manual for IPPE and APPEs
- Preceptor manual for IPPE and APPEs
- Student and preceptor IPPE and APPE evaluation tools
- Preceptor recruitment and training manuals and/or programs
- Student APPE evaluation data documenting exposure to diverse patient populations and interprofessional, team-based patient care
- Policies and procedures related to preceptor recruitment, orientation, development, performance review, promotion, and retention

Standard 3: Experiential Learning

Documents required by ACPE – cont'd

- A list of active preceptors and practices sites (classified by type of practices), specifying IPPE and/or APPE, with number of
- Policies and procedures related to preceptor recruitment, orientation, development, performance review, promotion, and retention
- A list of active preceptors and practices sites (classified by type of practices), specifying IPPE and/or APPE, with number of students served, interaction with other health professional students and practitioners, the number of pharmacy or other preceptors serving the facility, and their licensure status. (Sites with student placements in the past 3 years should be identified.)
- ACPE IPPE Capacity Chart
- ACPE APPE Capacity Chart

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Standard 3: Experiential Learning

Additionally, programs must describe:

- How student performance is assessed and documented, including the nature and extent of patient and health care professional interactions, and the attainment of desired outcomes.
- How the college or school ensures that the majority of students' IPPE hours are provided in and balanced between community pharmacy and institutional health system settings.
- How the practice experiences assure that students have interactions with diverse patient populations in a variety of health care settings.
- How the college or school ensures that students' APPE hours fulfill the required four practice settings.
- How the college or school provides students with in-depth experience in delivering patient care as part of an interprofessional team.
- How the college or school provides students with elective APPEs including opportunities that involve patient care that allow students the opportunity to explore a variety of practice settings

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Standard 3: Experiential Learning

Additionally, programs must describe (continued):

- How the college or school distinguishes between introductory and advanced practice experiences.
- How the college or school applies the policies and procedures for preceptor recruitment, orientation, performance review, and evaluation.
- How the college or school fosters the professional development of its preceptors commensurate with their educational responsibilities to the program.
- How the college or school assures, measures, and maintains the quality of sites and preceptors used for practice experiences.
- How the college or school determines the need to discontinue a using a site and/or preceptor that does not meet preset quality criteria

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Standard 3: Experiential Learning

Additionally, programs must describe (continued):

- The number and percentage of all IPPEs and APPEs precepted by non-pharmacists categorized by type of experience.
- The college or school's student-to-preceptor ratio and how the ratio allows for individualized mentoring and targeted professional development of learners.
- The process for soliciting active involvement of preceptors including those practicing at a distance in the continuous quality improvement of the education program, especially the experiential component.
- The strategies used for the ongoing quantitative and qualitative development of sites and preceptors and formalization of affiliation agreements.
- Any other notable achievements, innovations or quality improvements (if applicable).
- Provide an interpretation of the data from the applicable AACP standardized survey questions, especially notable differences from national or peer group norms

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Entrustable Professional Activities

EPAs describe the work of pharmacists as workplace tasks and responsibilities that all students are entrusted to do in the experiential setting with direct or distant supervision

1. Collect information necessary to identify a patient's medication-related problems and health-related needs.
2. Assess collected information to determine a patient's medication-related problems and health-related needs.
3. Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.
4. Contribute patient-specific medication-related expertise as part of an interprofessional care team.
5. Answer medication-related questions using scientific literature.
6. Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.

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Entrustable Professional Activities (cont'd)

7. Fulfill a medication order.

8. Educate the patient and others trusted by the patient regarding the appropriate use of a medication, device to administer a medication, or self-monitoring test.

9. Monitor and evaluate the safety and effectiveness of a care plan.

10. Report adverse drug events and/or medication errors in accordance with site-specific procedures.

11. Deliver medication or health-related education to health professionals or the public.

12. Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.

13. Perform the technical, administrative, and supporting operations of a pharmacy practice site.

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