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ashp[®] NATIONAL PHARMACY PRECEPTORS CONFERENCE



2021 Virtual Conference

Thanks for making this a very well attended VIRTUAL National Pharmacy Preceptors Conference! The National Pharmacy Preceptors Conference was held virtually on October 21-22. The conference was attended by over 500 registrants, which included residency training program directors, coordinators, preceptors for both residents and students, pharmacy administrators and others interested and involved in pharmacy education. Live and on-demand informative educational sessions and a networking poster session for preceptors to share innovations in residency training and pharmacy student education was held. Additionally, a virtual Ask the Surveyor session was well attended. The meeting was a great success!



Residency Program Design and Conduct (RPDC) Virtual Workshops - January 27-28, 2022

January 27-28, 2022 • Virtual Event
Registration is open now!

Our RPDC workshops are customized for the various stages of a residency program. These workshops provide an intensive, in-depth review of current standards, competency areas, and educational goals and objectives for residency program structure, orientation, learning experiences, preceptor roles, evaluation, resident development plans, and continuous program improvement. Each workshop will include information, examples, scenarios, resources, idea-sharing and time for Q&A. The RPDC Workshops will be held on January 27-28, 2022. There is a fee to attend these workshops. *No CE will be offered.*

For more information and to register [click here](#).

The Following Workshops are Available:

- PGY1 New Programs – Capacity: 80
- PGY1 Existing Programs – Capacity: 80
- PGY1 Community-based Programs – Capacity: 20
- PGY2 New Programs – Capacity: 60
- PGY2 Existing Programs – Capacity: 60



MCM2021: Residency and Accreditation Educational Sessions

MCM21: Residency and Accreditation Related Sessions

On Demand Activities: Pharmacy Residency & Technician Training Activities

- [ASHP Foundation Pharmacy Residency Excellence Awards](#)
- New and Prospective Pharmacy Technician Training Program Directors and Instructors Meeting
- Pharmacy Technician Training: What's New for 2021
- Getting Started and Applying for Accreditation-Finding the Pathway and Taking the Right Steps
- PhORCAS®: How Programs Can Optimize the WebAdMIT® Portal Within PhORCAS®
- Using PharmAcademic® to Support Resident Learning
- Veterans Affairs Residency Open Forum
- New Practitioner and Resident Focused [Programming](#)

Sunday December 5

1:00 – 2:30 p.m. EST

Residency Program Directors and Preceptors Town Hall: Updates from the Commission on Credentialing

Monday December 6

1:00 – 2:00 p.m. EST

Roundtable: Pharmacy Technicians

3:00 – 6:00 p.m. EST

Residency Showcase™

Tuesday December 7

10:00 a.m. – 1:00 p.m. EST

Residency Showcase™

1:00 – 2:00 p.m. EST

Roundtable: Pharmacy Technician Meet and Greet

1:30 – 2:30 p.m. EST

Ask the Pharmacy Residency Accreditation Surveyors Roundtable Discussions

Wednesday December 8

10:30 – 11:30 a.m. EST

Resident Posters

Thursday December 9

12:30 – 1:30 p.m. EST

Resident Posters

2:00 – 3:00 p.m. EST

Resident Posters

Residency Showcase Tips and Reminders

Residency Showcase 2021 is right around the corner!

Be sure that you are doing everything you can to prepare by using the checklist below.

- ✓ Review your program's information in the [program listing portal](#). If you need assistance, please review the instructions. Accurate information will ensure that prospective residents can find you in the showcase.
- ✓ Double check your organization's assigned session on the [list of participating institutions](#).
- ✓ Review information on the [residency showcase information page](#), including virtual booth information, FAQ's and more.
- ✓ Visit the [2021 ASHP Midyear Clinical Meeting website](#) to locate answers to any questions about your experience at the meeting.
- ✓ Plan to build your virtual booth and add staff before the deadline. Individuals must be registered for the Midyear Clinical Meeting to gain access and to participate in the Residency Showcase



Update: Pandemic Effects on Residency Programs FAQs

Two recent updates to the [Pandemic Effects on Residency Programs FAQ](#)

NAPLEX/MPJE and Licensure

Q: Is a temporary licensure waiver approved for the 2021-2022 residency year?

A: No. Test site capacity was sufficient to meet demand and there was no significant or wide-spread delay in scheduling licensure exams. Residents must be licensed by November 1, 2021 to meet the standard requirement of completing two-thirds of the residency year as a licensed pharmacist.

Accreditation Surveys and Survey-Related Information

Q: My program is scheduled for an onsite survey. Will my survey be conducted during the pandemic?

A: Accreditation Services is using available remote meeting technology to conduct scheduled accreditation surveys virtually through January 1, 2022*. Decisions about a further extension of virtual surveys or return to in person site surveys will be determined as travel restrictions are lifted; organizations resume unrestricted access to facilities; and staff safety can be ensured. Assigned lead surveyors will be in contact with programs scheduled for survey to provide additional information and a framework for the survey process.

**Update 11/16/21: Based on continued high community transmission of SARS-CoV-2 nationally, the decision was made to continue the survey travel prohibition until at least March 1, 2022. The [CDC Data Tracker](#) is being monitored continually and our travel posture is being reevaluated as conditions change. Updates will be provided as new information becomes available.*

As a result, any scheduled survey prior to the next decision milestone will be conducted virtually.

Reminder: Important! Update your Online Residency Program Listing

PhORCAS and the National Matching Service (NMS) link to each program's online directory listing, so make sure your listing is up to date. Programs have the ability to update most of their residency program listing in the online directory including deadlines for applications and any other pertinent program information.

Select changes must be made by Accreditation Services. These include: residency program director, chief/director of pharmacy, organization name, and program website (listed in the top left-hand corner of the listing). Please check that links to your own webpage are working. Updates to on-line residency program directory listing should be e-mailed to asd@ashp.org.

Reminder: Regulations Requirement

Programs that were in pre-candidate status that now have a resident should send in a candidate application to asd@ashp.org. Applications can be found on the [ASHP website](#).

Directors of accredited programs must submit written notification of substantive changes to the residency program to ASHP's Director, Accreditation Services Division, within 30 days of the change. Substantive changes include changes to the leadership (i.e, changes in residency program director or chief/director of pharmacy), content and construct of the program, organizational ownership or accreditation.

Residency program directors of multiple-site programs must get approval from ASHP's Accreditation Services Division prior to adding or removing a site. Notification forms are posted on the ASHP website. Any substantive change in the organization of a program may be considered justification for re-evaluation of the program and/or a site survey.

Link to: [ASHP Regulations on Accreditation of Pharmacy Residencies](#)



PhORCAS™/WebADMIT™ Updates



Pharmacy Online Residency Centralized Application Service

PhORCAS, the Pharmacy Online Residency Centralized Application Service opened for applicants on November 3, 2021. The ASHP [website](#) includes information for applicants, programs and reference writers regarding PhORCAS. Information on how PhORCAS can save applicants time, effort, and money can also be found on the website. Also, programs are reminded to close out positions in PhORCAS that are early committed to avoid applicants applying to positions that are not available. (see next section on Early Commitment)

WebADMIT is the selection portal of PhORCAS that allows residency program directors and preceptors to sort resident applicant information and reflects changes that align with the implementation of enhanced WebAdMIT software. WebAdMIT allows programs to import previous selection portal capabilities and adds in a wealth of features such as facilitating interview scheduling,

integration of scoring models, custom access rights on a per user basis, a single sign-on for users with multiple programs within an organization, and much more.

For PhORCAS support, contact PhORCAS at (617) 612-2868 from 9am-5pm EST or email them at phorcasinfo@phorcas.org

If you need assistance with WebAdMIT, please contact WebAdMIT at (857) 304-2020 or email them at Webadmitsupport@liaisonedu.com

An [on-demand session](#) will be available at the virtual Midyear Clinical Meeting. Learn how WebAdMIT can help your program improve the efficiency of the residency selection process for the current application season.

Reminder: Early Commitment Process Deadline – December 17, 2021

To learn more about the rules for participation in the Early Commitment Process, please review the information from the National Matching Service at the following [link](#).

PGY2 residency programs may only offer early commitment to PGY1 residents who are in programs sponsored by the same organization that sponsors the PGY2 program. Under certain very limited conditions, PGY2 programs may also offer early commitment to PGY1 residents from an affiliated organization. To determine if your organization meets the criteria established by ASHP for an affiliated organization that can offer early commitment to a PGY1 resident, please email Accreditation Services at asd@ashp.org

Programs that fill all their positions through the Early Commitment Process must access the PhORCAS system as soon as possible to close the program for applications. Closing the position in PhORCAS prevents other applicants applying to the program. However, programs that early commit should not withdraw themselves from the NMS Match System, as this will be done by NMS when the Early Commitment letter of agreement is received and processed by NMS.

Positions available in participating PGY2 programs that are not removed from the Match through the Early Commitment Process by the December 17, 2021 deadline must be offered through the matching process, and applicants interested in such positions must register for and participate in the Match.

Important Dates for 2022 National Matching Service - Two Phase Match

| | |
|--------------------------|--|
| November 1, 2021 | List of ASHP Match programs available |
| November 3, 2021 | PhORCAS opens |
| December 17, 2021 | Early Commitment Deadline |
| December 31, 2021 | Recommended date by which applicants should register for the Match |
| February 14, 2022 | Phase I Rankings Open |
| March 3, 2022 | Final date on which applicants can register to participate in Phase I of the Match |
| March 4, 2022 | Phase I Rank Order List Deadline |

| | |
|-----------------------|--|
| March 16, 2022 | Phase I Match Day: Results of Phase I Match released Program Directors must send letters of confirmation no later than April 15, 2022 The list of programs with available positions for Phase II will be provided on the Match website at 12 noon EST |
| March 17, 2022 | Applicants who are not matched to a position in Phase I, and those who did not participate in Phase I, will be able to use PhORCAS to prepare applications |
| March 21, 2022 | Beginning at 9:00am EST, applicants who either did not obtain a position in the Phase I Match or did not participate can submit applications to programs participating in Phase II Match Applicants and programs will be able to update status and profile information for Phase II |
| March 28, 2022 | Phase II rankings Open |
| April 5, 2022 | Applicant registration deadline for Phase II |
| April 6, 2022 | Phase II Rank Order List Deadline |
| April 13, 2022 | Phase II Match Day: Results of Phase II released Program Directors must send letters of confirmation no later than May 13, 2022 The list of programs with available positions after Phase II of the Match will be provided on the Match website at 12 noon EST. No action to fill available positions, such as contacts or interviews between applicants and programs, is to be taken on April 13 prior to 12:00 p.m. Eastern Time. |
| April 14, 2022 | Applicants who do not obtain a position in either phase of the Match will be able to submit applications for programs that have available positions |
| April 20, 2022 | Programs with available positions in the post-match may begin making offers to applicants. |

Read more about the 2022 ASHP Match process [here](#).

Statistics from the 2021-22 Class

- Match total number of applications submitted – 102,692
- Average number of applications per applicant – 12
- Number of individual reference writers – 20,646
- Number of references submitted – 71,119



Interview Season: 2022-2023 Recruiting

Virtual versus In Person Interviews –

For more information see also [Pandemic Effect on Residency Programs-FAQ](#)

Accreditation Services and the Commission on Credentialing recognizes that there are geographic differences in SARS-CoV-2 transmission rates, COVID-19 hospitalizations, State, territorial, and local travel restrictions, and organization visitor policies. As a result, the decision to offer in person or virtual interviews for the 2022-2023 Match is a program decision. Programs conducting in person interviews should offer a virtual option to any applicant unable to participate in person. Programs and applicants are encouraged to follow the most up-to-date CDC guidance on [Domestic Travel during COVID-19](#).

Documents Provided to Residents Invited to Interview

Standard Item 1.6 for [PGY1 programs](#)/Item 1.7 for [PGY2 programs](#)

Regardless of the method of interview, the Accreditation Standard Guidance Document requires that individuals invited to interview receive information on program policies, requirements for successful completion of the program, and expectations of residents in the program are provided (either in print or electronically) to interviewees prior to or on the interview date. Program policies appear in the residency manual (written or electronic) or other readily available pharmacy department documents. The following policies and procedures are documented:

- Dismissal policy (Dismissal or disciplinary policy must address consequences of failure to progress)
- Licensure and evidence of PGY1 certificate for PGY2 candidates
- Moonlighting
- Duty hours
- Tracking of duty hours and moonlighting
- Professional, family, sick and extended leave. Consequences of professional, family, sick and extended leave on residents' ability to complete the residency program must include whether the leave will result in dismissal from the program or if the program allows for extension of the program in order to allow residents to complete all program requirements, including the requirement for a minimum of twelve months of training.



Further, programs must have a list of requirements and expectations for completion of the residency program that address at minimum:

Achievement of the program's educational goals and objectives (e.g., designate % achieved, specify objectives that must be achieved, or as defined by the program)

- List of required duties and responsibilities
- List of products requiring completion
- List of required presentations

The list of requirements for successful completion must match the list used to document resident's completion of program requirements ([see guidance for 2.7a](#)). Policies and procedures must be consistent with human resources policies and procedures, and must be consistent among themselves and what is provided to the resident.

Surveyor Tip: Providing the documents prior to arrival at the on-site interview allows candidates to come prepared with questions.

PharmAcademic Updates

Did you know...

- **Adding Files to Closed out resident**

Residency Program Directors and designees can add files to residents up to 6 months after they are closed out.

- **Managing All Evaluations**

To get the reports you would like, use this path: Click the Manage Program button > select the Tools tab > and select the Manage All Evaluations link. On that page, select the data you would like to include in reports - for example all summative evaluations for one resident or all evaluations completed about one preceptor.

- **Updating Residency Program Directors**

Residency Program Directors can be updated by the following path: Click the Manage Program button > Tools tab > click the link "Change Residency Program Director." Programs often don't know that they are the ones who update the new RPD for the program AND this is also where they can assign an interim RPD.

- **Update to the Delivery Schedule for Evaluations**

Delivery dates for standard ASHP evaluations were changed from 2 weeks prior to the due date to 30 days prior to allow preceptors of longitudinal learning experiences earlier access to evaluations. When evaluations are "delivered," they will be available on the Task List and users will receive an email notification from PharmAcademic.

- **Improvements to the Process for Marking Achieved for Residency (ACH-R) on the Competencies Tab**

Improvements were made to the process for marking ACHR for multiple objectives at one time on the resident's Competencies tab. (Residents tab > select resident > Competencies tab > select set > select goal). A new grid was added to the page that lists each objective associated with the goal. For each objective, you can view the description, whether the objective was evaluated via a summative evaluation, and its ACHR status. RPDs and Designees can use the checkboxes to mark the selected objectives as ACHR. Note: Just as before, objectives that have not been evaluated via a summative evaluation cannot be marked ACHR, but a comment can be added that will be viewable in reports.

- **Resident-specific Objectives**

Resident-specific objectives can now be assigned in PharmAcademic to individual residents who are interested in an area of focus outside of the residency program's required curriculum. Resident-specific objectives are taught and evaluated, marked ACHR, and tracked the same as other objectives in PharmAcademic, but only for those residents who were assigned them. If programs assign resident-specific objectives, they become required for the resident and must be taught and evaluated as any other objective.

Programs are not required to use resident-specific objectives, and they will not automatically be assigned to residents upon enrollment. RPDs must assign them to individual residents in PharmAcademic using the following three steps:

1. Add the resident-specific curricular set to the program
2. Assign the resident-specific objective(s) to individual resident(s) on the resident's Competencies tab
3. Select the resident-specific objectives to be Taught and Evaluated on a learning experience and add the learning experience to the resident's schedule.

Visit the Help Center to view instructions and the training video "Assigning Resident-Specific Objectives."

- **PGY2 Appendix Tracking**

PGY2 Residents, Preceptors, RPDs, and Designee(s) can use PharmAcademic to track the resident's progress on the Appendix of Disease States/Content Areas for their program. While documenting the resident's PGY2 Appendix progress is required for the programs that have an Appendix of Disease States/Content Areas; ASHP does not require programs to track completion within PharmAcademic.

Highlights:

- Residents and Preceptors have a shortcut to the Appendix tab on the new My Progress tab located on the PharmAcademic Home page.
- Appendix items can be added by the resident, RPD, Designee(s), and preceptors on the resident's schedule on the new Appendix tab located on the "Resident Viewer."
- There are two grids or "views" available to view and manage appendix items: "Overview of Appendix Progress" and "Details of completed Appendix Items."
- Access the PharmAcademic Help Center under "tracking PGY2 Appendix Progress" for instructions for residents, preceptors and RPDs/Designees.

Examples of Images for Appendix Tracking

| Program | View Feedback | View Competencies | View Appendix Progress | View Development Plans | View Files |
|-----------|---------------|-------------------|------------------------|------------------------|------------|
| Pediatric | | | | | |

Assessing the Appendix Tab

| Resident | Begin Date | End Date | Program | View Feedback | View Competencies | View Appendix Progress | View Development Plans | View Files |
|------------------|------------|-----------|------------|---------------|-------------------|------------------------|------------------------|------------|
| Richards, Johnny | 7/1/2020 | 6/30/2021 | Cardiology | | | | | |

Adding Appendix Items

Appendix

Residents, preceptors, RPDs, and designees can add, view, and edit appendix items. Residents and preceptors can only edit the items they have added. To manage appendix items, first select the view (Overview v. Details) and the appendix topics, and then click the Search button to populate the grids. Download the results using the 'Export to Excel' link.

Select View: Overview of Appendix Progress Details of Completed Appendix Items

Select Topics:

Managing Appendix Items

| Topic | Sub-Topic | Patient Care Count | Non-Patient Care Count |
|---------------|--------------------------------------|--------------------|------------------------|
| Critical Care | Acute respiratory distress | 1 | 0 |
| Critical Care | Continuous renal replacement therapy | 0 | 0 |
| Critical Care | Extracorporeal membrane oxygenation | 0 | 0 |
| Critical Care | Fluid and electrolyte disorders | 0 | 0 |

Commission on Credentialing (COC) Meeting Highlights

The full presentation of the August 2021 Commission on Credentialing highlights will be available on the website after the Midyear Clinical Meeting in December. The Commission on Credentialing is working on revising the Accreditation Standards for all pharmacy residencies and a draft will be sent out for public comment soon. Please be on the look out for this important opportunity to provide input.

Executive Summary of Length of Accreditation Granted to Programs at the August 2021 Meeting

| Residency | Total # | Conditional | 1 yr | 2 yr | 3 yr | 4 yr | 5 yr | 6 yr | 8 yr | Withhold | Discontinue |
|--------------------------|------------|-------------|-----------|----------|-----------|----------|----------|------------|-----------|----------|-------------|
| New | 108 | 0 | 19 | 0 | 34 | 0 | 0 | 0 | 55 | 0 | 0 |
| Reaccreditation | 51 | 0 | 5 | 0 | 0 | 8 | 0 | 0 | 38 | 0 | 0 |
| Special Cases | 70 | 2 | 7 | 3 | 54 | 0 | 1 | 1 | 0 | 1 | 1 |
| TOTAL residencies | 229 | 2 | 31 | 3 | 88 | 8 | 1 | 193 | 93 | 1 | 1 |

The following voted actions by the Commission on Credentialing were recently approved by the ASHP Board of Directors:

- Voted To Approve: The proposed community-based pharmacy residency guidance updates.

Updated Documents and Revisions Posted to Website

Updated Guidance documents for PGY1 Community can be found [here](#).

Most Common Citings - PGY2 Standards

August 2021 COC: Top Areas of Partial Compliance with PGY2 Pharmacy Residencies

PGY2 Standard: Top Items Overall by Frequency Cited

| Standard Number | Standard Verbiage | Percent of Time Cited |
|-----------------|--|-----------------------|
| 3.4d(1) | At the end of each learning experience, residents receive, and discuss with preceptors, verbal and written assessment on the extent of their progress toward achievement of assigned educational goals and objectives, with reference to specific criteria. | 95% |
| 3.3c(1)a | Learning experiences are documented and include: <ul style="list-style-type: none"> • a general description, including the practice area and the roles of pharmacists in the practice area; | 85% |
| 3.3c(1)b | <ul style="list-style-type: none"> • expectations of residents; and, | 89% |
| 3.3c(1)d | <ul style="list-style-type: none"> • for each objective, a list of learning activities that will facilitate its achievement. | 78% |
| 3.4e(2) | On a quarterly basis, the RPD or designee must assess residents' progress and determine if the development plan needs to be adjusted. | 79% |
| 3.3a(1)a | The description must include required learning experiences and the length of time for each experience. | 84% |

PGY2 Standard: Top Items Cited Related to Program Policies

| Standard Number | Standard Verbiage | Percent of Time Cited |
|-----------------|--|-----------------------|
| 1.7 | Requirements for successful completion and expectations of the residency program are documented and provided to applicants invited to interview, including policies for professional, family, and sick leave; policies regarding licensure requirements; consequences of any such leave on residents' ability to complete the residency program; and for dismissal from the residency program. | 68% |
| 2.4b | Acceptance by residents of the terms and conditions, requirements for successful completion, and expectations of the residency program must be documented prior to the beginning of the residency. | 56% |
| 1.6 | Consequences of residents' failure to obtain appropriate licensure either prior to or within 90 days after the start date of the residency must be addressed in written policy of the residency program. | 48% |
| 2.2 | The program complies with the ASHP duty-hours standards. | 39% |
| 2.4a | The RPD provides residents accepted to the program with information on the pre-employment requirements for the organization (e.g., licensure and human resources requirements, such as drug testing, criminal record check) and other relevant information (e.g., benefits, stipend). | 38% |

PGY2 Standard: Top Cited Items - Program Structure

| Standard Number | Standard Verbiage | Percent of Time Cited |
|-----------------|---|-----------------------|
| 3.4d(1) | At the end of each learning experience, residents must receive, and discuss with preceptors, verbal and written assessment on the extent of their progress toward achievement of assigned educational goals and objectives, with reference to specific criteria. | 95% |
| 3.3c(1)a | Learning experiences are documented and include: <ul style="list-style-type: none"> a general description, including the practice area and the roles of pharmacists in the practice area; | 85% |
| 3.3c(1)b | <ul style="list-style-type: none"> expectations of residents; and, | 89% |
| 3.3c(1)d | <ul style="list-style-type: none"> for each objective, a list of learning activities that will facilitate its achievement. | 78% |
| 3.4e(2) | On a quarterly basis, the RPD or designee must assess residents' progress and determines if the development plan needs to be adjusted. | 79% |
| 3.4d(2) | For learning experiences greater than or equal to 12 weeks in length, a documented summative evaluation must be completed at the 3-, 6-, and 12-month points. | 68% |

PGY2 Standard: Top Cited Items – Pharmacy Services

| Standard Number | Standard Verbiage | Percent of Time Cited |
|-----------------|--|-----------------------|
| 6.2d | The pharmacy is an integral part of the health-care delivery system at the practice site in which the residency program is offered, as evidenced by the following: pharmacy services extend to all areas of the practice site in which medications for patients are prescribed, dispensed, administered, and monitored. | 65% |
| 6.7a | The following patient care services and activities are provided by pharmacists in collaboration with other health-care professionals to optimize medication therapy for patients: <ul style="list-style-type: none"> membership on interdisciplinary teams in patient care areas | 35% |
| 6.7b | <ul style="list-style-type: none"> prospective participation in the development of individualized medication regimens and treatment plans | 58% |
| 6.7c | <ul style="list-style-type: none"> implementation and monitoring of treatment plans for patients | 38% |
| 6.7l | <ul style="list-style-type: none"> a system to ensure and support continuity-of-care during patient care transitions | 71% |
| 6.5b | Pharmacy leaders ensure compliance with: current national practice standards and guidelines. (i.e., ASHP Best Practices; USP Chapter 797/800 requirements, and ISMP Targeted Medication Safety Best Practices for Hospitals.) | 66% |
| 6.6k | A system ensuring accountability and optimization for the use of safe medication-use system technologies | 53% |

Reflects the 2017 PGY2 Residency Standard.

Critical Factors appear in bold.

Please refer to Spring 2021 for the Most Common PGY1 Citings. Stay tuned for updated PGY1 Citings in Spring 2022.

News (You Can Use): ASHP Accreditation Fees

ASHP is also pleased to inform our residency programs that due to the financial stress many organizations faced during the pandemic, accreditation fee rates for 2022 remain the same as the year 2021. The fees will cover January through December 2022.

ASHP Accreditation Services Office distributes accreditation fee invoices electronically to programs annually in mid-November. The invoices are emailed to one primary residency program director of record for a single site and for sites with more than one accredited program. Residency program directors of programs in pre-candidate status will receive an invoice by email also. Make sure that communications from ASHP email addresses are allowed and not blocked.

ASHP publishes the annual fee schedule under “Applying for Accreditation” by August each year. Find the 2022 fee schedule [here](#).

Should you have any questions related to your invoice after receipt, please contact ASHP Customer Service (custserv@ashp.org) or call 1-866-279-0681 with your order number and 5 digit ASHP program ID provided.

ASHP/ACPE Accreditation for Pharmacy Technician Training Programs Support Medication Safety and Protect Patients

Consider Starting an accredited Technician Training Program!

Pharmacy technicians play an increasingly important role in public safety with expanding and evolving responsibilities and expectations in addition to assisting pharmacists to enable them to perform their essential direct patient care activities. In recognition of these changes, many state boards of pharmacy now require completion of an ASHP/ACPE accredited pharmacy technician education and training program to practice as a pharmacy technician in their state.

The [ASHP/ACPE Accreditation for Pharmacy Technician Education and Training](#) programs was established in the early 1980s for review of nationally standardized programs to ensure the quality and safety for the public receiving medications. Prior to that, there was no formalized peer review process, let alone nationally recognized standard for pharmacy technician education and training.

“Health system pharmacy departments have a lot of experience training pharmacy residents and students, so it’s a logical extension to include pharmacy technicians in that educational effort,” said Matt Kelm, Pharm.D., M.H.A., Associate Chief Pharmacy Officer at Duke University Hospital in Durham, North Carolina and the home of the Duke University Health System Pharmacy Technology Training Program founded in April 2018.

Benefits of an ASHP/ACPE accredited Pharmacy Technician Training Program include:

- Training and educating technicians using national standards
- Attracting and retaining career minded pharmacy technicians
- Covers a variety of practice environments
- Aids in professionalism
- Helps build technician workforce
- Training in medication and patient safety techniques/safe medication process
- Equipped to support pharmacists so that they can take on clinical, primary care services
- Meets the eligibility requirements to sit for the PTCB exam as of 1/1/2020

Consider starting an ASHP/ACPE accredited pharmacy technician education and training program at your site! See more information [here](#).

ASHP Consulting: Residency Program Development and Assessment

[ASHP Consulting](#) provides workshops for individual and multiple residency programs at their practice sites, for regional groups, and for state chapter or other similar meetings. These workshops may include the Residency Program Design and Conduct Workshop, customized workshops for readiness to offer a residency program, customized workshops to design a new or redesign an existing residency program, customized preceptor development programs to meet individual program or site needs, and mock surveys for initial or follow-up accreditation of residency program(s). Group sizes are generally limited to 60 participants. Currently, all workshops are done virtually until such time that it is appropriate to travel again. Interested individuals can contact Dave Warner at dwarner@ashp.org for scheduling, fees and other general information. For more information [click here](#).

News from ASHP New Practitioners Forum

Elective Rotation in Association Management at ASHP

ASHP offers a resident elective rotation in national association management to residents in ASHP accredited residency programs with an interest in association management. The program offers experiences in areas such as membership, marketing, government relations, practice & policy, educational services, and residency accreditation. [Learn more here](#).

Don't forget to check out Resident and New Practitioner Sessions at the Midyear Clinical Meeting. See the [Resident & New Practitioner educational track](#) at MCM!

News: ASHP Foundation

2021 Pharmacy Residency Excellence Awards



2021 Program Award

Henry Ford Hospital Post Graduate Year Two Infectious Diseases Pharmacy Residency

Detroit, MI

Residency Program Director: Rachel Kenney, PharmD, BCIDP

Director of Pharmacy: James Kalus, Pharm.D., FASHP



2021 Preceptor Award

James Coons, PharmD, FCCP, FACC, BCCP

UPMC Presbyterian Hospital

Pittsburgh, PA



2021 New Preceptor Award

Ami Shah, Pharm.D., BCCCP

Mount Sinai Morningside Medical Center

New York, NY

Residency Excellence Educational Series and Webinars

Learn award-winning strategies to develop your program, preceptors, and residents from past award recipients. Continuing education credits for pharmacists are available for the Educational Series from current and past awardees on the [ASHP Foundation webpage](#).

Surveyor Tips: In the Know

Accreditation Surveys and Survey-Related Information

Status of scheduled accreditation surveys

Accreditation Services is using available remote meeting technology to conduct scheduled accreditation surveys virtually through ~~January 1, 2022~~^{*}. Decisions about a further extension of virtual surveys or return to in person site surveys will be determined as travel restrictions are lifted; organizations resume unrestricted access to facilities; and staff safety can be ensured. Assigned lead surveyors will be in contact with programs scheduled for survey to provide additional information.

**Update 11/16/21: Based on continued high community transmission of SARS-CoV-2 nationally, the decision was made to continue the survey travel prohibition until at least March 1, 2022. The [CDC Data Tracker](#) is being monitored continually and our travel posture is being reevaluated as conditions change. Updates will be provided as new information becomes available.*

As a result, any scheduled survey prior to the next decision milestone will be conducted virtually. Stay tuned for more information.

Connecting with other RPDs

The RPD Connect Community is a forum for residency program directors (RPDs) to receive important and timely updates from the Accreditation Services Office (ASO). Additionally, the forum is a place for RPDs to connect with each other. You can ask questions, share experiences, post resources, and more. As a residency program director, you should automatically be enrolled in the Community for Residency Program Directors (ASHP Accredited). There is an article on how to set up your access to this resource on page 16 of the [Fall 2020 issue of *The Communique*](#).

Residency Purpose Statement

Each of the four residency accreditation standards (PGY1 pharmacy, PGY1 community-based pharmacy, PGY1 managed care pharmacy, and PGY2) contains a residency purpose statement that is to be used word for word by programs. Programs are encouraged to evaluate all places where there is a purpose statement listed (ie, recruiting materials, website, PharmAcademic front page) and ensure that their program's purpose statement is *identical* to that in the accreditation standards. Programs may create a program description about their program's special features and site but this is not to be referred to as the program's purpose.

Staying Survey Ready with Dashboards

RPDs are encouraged to use the Dashboards in PharmAcademic to assess survey readiness and what your survey team will be reviewing. Becoming familiar with the following Dashboard tabs is recommended.

- Program tab – includes ALERTS from PharmAcademic and the GRID which includes your on-site survey schedule and your annual residency accreditation report. Note: ASHP does not require a certain number of formative feedback entries per resident even though the national average is provided in this section. The number of residents that were enrolled in PharmAcademic more than a month after the program start date will appear as an alert.



- Learning Experience tab – also includes ALERTS from PharmAcademic to keep the RPD updated and your program structure broken down by year, learning experience, preceptor, and evaluation demographics. A flag will appear if there are objectives selected in a learning experience that have no activities, or if the general description, role of the pharmacist, or expectations for learners are missing.
- Preceptor tab – provides preceptor summary data compared to the national average although the most useful function may be the Preceptor Grid which the RPD can use to see the % of summative evaluations submitted on time; documented verbal feedback, and an average score based upon preceptor evaluations submitted by residents. These be helpful for evaluating your preceptors as required by the Standard (Standard 4.4).
- Resident tab – will ALERT the RPD if there are missing development plans and objectives not TE. Reports included per resident are G&O Coverage and Evaluation data including details about each objective (ACHR, average score, and most recent score). This helps the RPD demonstrate the resident’s progression throughout the year and if changes need to be made to the development plan. Filter resident data by selecting Academic Year(s) and Resident(s) from the drop-down list.
- Evaluation Tools tab – Contains a grid of each evaluation type. This shows if evaluations required by the program are submitted on time and if any have been sent back for edit. For each evaluation type, surveyors or RPDs can see at a glance the # of evaluations delivered, submitted, submitted within 7 days of the due date, submitted within 8-14 days of the due date, submitted > 15 days past the due date, not submitted, or sent back for edit. Of note, evaluations sent back for edit do not count as late if the evaluations were initially submitted on time.

For more information on the Dashboards, refer to the document "Using Dashboards to Review Program Information" which can be found in the Help Documentation section in PharmAcademic. If you have further questions about the Dashboards feature, please ask your residency surveyor or PharmAcademic at support@mccreadiegroup.com.

Accreditation Services Office News



Congratulations to the new members of the lead surveyor team: Michelle McCarthy, PharmD, FASHP ASHP Lead Surveyor

Michelle McCarthy, PharmD, FASHP has transitioned from a contract lead surveyor to a full-time Accreditation Services Associate at ASHP! Michelle has a long history of involvement in residency training. The UVA Health PGY1 Pharmacy Residency program that she previously directed was the recipient of a 2015 ASHP Foundation Residency Expansion Grant and the 2017 ASHP Foundation Residency Excellence Program Award. We are thrilled to have her on-board full-time and she's very excited to be able to work with residency programs all over the country! See her full bio [here](#).

Good Bye and Good Luck!

Susan Francis has left ASHP and Accreditation Services to accept a System Manager, Pharmacy Education Programs position at Novant Health in North Carolina where she will still be involved in pharmacy residency training. Susan started with ASHP in September 2014 and in her role as an Accreditation Services Associate was instrumental in supporting continued residency program growth and our continued and our continued commitment to creating a quality residency program through standards compliance. We offer our thanks and congratulations for a bright future!

Know Your Surveyors

[Click here](#) to learn more about ASO lead surveyors.

Let's Stay in Touch

Accreditation Services Office (301) 664-8835 General Voicemail Number

E-mail: asd@ashp.org

All general inquires, as well as requested updates and reports, should be e-mailed to our central e-mail address.

Mailing address:

American Society of Health-System Pharmacists
Attn: Accreditation Services Office
4500 East-West Highway, Suite 900
Bethesda, Maryland, 20814

Resources

Coming Soon! ASHP's Competency Assessment Center for Preceptors

Available in early 2022 this annual subscription is specifically designed to support and monitor competency training of faculty members or preceptors involved in pharmacy student practice experiences (IPPES and APPES) and/or residency programs. With a manageable 30 minutes of content per competency, staff can complete modules in the course of a busy work day. Whether you have a question about features or pricing, our team is ready to answer all your questions. Learn more at ashp.org/pcac



Essential Resources for Residency Programs- buy both and save 15%

- **The Essential Guide to Pharmacy Residency Research**

An accessible and practical overview of the research process—all in one convenient, easy-to-use guide. Serves as a “how to” for pharmacy residents, students, and practitioners on how to design, start, and complete a research project.

- **Get the Residency: ASHP's Guide to Residency Interviews and Preparation, 2nd Edition**

The authors of this book are turning students into dynamic, successful candidates, and offer candid advice, guidance, and warnings that will be directly applicable to your hunt for a post graduate residency or fellowship.



AHFS® Clinical Drug Information™ (CDI) FREE for ASHP resident members!

AHFS CDI expands your access to real-time drug and safety updates by linking directly and in context to 20 additional specialty databases. Access all the latest updates including drug shortages information, toggle between a quick summary of essentials and a comprehensive monograph, review compatibility matrices for patient care at the bedside, and view seamlessly incorporated FDA safety data. Resident members can access their personalized redemption code by logging into their ASHP account and then using the code at ahfscdi.com.

