To describe the process used to engage interdisciplinary teams of faculty to design and teach integrated learning experiences, as well as faculty and student perceptions of this integration.

**Methods**

- The curriculum development and implementation process involved two main overlapping groups: a Learning Community (LC) and a Teaching Team.
  - **Learning Community (LC):**
    - Consisted of 9 members from all three academic departments, and 3 education support staff members from the OTLA.
    - A formally assigned group with responsibilities that count toward faculty workload in teaching.
    - Tasked with the planning and implementation of all 3 semesters of the curriculum (Figure 1) and ensuring alignment of the semester vision with the overall vision of the curriculum.
    - Led by a faculty chair who worked closely with OTLA to orchestrate all the activities needed to plan and implement a semester’s worth of teaching experiences. The LC chair was also a member of the School’s curriculum committee, the Professional Education Committee (PEC).
    - The LC chair also receives guidance from a small steering committee known as the Practice Ready Curriculum Team (PRCT), who focuses on steering development of the PRC.
    - Developed course syllabi, unit objectives and assessments using backwards design method.
  - **Teaching Team (TT):**
    - Consisted of 2-4 faculty members at least one of whom was also a member of the LC.
    - At least two of the three academic departments were represented in each teaching team.
    - Responsible for planning and teaching a unit in one of the experiences in the semester, which includes development of assessments, learning materials, and activities for their assigned units in alignment with the LC vision which is in alignment with the broader curriculum vision. The LC member acted as a liaison and was responsible for ensuring this.
    - The success of the teaching teams was measured by the faculty perception Qualtrics survey, divided into 7 areas (alignment with vision for the curriculum, curriculum integration, critical thinking, active learning, assessment, unit planning and implementation) and included both open and closed questions.
    - At the end of each teaching team’s unit, students completed a faculty perception Qualtrics survey, which was then used to assess the success of the implementation.
    - Student feedback was also obtained through anonymous course and instructor evaluations.
    - Data from both faculty and students were deidentified, aggregated and analyzed for the purpose of using information during course review.

**Objectives**

- To describe the process used to engage interdisciplinary teams of faculty to design and teach integrated learning experiences, as well as faculty and student perceptions of this integration.

**Background**

- In Fall 2017, the Auburn University Harrison School of Pharmacy (AUHOSP) implemented the first semester of a new curriculum known as the Practice Ready Curriculum (PRC).
- The curriculum is characterized as integrated and spiralized and was developed using the backward design approach starting with a vision of a practice ready and team ready graduate.
- There are no discipline specific courses, all learning experiences integrate knowledge from two or more of the foundational sciences (i.e., biomedical, pharmaceutical, social/behavioral/administrative, and clinical sciences).
- The curriculum is built around competencies that the practice-ready graduate should be able to do.
- These competencies are mapped to learning experiences across the curriculum from an introductory level, to repeated/reinforced to benchmark.
- The mapping process allows for the focus on competencies rather than mere content coverage and allows for meaningful assessments to be integrated across the curriculum.
- To achieve curriculum integration, interdisciplinary collaboration between the 3 academic departments (Drug Discovery and Development [DDD], Health Outcomes Research and Policy [HORP], and Pharmacy Practice [PP]) in both course design and teaching is necessary.
- The Office of Teaching, Learning, and Assessment (OTLA) offers extensive support, and allows for centralization of the implementation process.

**Curriculum Vision Alignment**

- **PEC and PRCT**
  - LC Chair
  - Liaison
  - Teaching Unit Vision
  - Learning Community Vision
  - Curriculum Vision

**Teaching Teams**

- **Integrated Learning Experience:**
  - Integrated learning experiences are broken into units designed around disease states. Categories of competencies are clustered and assigned to each unit.
  - Through the backward design process, the learning community and teaching teams designed objectives, assessments and content based on the assigned competencies within the disease state context.

**Challenges**

- Time for collaborative design was the most common challenge identified by faculty. To team design and teach successfully requires a lot of planning and takes time for faculty members to transition mentally from teaching and planning on their own to doing so collaboratively.
- Due to time constraints of the planned integration did not make it to the classroom and though several faculty members were teaching in the same unit it appeared siloed. This was evident to faculty and students.
- Consistency within and between units was identified by students and faculty.

**Lessons Learned and Future Plans**

- The learning community has systematically examined the aggregated data to determine how well implementation aligned with the intended outcomes and identified areas of strengths and areas for improvement. This was highly recommended for any collaborative teaching initiative.
- A “standards for consistency” document has been created to ensure consistency of terminology and approach in addressing certain topics.
- A shared repository of resources that may be used across units and experiences was created. For example, a SOAP note rubric and SOAP note student template.
- The learning community has come to shared understanding that teaching teams should be consistent in most areas, but students should be made aware of differing perspectives in pharmacy practice.
- The success of the integration and team teaching can be attributed to the systematic structure that was put in place to coordinate this process. In the same way that we have to support students in achieving true collaborative learning, faculty need support in order to team teach effectively.
- Having a shared goal built around competencies helped faculty to find a common ground for planning and implementing team teaching.
- Having a shared vision and macro and micro levels of that vision helped to ensure alignment.
- Leadership support is a necessity, especially for resources and facilitation of culture shift to a collaborative and integrated model.
- Have fun, celebrate the small wins and don’t give up if the first try does not go according to plan.

**References**