Innovation in Teaching Award Recipient

A Remote Health Equity Curriculum: Teaching Pharmacy Students to be Advocates for Social Justice
Stephanie L. Hsia, University of California, San Francisco. Rupa L. Tuan, University of California, San Francisco. **Objective:** To describe the implementation and evaluation of a Health Equity Curriculum for pharmacy students. **Methods:** In Fall 2020, we created a remote Health Equity Curriculum (HEC) based on transformative learning theory and structural competency to teach students to identify structural causes of health disparities and engage in discussions about health equity. The HEC was a mandatory component of the Neuropsychiatric Theme for 2nd year UCSF pharmacy students. Students were assigned to subgroups distributed across self-identified demographic data. Students reviewed weekly materials and responded to discussion prompts in asynchronous forums or synchronous Zoom meetings. Structural competency was assessed using a structural competency instrument (SCI) and objective structured clinical examination (OSCE). To evaluate the curriculum, students were surveyed on the value and efficacy of HEC. **Results:** All (124) students participated in HEC. Of the 75 students (68%) who completed the SCI, 61% identified structural determinants of health, explained how structures contribute to health disparities, or designed structural interventions. 96/124 (77%) addressed the OSCE patient’s mistrust in the healthcare system. Thematic analysis of survey comments elucidated 3 themes about the value of HEC: allyship, peer connection, and self-awareness. Students reported asynchronous discussions were less effective than synchronous discussions and patient cases (p<.001). **Conclusions:** After completing HEC, students identified structural determinants of health, applied equitable communication skills, reflected on biases, served as allies, and approached equity with a growth mindset. Future iterations may consider spreading out the content between themes and including interprofessional collaboration.
Award for Excellence in Assessment - Honorable mention

Full Curricular Review: A Systematic Faculty-Led Model for Curricular Innovation and Design
Myrah R. Stockdale, Campbell University, Riley Bowers, Campbell University, Dustin Wilson, Campbell University, C. Scott Asbill, Campbell University. **Objective:** To address the limitations of traditional curricular review models, our assessment committee engaged in a two-year development process and three-year implementation of a cyclical curricular review process, which we deemed the ‘Full Curricular Review’ (FCR). **Methods:** The FCR is a faculty-developed and led process by which each course is reviewed by multiple qualified faculty, both the curriculum and assessment committees, as well as departmental leadership. The FCR’s intentional curricular data transparency has meaningfully enhanced the program’s ability to adapt and navigate a changing educational environment. **Results:** As a result of the FCR, the PharmD program has documented numerous course improvements, enhanced horizontal and vertical integration, leading to an improved culture of assessment and positive faculty affect. This poster discusses the FCR framework and highlights the process by which it was developed and implemented. It includes lessons learned and improvements we plan to carry forward into our next FCR cycle. **Conclusions:** Pharmacy curricula are built by faculty with diverse backgrounds in accordance with the mission and vision of the program leading to a distinct curriculum that, by design, reflects the dynamic nature of the profession. Traditional curricular review models, while a beneficial tool for the continued improvement of curricula, are static and offer limited scope and impact for the curricula they serve. Often the information derived from these models lacks input on content relevancy, vertical or horizontal integration, alignment of lectures, or the degree of high-impact teaching practices within a curriculum.