



From Learning to Leading: The Value of Curricular Outcomes and Entrustable Professional Activities (COEPAs)

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Learning Objectives

- Demonstrate the importance of COEPA as it relates to the workforce and post-graduate education
- Illustrate the different degrees of entrustment regarding COEPA
- Interpret appropriate activities on fulfilling COEPA requirement

Speaker Disclosure

- Michael Liu has no actual or potential relevant financial relationship with any commercial interest in relation to this program

Acknowledgment

- Touro College of Pharmacy's Curriculum Committee: the development and implementation of COEPA at our college

Background

- ACPE: Accreditation Council for Pharmacy Education
 - *Sets standards for the education of pharmacists...since 1932, ACPE has worked with educational institutions and organizations to assure excellence is available for people in the pharmacy profession*
- AACP: American Association of Colleges of Pharmacy
 - *Advance pharmacy education, research, scholarship, practice and service, in partnership with members and stakeholders, to improve health for all*

ACPE “Standards 2025” for PharmD Program

- 7 Standards
- Standard 2. Curriculum
 - 2.1 Educational Outcomes and Activities: *Adapted from the AACP’s Curriculum Outcomes and Entrustable Professional Activities (COEPA), 2022*

2.1 Educational Outcomes and Activities

Adapted from the American Association of Colleges of Pharmacy’s Curriculum Outcomes and Entrustable Professional Activities (COEPA), 2022.

Professional Development Activities

2.1.m Entrustable professional activities – The program develops and assesses the achievement of professional activities a graduate can perform routinely designed to gain the trust of the healthcare team and the public.

EPAs Besides ACPE PharmD Accreditation

- Mandatory standards:
 - Accreditation Council for Graduate Medical Education (ACGME)
 - Council on Social Work Education (CSWE)
 - EPAS: Educational Policy and Accreditation Standards – competencies demonstrated through observable behaviors
- Frameworks/non-mandatory:
 - PAs, NPs, PT, DVM, DDS

What are Curricular Outcomes?

- Educational outcomes
 - *Knowledge, Skills, and Attitudes of pharmacists that all (PharmD) students should demonstrate upon graduation*
 - **KSAs** similar to **KSAOs** in talent acquisition, except replaces **A**ilities with **A**ttitudes, and missing **O**ther characteristics



Domain	Sub-Domain #	Sub-Domain	One Word Descriptor	Outcome Description
1 Knowledge	1.1	Scientific Thinking	Learner	Seek, analyze, integrate, and apply foundational knowledge of medications and pharmacy practice (biomedical; pharmaceutical; social, behavioral, administrative; and clinical sciences; drug classes; and digital health) . ^{16,20}
2 Skills	2.1	Problem-solving Process	Problem-solver	Use problem solving ²¹ and critical thinking skills ²²⁻²³ , along with an innovative mindset ²⁴ , to address challenges and to promote positive change.
	2.2	Communication	Communicator	Actively engage, listen, and communicate ²⁵ verbally, nonverbally, and in writing when interacting with or educating ²⁶ an individual, group, or organization.
	2.3	Cultural and Structural Humility ^{27,28}	Ally	Mitigate health disparities ²⁹ by considering, recognizing, and navigating ³⁰ cultural and structural factors ^{28,31} (e.g. social determinants of health ³² , diversity, equity, inclusion, and accessibility) to improve access and health outcomes.
	2.4	Person-centered Care ^{33,34}	Provider	Provide whole person care ³⁵ to individuals as the medication specialist ³⁷ using the Pharmacists' Patient Care Process ⁶
	2.5	Advocacy ³⁸⁻⁴⁰	Advocate	Promote the best interests of patients and/or the pharmacy profession within healthcare settings and at the community, state, or national level.
	2.6	Medication-use Process Stewardship	Steward	Optimize ⁴¹⁻⁴³ patient healthcare outcomes using human, financial, technological, and physical resources to improve the safety, efficacy, and environmental impact of medication use systems . ⁴⁴
	2.7	Interprofessional Collaboration	Collaborator	Actively engage and contribute as a healthcare team member by demonstrating core interprofessional competencies. ¹¹
	2.8	Population Health and Wellness	Promoter	Assess factors that influence the health and wellness of a population and develop strategies to address those factors. ⁴⁵
3 Attitudes	2.9	Leadership ^{46,47}	Leader	Demonstrate the ability to influence and support the achievement of shared goals on a team, regardless of one's role.
	3.1	Self-awareness	Self-aware	Examine, reflect on, and address personal and professional attributes (e.g., knowledge, metacognition , ^{48,49} skills, abilities, beliefs, biases, motivation, help-seeking strategies , ⁵⁰ and emotional intelligence ⁵¹ that could enhance or limit growth, development, & professional identity formation . ¹²⁻¹⁴
	3.2	Professionalism ⁵²	Professional	Exhibit attitudes and behaviors that embody a commitment to building and maintaining trust with patients, colleagues, other health care professionals, and society. ⁹

*Bolted words are listed in Table 3 that includes a glossary of terms, definitions, and references.



EXPN 845: APPE Institutional

Learning Outcomes

- 1.1 Scientific Thinking (Learner)** – Seek, analyze, integrate and apply foundational knowledge of medications and pharmacy practice (biomedical; pharmaceutical, social, behavioral, administrative, clinical sciences, drug classes; and digital health) (a-f)
- 2.1 Problem-solving process (Problem Solver)** – Use problem solving and critical thinking skills, along with an innovative mindset, to address challenges and to promote positive change. (a-g)
- 2.2 Communication (Communicator)** – Actively engage, listen and communicate verbally, nonverbally, and in writing when interacting with or educating an individual, group, or organization. (a-k)
- 2.4. Person-centered care (Provider)** - Provide whole person care to individuals as the medication specialist using the Pharmacists' Patient Care Process. (a, b, d, f)
- 2.6. Medication-use process stewardship (Steward)** - Optimize patient healthcare outcomes using human, financial, technological, and physical resources to improve the safety, efficacy, and environmental impact of medication-use systems. (a-f)
- 2.7. Interprofessional collaboration (Collaborator)** - Actively engage and contribute as a healthcare team member by demonstrating core interprofessional competencies. (a-d)
- 2.9 Leadership (Leader)** – Demonstrate the ability to influence and support the achievement of shared goals on a team, regardless of one's role. (a-g)
- 3.1 Self-awareness (Self-aware)** – Examine, reflect on, and address personal and professional attributes (e.g., knowledge, metacognition, skills, abilities, beliefs, biases, motivation, help-seeking strategies, and emotional intelligence that could enhance or limit growth, development, & professional identity formation). (a-g)
- 3.2 Professionalism (Professional)** – Exhibit attitudes and behaviors that embody a commitment to building and maintaining trust with patients, colleagues, other health care professionals, and society. (a-f)

2.3. Cultural and Structural Humility

2.5: Advocacy

2.8: Population Health and Wellness

Curriculum Map

TCOP Curricular Outcomes

Domain 1 – Knowledge

Subdomain

1.1. Scientific Thinking (Learner): *Seek, analyze, integrate, and apply foundational knowledge of medications and pharmacy practice (biomedical; pharmaceutical; social, behavioral, administrative; clinical sciences; drug classes; and digital health).*

Learning Objectives

- a. Develop and demonstrate depth and breadth of knowledge in biomedical, pharmaceutical, social/behavioral/administrative, clinical sciences, and healthcare technology (e.g., informatics, digital health).
- b. Articulate how knowledge in foundational sciences is integral to clinical reasoning; evaluation of future advances in medicine; supporting health and wellness initiatives; and delivery of contemporary pharmacy services.
- c. Integrate knowledge from multiple foundational sciences to explain how specific drugs or drug classes work, compare differences among therapeutic regimens, and evaluate their potential value in individuals and populations

- d. Apply knowledge in foundational sciences to solve therapeutic problems, to advance patient-centered care and population-based care
- e. Apply critical thinking skills to evaluate information (e.g., scientific literature, emerging theories, technologies) and determine if factual, reliable, accurate, fair, objective, and/or appropriate by systematically examining the problem, evidence, and solution
- f. Critically analyze scientific literature related to drugs and diseases to enhance clinical decision making

Curriculum Map_{cont.}

2.4 Person-centered Care (Provider): <i>Provide who person care to individuals as the medication specialist using the Pharmacists' Patient Care Process</i>	d. Implement individualized, person-centered care plans
Learning Objectives	
a. Collect subjective and objective information related to the patient in order to identify a patient's medication-related problems	e. Follow-up and monitor the patient and adjust the care plan as needed
b. Assess the health needs of a targeted patient population	f. Document person-centered care related activities
c. Formulate evidence-based and cost-effective care goals, plans, assessments, and recommendations	

Curriculum Map_{cont.}

Instructions for Filling Out the Curriculum Map

A. Insert expected knowledge or skill level of each course	B. Insert instructional methods utilized to teach the outcome in the course	C. Insert how the outcome is assessed in the course
<p>For each course you are associated with listed in the columns determine which, if any, of the outcomes listed in the far-left column are addressed and/or assessed in the course.</p>	<p>For each outcome addressed in the course enter the instructional method(s) utilized in and out of class to teach the outcome and to prepare students for assessments.</p>	<p>For each outcome addressed in the course enter the assessment methods utilized to measure student achievement of the outcome.</p>
<p>Enter an "I" to indicate students are <i>introduced</i> to the outcome. Enter "R" to indicate the outcome is <i>reinforced</i> and students are afforded opportunities to practice the outcome. Enter "M" to indicate students have had sufficient practice to demonstrate <i>mastery</i> of the outcome.</p>	<p>Frequently used instructional activities are listed below. (This list is not all-inclusive; faculty should insert any activities not found in this list.) Enter "1" for case study; "2" for group discussion or group work, "3" for laboratory, "4" lecture, "5" for oral presentation, "6" for written assignment, "7" for homework problems/exercises, "8" for reading assignments, "9" for other. For other activities briefly describe the activity in the far-right column associated with the outcome.</p>	<p>Frequently used assessment strategies are listed below. (This list is not all-inclusive; faculty should insert any assessment strategies not found in this list.) "A" for case study, "B" for written examination, "C" for oral examination, "D" for laboratory examination, "E" for graded group discussion or group work, "F" for reflective essay, "G" for graded written assignments or problem sets, "H" for other. For other assessments briefly describe the assessment in the far-right column associated with the outcome.</p>

Grading Policy:

To successfully pass the course, the student must meet ALL of the following:

1. Abide to the professionalism code of conduct as outlined in the OPE manual
AND
2. Receive a \geq C letter grade (≥ 69.5)

The following grading scheme will be adhered to:

Letter	Percentage	Grade Value
A	89.5 - 100	4.0 on 4 –point scale
B+	86.5 - < 89.5	3.33 on a 4-point scale
B	79.5 - <86.5	3.0 on a 4-point scale
C+	76.5 - <79.5	2.33 on a 4-point scale
C	69.5 - <76.5	2.0 on a 4-point scale
F	< 69.5	0.0 on a 4-point scale
INC	NA	Incomplete
W	NA	NA
WF	NA	0.0 Withdrawal - Unsatisfactory
WNA	NA	Withdrew Never Attended

*End of course grades will be rounded to the nearest tenth (0.1) decimal place from the hundredth (0.01) decimal place.

What are EPAs?

- EPAs
 - *Work of pharmacists as workplace tasks and responsibilities that all students are entrusted to do in the experiential setting with direct or distant supervision*
 - Covers Other characteristics, namely trust, moral compass, willingness to ask for help, work culture fit
 - Demonstrates **KSA** in practice

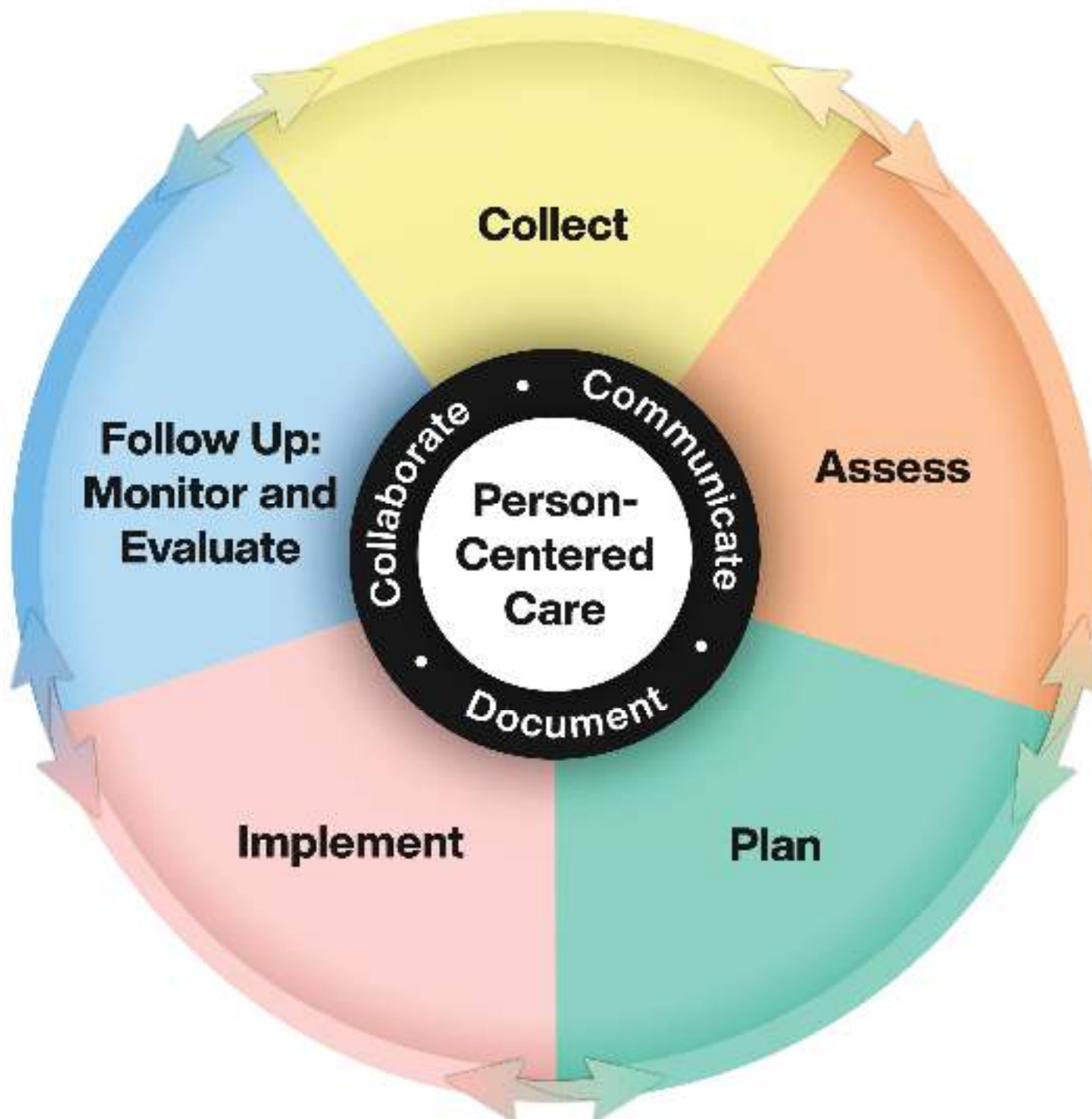


Activity
1. Collect information necessary to identify a patient's medication-related problems and health-related needs.
2. Assess collected information to determine a patient's medication-related problems and health-related needs.
3. Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment. ⁴¹⁻⁴³
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.
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. ²⁶
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. ²⁶
12. Identify populations at risk for prevalent diseases and preventable adverse medication outcomes. ⁴⁵
13. Perform the technical, administrative, and supporting operations of a pharmacy practice site.

- Plan: 1, Assess: 2, Plan: 3 – 5, Implement: 6 – 8, Monitor: 9 - 10



Pharmacists' Patient Care Process



Why Should You Care about EPAs?

- EPAs are not “possessed” by a trainee, rather it is “owned” by a profession and “delegated/given/privilege” to a practitioner/trainee to execute
- Except for-profit-sector, health care professionals are public servants

Oath of a Pharmacist

The revised Oath was adopted by the AACP Board of Directors and the APhA Board of Trustees in August 2025.

"I promise to devote myself to a lifetime of service to others through the profession of pharmacy. In fulfilling this vow:

- I will consider the welfare of humanity and relief of suffering my primary concerns.
- I will promote inclusion and belonging, respect differences in all individuals, and address health disparities to advance health equity for all people.
- I will apply my knowledge, experience, and skills to the best of my ability to assure optimal outcomes for all patients.
- I will respect and protect all personal and health information entrusted to me.
- I will accept the responsibility to improve my professional knowledge, expertise, and self-awareness.
- I will hold myself and my colleagues to the highest principles of our profession's moral, ethical and legal conduct.
- I will embrace and advocate changes that improve patient care.
- I will utilize my knowledge, skills, experiences, and values to prepare the next generation of pharmacists.

I take these vows voluntarily with the full realization of the responsibility with which I am entrusted by the public."



<https://www.pharmacist.com/About/Oath-of-a-Pharmacist>

Any use of the title "pharmacist" within New York State requires licensure.

To be licensed as a pharmacist in New York State you must:

- be of good moral character;
- be at least 21 years of age; and
- meet education, examination, and experience requirements.

5. The applicant shall have satisfied the good moral character and criminal history background check requirements set forth in N.J.A.C. 13:39-2.3 and 2.4.

ULM pharmacy student charged with distributing narcotics



Ian Robinson

Monroe News-Star

Dec. 21, 2022, 1:07 p.m. CT

NEWS

URI pharmacy professor found guilty of approving bogus prescriptions

Brian Amaral The Providence Journal

May 3, 2019, 10:00 a.m. ET

Ex-Mount Sinai Pharmacy Chief Accused of Stealing Nearly 200,000 Pain Pills

By Jennifer Peltz • Published July 8, 2014 • Updated on July 8, 2014 at 2:12 pm

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Talent Acquisition: Predictors

Predictors	Use	Cost	Reliability	Validity	Utility	Applicant Reactions	Adverse Impact
Personality tests	Low	Low	High	Moderate	?	Negative	Low
Ability tests	Low	Low	High	High	High	Negative	High
Emotional intelligence tests	Moderate	Low	High	Low	?	?	Low
Performance tests and work samples	Moderate	High	High	High	High	Positive	Low
Situational judgment tests	Low	High	Moderate	Moderate	?	Positive	Moderate
Integrity tests	Low	Low	High	High	High	Negative	Low
Interest, values, and preference inventories	Low	Low	High	Low	?	?	Low
Structured interviews	Moderate	High	Moderate	High	?	Positive	Mixed
Team assessments	Low	Moderate	?	?	?	Positive	?

ASHP PGY1 Pharm Residency: Competency Areas, Goals, & Objectives (CAGO)

PGY1 Pharmacy Crosswalk	
Harmonized PGY1 Pharmacy, Managed Care, Community-Based CAGO (2024) <i>*Indicates Objective results in a resident deliverable</i>	PGY1 Pharmacy CAGO (2015) <i>Objectives with differing Blooms Taxonomy levels than the 2024 CAGOs indicated with red text.</i>
Goal R1.1: Provide safe and effective patient care services following JCPP (Pharmacists' Patient Care Process).	
R1.1.1: (Analyzing) Collect relevant subjective and objective information about the patient.	R1.1.3: (Analyzing) Collect information on which to base safe and effective medication therapy.
R1.1.2: (Evaluating) Assess clinical information collected and analyze its impact on the patient's overall health goals.	R1.1.4: (Analyzing) Analyze and assess information on which to base safe and effective medication therapy.
R1.1.3: (Creating) Develop evidence-based, cost-effective, and comprehensive patient-centered care plans.	R1.1.5: (Creating) Design or redesign safe and effective patient-centered therapeutic regimens and monitoring plans (care plans).
R1.1.4: (Applying) Implement care plans.	R1.1.6: (Applying) Ensure implementation of therapeutic regimens and monitoring plans (care plans) by taking appropriate follow-up actions.
R1.1.5: (Creating) Follow-up: Monitor therapy, evaluate progress toward or achievement of patient outcomes, and modify care plans.	R1.1.8: (Applying) Demonstrate responsibility to patients.
R1.1.6: (Analyzing) Identify and address medication-related needs of individual patients experiencing care transitions regarding physical location, level of care, providers, or access to medications.	R1.2.1: (Applying) Manage transitions of care effectively.
Goal R1.2: Provide patient-centered care through interacting and facilitating effective communication with patients, caregivers, and stakeholders.	
R1.2.1: (Applying) Collaborate and communicate with healthcare team members.	R1.1.1: (Applying) Interact effectively with health care teams to manage patients' medication therapy.
R1.2.2: (Applying) Communicate effectively with patients and caregivers.	R1.1.2: (Applying) Interact effectively with patients, family members, and caregivers.
R1.2.3: (Applying) Document patient care activities in the medical record or where appropriate.	R1.1.7: (Applying) Document direct patient care activities appropriately in the medical record or where appropriate.
Goal R1.3: Promote safe and effective access to medication therapy.	
R1.3.1: (Applying) Facilitate the medication-use process related to formulary management or medication access.	R1.3.2: (Applying) Manage aspects of the medication-use process related to formulary management.



ASHP PGY1 Pharm Residency: CAGO_{cont.}

Competency Area R1: Patient Care		
Goal R1.1: Provide safe and effective patient care services following JCPP (Pharmacists' Patient Care Process).		
Obj. #	Objective	Example Activities –Examples listed are intended to generate ideas when creating appropriate activities. Ensure activities are tailored to the practice site / learning environment.
R1.1.1	(Analyzing) Collect relevant subjective and objective information about the patient.	<ul style="list-style-type: none"> • Collect pertinent information on each assigned patient from available resources (e.g., medical record, patient's nurse, caregiver, and/or patient) every morning prior to rounds and record data on a secure patient monitoring form. • Review [FILL IN SPECIFIC LABS] (e.g., INR's), medical record, and interview patients before adjusting [FILL IN SPECIFIC MEDICATION] (e.g., warfarin) therapy. • Review laboratory values, medication administration, and other pertinent data prior to adjusting medications in pharmacy-managed protocols. • Perform a medication history, review medical record, and contact patient's pharmacy or prescribing physician as needed when performing medication reconciliation. • Collect pertinent information, including past medical history, medication list, laboratory or test results, and from progress notes, on each patient from the electronic health record prior to clinic. • Interview patient regarding changes in medications and any possible side effects experienced since last clinic appointment. • Collect and assess appropriate information necessary to safely dispense a medication and to identify and detect actual or potential therapeutic problems. • Conduct a medication and medical history including patient lifestyle habits, preferences and beliefs, health and functional goals, and socioeconomic factors that affect access to medications and other aspects of care. • Conduct a comprehensive immunization history including accessing the immunization information system. • Gather any subjective or objective information needed from other sources including other health care professionals and patient records.



Level	Description
Observe only	Learner is permitted to observe only. Even with direct supervision, learner is not entrusted to perform the activity or task.
Direct Supervision	Learner is entrusted to perform the activity or task with direct and proactive supervision. Learner must be observed performing task in order to provide immediate feedback.
Reactive Supervision	Learner is entrusted to perform the activity or task with indirect and reactive supervision. Learner can perform task without direct supervision by may request assistance. Supervising pharmacist is quickly available on site. Feedback is provided immediately after completion of activity or task.
Intermittent Supervision	Learner is entrusted to perform the activity or task with supervision at a distance. Learner can independently perform task. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on sample of work.
General Direction	Learner is entrusted to independently decide what activities and tasks need to be performed. Learner entrusted to direct and supervise activities of others. Learner meets with supervising pharmacist at periodic intervals. Feedback is provided regarding overall performance based on broad professional expectations and organizational goals.

Levels of Entrustment at Touro College of Pharmacy

<p>Level 1: Low Trust/Observe Only: <i>requires complete hands-on guidance</i></p>	<p>Level 2: Moderate Trust/Direct Supervision: <i>requires constant supervision</i></p>	<p>Level 3: High Trust/Reactive Supervision: <i>requires occasional supervision</i></p>	<p>Level 4: Complete Trust/On Demand Supervision: <i>doesn't require supervision—practices independently and student knows that preceptor available in case of need</i></p>
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Expectations for IPPE Community at Touro

To what extent do you trust the student pharmacist you precepted to:	Benchmark Level	
Collect information to identify a patient's medication-related problems and health-related needs		2
Assess collected information to determine a patient's medication-related problems, health-related needs.	1	
Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.	1	
Contribute patient specific medication-related expertise as part of an interprofessional care team.	1	
Answer medication related questions using scientific literature.		2
Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.	1	
Fulfill a medication order.		2
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.	1	
Monitor and evaluate the safety and effectiveness of a care plan.	1	
Report adverse drug events and/or medication errors in accordance with site specific procedures.	1	
Deliver medication or health-related education to health professionals or the public.		2
Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.	1	
Perform the technical, administrative, and supporting operations of a pharmacy practice site.		2

Expectations for IPPE Institutional at Touro

To what extent do you trust the student pharmacist you precepted to:	Benchmark Level	
Collect information to identify a patient's medication-related problems and health-related needs		2
Assess collected information to determine a patient's medication-related problems, health-related needs.		2
Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.		2
Contribute patient specific medication-related expertise as part of an interprofessional care team.	1	
Answer medication related questions using scientific literature.		2
Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.	1	
Fulfill a medication order.		2
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.	1	
Monitor and evaluate the safety and effectiveness of a care plan.	1	
Report adverse drug events and/or medication errors in accordance with site specific procedures.		2
Deliver medication or health-related education to health professionals or the public.		2
Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.	1	
Perform the technical, administrative, and supporting operations of a pharmacy practice site.		2

Expectations for APPEs at Touro

Overall Expectations/Benchmark:

- Each student must maintain a level of ≥ 3 in 80% of applicable 13 EPAs during defined time periods as provided to students by the college
- A score of ≥ 2 for any EPA within any APPE

Core APPEs						
	EXPN 818	EXPN 836	EXPN 840	EXPN 843	EXPN 845	EXPN 846
EPA 1: Collect information to identify a patient's medication related problems and health related needs	X	X	X	X	X	X
EPA 2: Assess collected information to determine a patient's medication-related problems, health-related needs	X	X	X	X	X	X
EPA 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			X	X		X
EPA 4: Contribute patient specific medication-related expertise as part of an interprofessional care team	X		X	X	X	X
EPA 5: Answer medication related questions using scientific literature	X		X	X	X	X
EPA 6: Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals	X		X	X	X	X
EPA 7: Fulfill a medication order	X	X			X	
EPA 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	X			X		X
EPA 9: Monitor and evaluate the safety and effectiveness of a care plan			X	X		X
EPA 10: Report adverse drug events and/or medication errors in accordance with site specific procedures.	X	X	X	X	X	X
EPA 11: Deliver medication or health-related education to health professionals or the public	X		X	X	X	X
EPA 12: Identify populations at risk for prevalent diseases and preventable adverse medication outcomes	X			X		
EPA 13: Perform the technical, administrative, and supporting operations of a pharmacy practice site	X	X			X	

EXPN818: Community
 EXPN 836: Sterile Compounding
 EXPN 840: Acute Care
 EXPN 843: Amb Care
 EXPN 845: Institutional
 EXPN 846: IM

Activities - EXPN 845: APPE Institutional

*7. Fulfill a medication order.

- a) Fulfill a medication order.
- b) Enter an order or prescription into an electronic health or pharmacy record system.
- c) Perform calculations required to compound, dispense, and administer medications.
- d) Perform a prospective drug utilization review.
- e) Consider formulary preferred medications when making recommendations.
- f) Complete an authorization process for a non-preferred medications.
- g) Perform a quality assurance check on prepared medications.
- h) Prepare non-sterile and/or sterile medications.
- i) Perform a quality assurance check on prepared medications prior to dispensing.
- j) Adhere to state and federal laws/regulations and site quality and safety procedures.

Assignment: N/A

Sample of Applicable

Activities: Order verification, sterile product preparation, restocking medication

Midpoint: 50 activities

Final: 100 activities

Expectations for IPPE Institutional at Touro

To what extent do you trust the student pharmacist you precepted to:	Benchmark Level	
Collect information to identify a patient's medication-related problems and health-related needs		2
Assess collected information to determine a patient's medication-related problems, health-related needs.		2
Create a care plan in collaboration with the patient, others trusted by the patient, and other health professionals to optimize pharmacologic and nonpharmacologic treatment.		2
Contribute patient specific medication-related expertise as part of an interprofessional care team.	1	
Answer medication related questions using scientific literature.		2
Implement a care plan in collaboration with the patient, others trusted by the patient, and other health professionals.	1	
Fulfill a medication order.		2
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.	1	
Monitor and evaluate the safety and effectiveness of a care plan.	1	
Report adverse drug events and/or medication errors in accordance with site specific procedures.		2
Deliver medication or health-related education to health professionals or the public.		2
Identify populations at risk for prevalent diseases and preventable adverse medication outcomes.	1	
Perform the technical, administrative, and supporting operations of a pharmacy practice site.		2

High KSA yet Low/Moderate Entrustment

EPA	Examples
Collect info...	Collect additional irrelevant info
Create a care plan...	Create evidence-based recommendations but did not take patient-specific situation into consideration (e.g., cost, age)
Educate the patient...	Communicated all necessary info, yet did not listen to the patient and caregiver adequately
Report ADEs...	Did not offer any suggested solution(s)

Different from Ethics and Professionalism

- *Profess*: “to stand for” or “to testify on behalf of” something
- *Profession*: *profess* their fundamental commitment to serving society
- *Ethics*: “character”
- *Virtues*: “traits of character that are valued as a human quality”
- *Consequentialism vs. non-consequentialism*
 - Means vs. ends

Pledge of Professionalism

Pledge of Professionalism

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

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

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

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

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

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

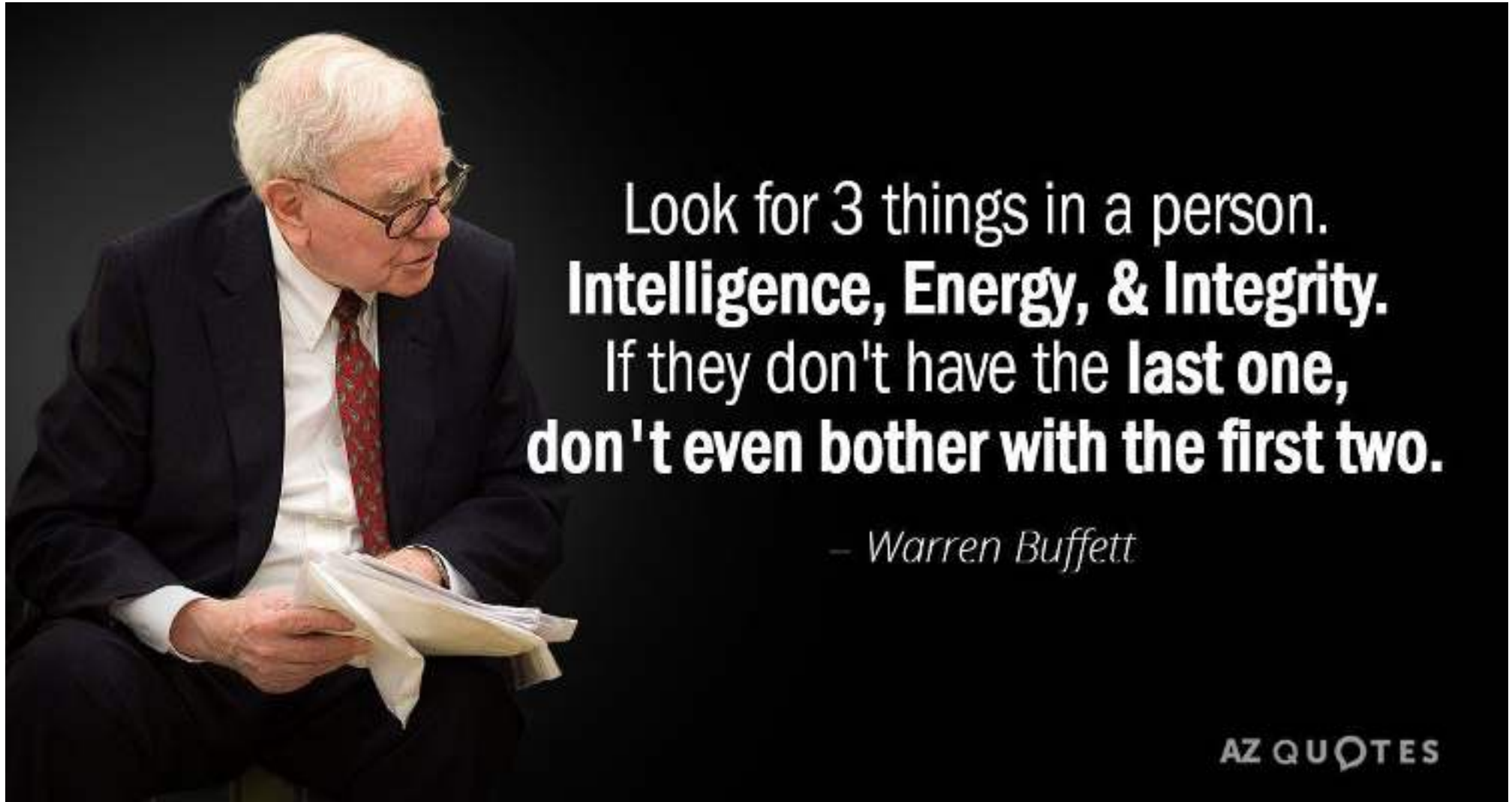
MAINTAIN the highest ideals and professional attributes to ensure and facilitate the covenantal relationship required of the pharmaceutical care giver.

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



Developed by the American Pharmaceutical Association Academy of Students of Pharmacy/American Association of Colleges of Pharmacy Council of Deans (APhA-ASP/AACP-COD) Task Force on Professionalism; June 26, 1994

A Talent Acquisition Tip



Ethical Problems by Pharmacy Students from my Experience in the Northeast

Common:

- Tardiness:
 - Not proactively completing health clearance timely
 - Arriving late or leaving early or no show without notice
 - Late submission or communication
- Assignment grade dispute
- Inappropriate or disruptive social etiquette (e.g., talking loudly or inappropriate conversations in public space or patient care areas)

Rare:

- Plagiarism
- Bullying
- Theft and other criminal activities

EPA Evaluation in Experiential Management System (Midpoint & Final by April 2026)

	Level 4: Complete Trust(On Demand Supervision	Level 3: High Trust/Reactive Supervision	Level 2: Moderate Trust(Direct Supervision	Level 1: Low Trust(Observe Only
	Doesn't require supervision—practices independently and student knows that preceptor available in case of need	Requires occasional supervision	Requires constant supervision	Requires complete hands-on guidance
Patient and Family Centered Care: Collect information to identify a patient's medication-related problems and health-related needs. 1. Develop relationship a patient, physician, health-related	Final Acquired	Level 4: Complete Trust(On Demand Supervision		
Patient and Family Centered Care: Assess collected information to determine a patient's medication-related problems, health-related needs. 1. Assess the medication of the medication. 2. Assess for safety of the medication including drug interactions	Final Acquired	Level 4: Complete Trust(On Demand Supervision		
Patient and Family Centered Care: Contribute patient-specific medication-related expertise as part of an interprofessional care team. 1. Communicate patient's medication-related problem(s) and offer solution to the health care team.	Final Acquired	Level 4: Complete Trust(On Demand Supervision		
Patient and Family Centered Care: Answer medication-related questions using scientific literature. 1. Answer medication-related questions using evidence-based clinical information. 2. Ask clarifying questions to identify and address the true question. 3. Perform a search with specific criteria (primary, secondary, systematic reviews). 4. Identify and retrieve high-quality clinical literature. 5. Analyze credible literature. 6. Provide a written or verbal response to the true question, including findings and recommendations.	Final Acquired	Level 4: Complete Trust(On Demand Supervision		
Patient and Family Centered Care: Implement a care plan in collaboration with the patient, others invited by the patient, and other health professionals. 1. Provide rationale for initiation, modification, or discontinuation of medication therapy.	Final Acquired	Level 4: Complete Trust(On Demand Supervision		
Patient and Family Centered Care: Fully medication order. 1. Enter all order or prescription into an electronic health or pharmacy record system. 2. Perform a quality assurance check on prepared, dispensed, and administered medications. 3. Perform a prospective drug utilization review. 4. Consider forms are preferred medications when making recommendations. 5. Use professional judgment to identify and address medication-related issues. 6. Perform a quality assurance check on prepared medications. 7. Prepare medication and/or dispense medication. 8. Perform a quality assurance check on prepared medications prior to dispensing. 9. Adhere to state and federal laws/regulations and other quality and safety procedures.	Final Not Acquired		Level 3: High Trust(Reactive Supervision	

Touro's Policy on EPA

A. Documentation

- Within 2 weeks after the end of an experiential block, OPE will review and document all submitted EPA evaluations by preceptors. OPE will maintain a confidential document that breaks down level of entrustment documented. OPE will also document each individual student's individual and longitudinal EPA outcomes and descriptive statistics within the experiential management system.
- A separate section within the document will track for each student that have not met benchmark level, as established by the curriculum committee (**Table A**)
 - In the event EPA evaluations have not been submitted by the preceptor within 2 weeks after the end of an experiential block, OPE will make good faith effort on requesting the evaluation be completed by the preceptor as soon as possible.
 - In the event EPA evaluations have not been submitted by the preceptor within 6 weeks after the end of an experiential block, despite good faith effort by OPE on obtaining this evaluation, or if the preceptor is no longer a preceptor of TCOP, OPE will consult with academic affairs on the most appropriate steps

Where is the Doc (Viewable by Student Only)?

CORE ELMS
by PeopleGrove

Fridah Tester Student
Touro University

College of Pharmacy
- NY

CLOCK IN ACCOUNT SCHEDULE

- Home
- Scheduling +
- Site Prospector +
- Hours Tracking
- Requirements
- Field Encounters
- Evaluations +
- Electronic Forms
- Surveys
- Job Board
- Activity Logs**
- Message Center
- Document Library
- Help Center

TU **TO OF**

Miscellaneous (6 Files)

VIEW	TITLE
VIEW	2025-2026 Experiential Calendar
VIEW	ELMS Mobile App
VIEW	NYS Intern Permit Application
VIEW	OPE Student Manual

Where is the Doc (Viewable by Student Only)?_{cont.}

The screenshot shows the CORE ELMS interface for a student. The top navigation bar includes 'College of Pharmacy - NY', 'CLOCK IN', 'ACCOUNT', 'SCHEDULE', 'CALENDAR', and 'LOGOUT'. The left sidebar lists various navigation options. The main content area displays 'Activity Logs' with a table containing two rows. The second row is highlighted with a pink border.

Date	Administrator	Log Type	Doc
11/25/25	Kaleigh Larson		OPEN
06/30/25	Michael Liu	EPA: Jan 1st to June 15th	OPEN

How does is the Doc Look Like?

Longitudinal Summary

Due	lane	EXP#	APPE Block	2025	1 - Collect information to identify a patient's medication-related problems and health-related needs	2 - Assess collected information to determine a patient's medication-related problems, 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 information 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.	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.
		EXP#645	APPE Block 2	2025	2	3	3	3	3	3		3	3	3	3	3	
		EXP#643	APPE Block 3	2025	3	3	3	3	3	3		3	3	3	3	3	3



How does is the Doc Look Like? cont.

Longitudinal **Summary**

		Score of 1	Score of 2	Score of 3	Score of 4	# of Total Entrustment Score Earned	# of Scores 3 or Higher Earned	# Score of 3 or higher/# of Total Earned (%)
Doe	Jane	0	1	20	0	21	20	95%



Touro's Policy on EPA

B. EPA Reporting and Overall Expectations/Benchmark

- Average cumulative EPA level scores and scores for each individual EPA shall be evaluated during the following time periods:
 - January 1st through June 15th
 - June 16th through October 20th
 - October 21st through April 7th
- Overall Expectations/Benchmark:
 - During each of the aforementioned time period: each student must maintain a level of ≥ 3 in 80% of applicable 13 EPAs
 - A score of ≥ 2 for any EPA within any APPE
- Students that do not meet the overall expectations is subject to remediation.

Touro's Policy on EPA_{cont.}

C. Remediation

- Remediation is a structured sequence of actions designed and executed by OPE to support student pharmacists in achieving the expected benchmark EPA performance in experiential courses. Students who do not meet overall expectations will be subject to remediation.
- All remediation will be activity-based. The number of required activities, as well as the deadline for their completion, is determined at the discretion and professional judgment of OPE, based on the specific EPA(s) in which the student demonstrates deficiencies. OPE may consult with experts within the college, as well as field experts, including internal and external preceptors, in the development of remediation activities. Examples of remediation activities include, but are not limited to, the following:
 - Completion of targeted learning activities and assessments (e.g., modules)
 - Clinical scenarios or simulations
 - Demonstration of operational, technical, and counseling skills in TCOP's model pharmacy or physical assessment suite
 - Development and assessment of interpersonal communication and presentation skills
- OPE will inform the student of any upcoming experiential opportunities available to achieve the required benchmark
 - If no additional opportunities are available, OPE, in consultation with Academic Affairs and the student, will convene to determine the most appropriate course of action.

In-service Assessment #1

EPAs are important because they represent:

- a) Work of pharmacists as workplace tasks and responsibilities that all students are entrusted to do in the experiential setting with direct or distant supervision
- b) Covers Other characteristics, namely trust, moral compass, willingness to ask for help, work culture fit
- c) Demonstrates KSA in practice
- d) All of the above

In-service Assessment #2

Regarding educational or curriculum outcomes, KSA stand for?

- a) Knowledge, skills, attitude
- b) Knowledge, skills, abilities
- c) Knowledge, skills, aptitude
- d) Knowledge, strengths, abilities

In-service Assessment #3

The 4 levels of entrustment at TCOP for EPAs are 1-Low Trust/Observe Only, 2-Moderate Trust/Direct Supervision, 3-High Trust/Reactive Supervision, 4-Complete Trust/On-Demand Supervision. The minimum entrustment expectations of IPPEs for each evaluated EPAs are:

- a) 2
- b) 3
- c) ≥ 3 in 80% of applicable 13 EPAs
- d) Depends: some are 1 and some are 2

Key Summary of the Presentation

- COEPA: Curriculum Outcomes and Entrustable Professional Activities
 - Standards
- EPAs are not “possessed” by a trainee, rather it is “owned” by a profession and “delegated/given/privilege” to a practitioner/trainee to execute
- Minimum expectations of evaluated EPA
 - IPPEs: 1 or 2
 - APPEs: ≥ 3 in 80% of applicable 13 EPAs over time periods



From Learning to Leading: The Value of Curricular Outcomes and Entrustable Professional Activities (COEPAs)

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