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ashp[®] NATIONAL PHARMACY PRECEPTORS CONFERENCE



NPPC Highlights

Thank you for making this year's National Pharmacy Preceptors Conference, held virtually on October 2-3, an incredibly well-attended event. We were thrilled to have over 700 participants, including directors and coordinators of residency training programs, preceptors for both students and residents, pharmacy administrators, and other professionals engaged in pharmacy education. The conference featured informative educational sessions and a virtual poster chat, allowing preceptors to exchange insights and innovations in residency training and pharmacy student education. The virtual NPPC exceeded our expectations and left a lasting impact.



Session Highlights

All sessions were recorded in order to provide home study continuing education credit to conference registrants. Attendees will be able to view sessions that they could not attend during the live conference, claim CE, and revisit attended sessions. Home study sessions should be available after November 1, 2024.

Session topics this year were robustly attended and included Artificial Intelligence and Precepting, Professionalism, Layered Learning, Gamification in Precepting, and DEI just to name a few. This broad selection of sessions offered preceptors a multitude of choices to what would benefit their practice best. Accreditation Services held sessions that offered great conversation on the issues affecting preceptors and directors in real time to improve or assist the attendee's precepting landscape.

Preceptor-focused educational sessions will be incorporated into the Pharmacy Futures 2025 meeting. Please mark your calendars to attend **ASHP National Pharmacy Preceptors Conference at Pharmacy Futures, June 7 - 11, 2025 in Charlotte, North Carolina.**



MCM2024: RPDC Workshops, Residency Showcase and Accreditation Educational Sessions

Pre-Meeting Workshops: Residency Program Design and Conduct (RPDC)

The RPDC full-day workshops will be held live at the 2024 Midyear Clinical Meeting and Exhibition on Saturday, December 7 in New Orleans, Louisiana.

In this workshop, attendees will review the Accreditation Standard for the design and conduct of a pharmacy residency program. Topics covered include: program structure, learning experience description requirements, orientation, use of preceptor roles, evaluation, resident development plans, and continuous residency program improvement.

NOTE: CE credit will be offered for this workshop. Workbooks will be emailed to the address you provide for registration (only electronic files will be provided, please bring your laptop to the workshop for reference and use). An additional fee is required to attend an RPDC Workshop.

The following RPDC Workshops will be offered 8:00 a.m. - 5:00 p.m. on Saturday, December 7:

- **PGY1 New Programs**
- **PGY1 Existing Programs**
- **PGY2 New Programs**
- **PGY2 Existing Programs**

[Space is limited, register today to participate!](#)

MCM24: Residency and Accreditation Related Sessions



Meeting Room Assignments can be found on the app **ASHP LIVE!**

Saturday December 7 - Pre-Meeting Workshops

8:00 a.m.-5:00 p.m. Residency Program Design and Conduct (RPDC)

Sunday, December 8

12:00 p.m.-1:00 p.m. PhORCAS: How Programs Can Optimize the WebAdMIT™ Portal within PhORCAS

1:00 p.m.-2:00 p.m. Getting Started and Applying for Accreditation-Finding the Pathway and Taking the Right Steps

1:00 p.m.-2:00 p.m. New and Prospective Pharmacy Technician Training Program Directors and Instructors Meeting

1:00 p.m.-3:15 p.m. The ASHP W. Mike Heath Federal Forum

2:00 p.m.-3:00 p.m. Updates from the Pharmacy Technician Accreditation Commission

2:00 p.m.-3:00 p.m. [Using PharmAcademic™ to Support Resident Learning](#)

3:00 p.m.-5:00 p.m. Residency Program Directors and Preceptors Town Hall: Updates from the Commission on Credentialing

5:45 p.m.-7:15 p.m. ASHP Foundation Cocktail Reception: Honoring Donors and Recognizing Excellence in Residency Training and Research

Monday, December 9

1:00 p.m.-4:00 p.m. Residency Showcase™

4:30 p.m.-5:30 p.m. Community Pharmacy Residency Open Forum

4:30 p.m.-5:30 p.m. Regional Residency Conference Planners Meeting

4:30 p.m.-5:30 p.m. [Residency Program Director \(RPD\) Mentor/Mentee Meet & Greet](#)

Tuesday, December 10

8:00 a.m.-11:00 a.m. Residency Showcase™

10:00 a.m.-11:00 a.m. Ask the Pharmacy Residency Accreditation Surveyors Roundtable Discussion

1:00 p.m.-4:00 p.m. Residency Showcase™

2:00 p.m.-3:00 p.m. Ask the Pharmacy Residency Accreditation Surveyors Roundtable Discussion

4:30 p.m.-5:30 p.m. Managed Care Pharmacy Residency Open Forum

Wednesday, December 11

8:30 a.m.-9:30 a.m. Resident Posters

11:00 a.m.-12:00 p.m. Resident Posters

12:30 p.m.-1:30 p.m. Resident Posters

2:00 p.m.-3:00 p.m. Resident Posters

3:15 p.m.-4:15 p.m. Resident Posters

Residency Showcase Tips and Reminders

Residency Showcase Tips and Reminders

The 2024 Residency Showcase is right around the corner! Make sure that you are doing everything you can to prepare by using the checklist below.

- Promote your program's opportunities on the [program listing portal](#), the free database of residency programs advertised as available for discussion at the Residency Showcase. Students will use this resource to decide which programs to seek out while at the meeting. If you need assistance, please review the [instructions](#).
- Double check your organization's assigned session and booth location on the [floor plan/list of participating institutions](#).
- Review information on the [Residency Showcase Information](#) page, including logistics, important dates, Rules and Regulations, and more.
- Visit the [2024 ASHP Midyear website](#) to locate answers to any questions about your experience at the meeting.

Virtual Residency Showcase

The [virtual Residency Showcase](#) will occur the week after Midyear. The virtual Showcase will be open to all students – registration for Midyear is not required. Programs have the option to participate in the virtual Showcase at no additional cost if they participated in the live event but they cannot participate in the virtual showcase unless they participate in the live format. More details to come soon.



NEWS Commission on Credentialing

The Commission on Credentialing (COC) met at ASHP in Bethesda, Maryland on August 9-10, 2024.

The Update from the ASHP Commission on Credentialing presentation was presented live at the National Pharmacy Preceptors Conference and will also be presented at the Midyear Clinical Meeting.

The full power point presentation will be available on the ASHP website after the Midyear Clinical Meeting in December.

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

Residency	Total #	Conditional Accreditation	1 yr	2 yr	3 yr	4 yr	6 yr	7 yr	8 yr	Defer	Discontinue
New	100	X	8	X	X	17	X	X	72	2	1
Reaccreditation	126	X	3	X	X	13	X	X	106	4	X
Special Cases	48	4	8	5	3	20	3	5	X	X	X
TOTAL	274	4	19	5	3	50	3	5	178	6	1

The Commission on Credentialing met in August and made some changes to the [ASHP Regulations on Accreditation of Pharmacy Residencies](#) (Regulations) and the [ASHP Accreditation Standard for Postgraduate Pharmacy Residency Programs](#) (The Standard) which the ASHP Board of Directors approved in September. The intent of the changes is to simplify processes and minimize unintended challenges to structuring and managing residency programs. The Commission on Credentialing also made minor updates to the Deliverable GUIDANCE for [Required Competency Areas, Goals, and Objectives for Postgraduate Year One \(PGY1\) Pharmacy, Community-Based and Managed Care Residency Programs](#) (PGY1 Harmonized CAGO).

Details of the changes and implementation/effective date are outlined in the document [SUMMARY OF CHANGES September 20, 2024](#) posted on the ASHP [Residency Program Resources](#) page and summarized below.

1. Change to The Standard: Elimination of [Standard 4.3.d](#) and [Standard 4.6.c](#)

- **Rationale:** Standard 4.3.d (*Residency program directors serve as role models for pharmacy practice and professionalism as evidenced by ongoing professional engagement*) and Standard 4.6.c (*Preceptors must demonstrate the ability to precept residents' learning experiences as evidenced by role modeling ongoing professional engagement*) are captured within other Standards (Standards 4.1.b, 4.4.c.1, and 5.1.c.2) and within a required objective for several residency program types.
- In order to meet the Residency Program Director/Preceptor qualifications required by The Standard, program directors and preceptors will no longer need to document items in the Academic and Professional Record (APR) for 4.3.d and 4.6.c. Because each program is responsible for documenting preceptor appointment and reappointment criteria (Standard 4.4.c.1), programs may opt to retain ongoing professional engagement requirements for appointment/reappointment. In early 2025, the Professional Engagement section (page 4) of the electronic APR form in PharmAcademic will be updated with language to notify preceptors that the page is optional, and the flags or alerts will be removed. Please note that prior to the update, preceptors can continue to complete the electronic

APR form and bypass the alerts on page 4.

There is nothing that prohibits submission of the form.

- Implementation Date: Effective Immediately.

2. Change in Required Documentation for New or Changed Residency Program Director for a Program

- **Rationale:** Minimize administrative burden and increase efficiency in paperwork submission process as part of the Accreditation Services Office (ASO) review of new residency program directors (RPD).
- RPDs will need to submit the Academic and [Professional Record \(APR\)](#) form only and no longer need to submit a curriculum vitae (CV) to ASO for a new or change in RPD.
- Implementation Date: Effective Immediately

3. Revision to [Regulations](#) for Multisite Designation

- **Rationale:** Simplify parameters for how a residency program can be structured, considering the changing landscape of healthcare organizations and care delivery. Details are included in the [Summary of Changes Document September 20, 2024](#).
- Implementation Date: Effective Immediately; existing programs impacted by the above changes will have until July 1, 2026, to adjust their program structure so it is compliant with the updated parameters. *Note: The annual accreditation fee schedule will be revised to account for the elimination of “single-site” and “multi-site” designations with the 2026 fee schedule to be published in mid-2025. The 2025 annual accreditation fee schedule published in July 2024 will remain in effect as currently structured for the 2025 billing year with invoices to be sent in November 2024 (as per usual invoicing schedule).*

4. Update to PGY1 Harmonized CAGO GUIDANCE for PGY1 Residency Program Deliverables

- **Rationale:** Some residency programs use a “flipped model” for residents’ major projects.
- Guidance for the major project has been updated to clarify that if it is not possible for Objectives R2.1.1-R2.1.6 to be addressed through residents working on one quality improvement or research project, these objectives can be addressed through work on more than one project/initiative (i.e., the “flipped model”).
- Please review the revised [PGY1 Harmonized CAGO](#) on the ASHP website and the Surveyor Tips: In the Know article on Required [Deliverables](#).

We are excited about the above changes and the benefits these changes provide to residency programs and program administration. Thank you for your continued support of residency training excellence! Questions regarding the above can be directed to asd@ashp.org.



UPDATED Documents and Revisions Posted to the Website

The following updated documents that reflect the changes outlined have been posted to the website:

[ASHP Regulations on Accreditation of Pharmacy Residencies](#) - September 2024

[ASHP ACCREDITATION STANDARD FOR POSTGRADUATE PHARMACY RESIDENCY PROGRAMS](#) - September 20, 2024

[Diversity Resource Guide](#) - October 2024

The Diversity Resource Guide has been updated to incorporate additional diversity, equity, and inclusion (DEI)-focused resources since the original guide was released in 2022. Additionally, the guide links to publications, webinars, podcasts, and web-based resources for gender, race, LGBTQ+.

In the **Example Documents** section on the [ASHP Residency Resources](#) Website

ASO has created and shared a number of residency program resources. New additions include:

- [Example development plan for a typical \(not challenging\) resident](#)
- [Remediation/dismissal policy examples](#)
- [Duty hours policy examples](#)
- [PGY1 Community-based Pharmacy completion requirements](#)
- [PGY1 Managed Care Pharmacy completion requirements](#)
- [PGY2 Completion requirements](#)

NEWS Report Response Evidence in PharmAcademic™

Simplified Survey Report Response - September 2024

As the Accreditation Services Office works to increase efficiency in processes for residency program directors (RPDs) and decrease residency administrative burden, effective in September 2024, accreditation report responses no longer need to include downloaded evidence that is maintained within PharmAcademic™, within the PDF appendices of the report response for submission. Lead Surveyors will have access to the program's PharmAcademic™ files post-survey for the purpose of reviewing supporting evidence referenced in the report response to applicable findings. RPDs will be expected to outline in the required narrative, any supporting evidence from PharmAcademic™ related to the resolution of/progress made in addressing the finding to direct the Lead Surveyor on what and where to find such files in PharmAcademic™. RPDs will still be expected to include all other evidence in the report response not maintained within PharmAcademic™ via the usual bookmarked PDF appendix process. Updated information on report response processes can be found on the website [After an Accreditation Site Survey](#).

REMINDER Important! Update your Online Residency Program Listing

PhORCAS and the National Matching Service (NMS) link to each program's online directory listing; ensure your listing is current. Programs can update most of their residency program listing information in the online directory, including application deadlines and any other pertinent program information. Programs are encouraged to detail special features and other pertinent information about their residency programs to inform potential applicants reviewing the online directory during their residency program search.

Additionally, it is important that programs update the fields for the institution **Model Types** and **Total Beds** in the program listing (no later than January 1, 2025). This ensures accurate comparisons for the Annual Report Analytic Dashboards in PharmAcademic. PharmAcademic displays key data from the individual program's annual survey and compares it with similar programs. Without having complete information, while the program can still see its data, the comparisons may be limited, and the overall combined results from similar-sized programs and institution types will not be accurate.

[Instructions for self-service portal](#) for the online Residency Directory are posted on the website.

Select changes may only be made by the Accreditation Services Office. These include the residency program director, chief/director of pharmacy, organization name, address, and program website (listed in the top left-hand corner of the listing). Please check that links to your own webpage are working. To request updates to online residency program directory listing that must be made by Accreditation Services, please email the requested change and your program number to asd@ashp.org

PhORCAS™/WebADMIT™ Updates



You Responded and We Listened!

A survey was sent to all PhORCAS users last spring (program directors, reference writers, and residency applicants). We had a wonderful response rate! One of the popular requests was to bring back the characteristic comment boxes on the reference forms that were not available last year. They are back for the upcoming residency application and interview cycle.

Please see the [PhORCAS/WebAdMIT Frequently Asked Questions](#) to review what is new for the upcoming Match cycle and other changes that may interest you.

PhORCAS will be open for applicants on November 5 and WebAdMIT will be open on November 8.

Programs are reminded to close out positions in PhORCAS that are early committed to avoid applicants paying to apply to positions that are not available. ([see next section on Early Commitment](#)). Applicants who apply to programs that have not been closed out but have no available positions do not receive refunds.

If you ever need assistance with PhORCAS, please call customer service at (617) 612-2868 from 9am-5pm EST or email them at phorcasinfo@phorcas.org

For assistance with WebAdMIT, contact their customer service representatives at (857) 304-2020 or email them at Webadmitsupport@liaisonedu.com

Representatives from Liaison International, the vendor supporting PhORCAS and WebAdMIT will be presenting at the Midyear Meeting in New Orleans on Sunday both during the student sessions and for residency program directors and preceptors. In addition, they will be available for curbside consult in the Exhibit Hall on Monday and Tuesday—take advantage of their amazing expertise!

Reminder: Early Commitment Process Deadline - December 18, 2024

To learn more about the rules for participation in the Early Commitment Process, please review the information from the [National Matching Service](#). Residency programs that use an early commitment process must have a formal, written procedure addressing, at a minimum, how this option is promoted to PGY1 residents, deadlines for applications and decisions, and how candidates are assessed and selected for interview and early commitment.

Early commitment is available for current PGY1 residents who are in programs operated by the **same organization** or the **same health system** as the PGY2 program. The PGY1 and PGY2 residencies must be consecutive years of employment for the resident. Determination whether the PGY1 and PGY2 residencies are operated by the **same organization** or **health system** will be at the discretion of ASHP. Questions can be addressed by emailing 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. Programs that early commit should not withdraw themselves from the NMS Match System; NMS will withdraw the program from the Match when the Early Commitment letter of agreement is processed.

Positions available in participating PGY2 programs that are not removed from the Match through the Early Commitment Process by December 18, 2024, must be offered through the Match, and applicants interested in such positions must register for and participate in the Match.



Important Dates for 2025 National Matching Service - Two Phase Match

- November 5, 2024:** List of ASHP Match programs available on the website AND Applicant registration in PhORCAS opens
- December 18, 2024:** Early commitment deadline
- December 31, 2024:** Recommended date by which applicants should register for the Match
- February 18, 2025:** Phase I rankings open
- March 6, 2025:** Deadline for applicants to register for Phase I of the Match
- March 7, 2025:** Phase I rank order list deadline
- March 19, 2025:** Phase I Match Day: Results of Phase I match released
Program Directors must send letters of confirmation no later than April 18, 2025.
The list of programs with available positions for Phase II will be provided on the Match website at 12 noon Eastern time
- March 20, 2025:** 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 24, 2025:** Beginning at 9:00am Eastern Time, 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 31, 2025:** Phase II rankings open
- April 15, 2025:** Applicant registration deadline for Phase II
- April 16, 2025:** Phase II Rank order list deadline
- April 23, 2025:** Phase II Match Day: Results of Phase II released
Program Directors must send letters of confirmation no later than May 16, 2025.
The list of programs with available positions after Phase II of the Match will be provided on the Match website at 12 noon Eastern Time
No action to fill available positions, such as contacts or interviews between applicants and programs, is to be taken on April 23 prior to 12:00 p.m. Eastern Time.
- April 24, 2025:** 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 30, 2025:** Programs with available positions in the post-match may begin making offers to applicants.

Read more about the [2025 ASHP Match process here](#).

Interview Season: 2025-2026 Residency Class Recruiting

Virtual versus In Person Interviews

Interview format (e.g., virtual, in-person, hybrid) is a program-level decision. *Programs offering in-person interviews are encouraged to consider offering a virtual option for those unable to participate in person.*



As a reminder, to align with the [ASHP Accreditation Standard for Postgraduate Residency Programs](#) and the updated [ASHP Regulations on Accreditation of Pharmacy Residencies](#) the following **MUST** be provided to all candidates invited to interview **at the time that the offer to interview is extended**:

- Program structure that includes the number of required learning experiences conducted at locations beyond the primary practice site and financial support (e.g., mileage reimbursement, parking fees, tolls), if provided
- Leave policies
- Duty-hour policies
- Licensure policy
- Requirements for successful completion of the program
 - Requirements for overall achievement of educational objectives for the residency
 - The minimum threshold related to educational objectives that would allow awarding a certificate of completion.
 - List of required deliverables related to educational objectives
 - See pre-survey [packet submission requirements](#) for lists of deliverables for PGY1 programs.
 - Appendix requirements, if the program's associated Competency Areas, Goals, and Objectives include a required appendix
 - Other requirements as defined by the program
- Residency-specific remediation/disciplinary policy
- Program start date and term of appointment
- Stipend and benefit information
- Financial support for required professional meeting attendance

PharmAcademic™ Notes and Tips

Re-Design of Key Reports - Exciting Enhancements!

Don't Miss - PharmAcademic™ Session at MCM2024

A discussion of updates to the resident development plan process and enhancements to PharmAcademic™ will be discussed.

Highly used reports have been redesigned to make them easier to filter and review. The following is a list of changes to the reports.

Overdue Tasks Report (Program Report)

- “Overdue Evaluations and Cosign Tasks” report was renamed “Overdue Tasks Report”
- Overdue Duty Hours forms were added to the report
- Removed merged columns and added “Task Type” column so users can filter by the type of task (evaluation, evaluation cosign, duty hours)

ACHR History Report (Resident-Specific Report)

- Added the date the objective was marked ACHR
- Separated columns and removed “merged” columns so report can easily be filtered
- NOTE: The date each objective was marked ACHR was added to the Resident Dashboard. Note: if an objective was marked ACHR, and the RPD removed the ACHR status, and then it was marked ACHR again, the dashboard (and reports) will display the later ACHR date.



Goals and Objectives with Evaluation Responses (Resident-Specific Report)

- Added the date the objective was marked ACHR
- Separated columns and removed “merged” columns so report can easily be filtered
- Clarified column headers such as “original submit date”

Average Monthly Summative Scores (Resident-Specific Report)

- Added the date the objective was marked ACHR

Evaluation Reports

- The “Manage All Evaluations” page was renamed “Evaluation Reports” and was moved to an easier to access location for RPDs/Designees (Manage Program > Evaluation Reports). ASHP Surveyors will continue to access this page by going to the Evaluation Tools Dashboard and clicking “Go to Evaluation Search and Reports.”
- The search page was redesigned with additional headers and clarifying text to assist users with filtering evaluation results.
- The report names and descriptions were re-written to provide more clarity
- The Announcements tab location has changed and can be found by going to Manage Program > Tools > Announcements.

View Submitted ASHP Annual Accreditation Report

RPDs and Designees can access these reports on the Program Dashboard.

- The text of the submitted report is now darker making it easier to read.
- Users can now Print/Save the submitted report.

PharmAcademic™ Help at Your Fingertips

Have you ever forgotten how to do something in PharmAcademic™ that you did last year with a new set of residents? Or thought, “I wish I could just...” when it came to managing something in PharmAcademic™? If you have, you are not alone. And there is help at your fingertips with the PharmAcademic™ Help Center!

Start by selecting the Help Center hyperlink at the top left of the webpage.



MY PORTFOLIO • HELP CENTER • APR

Once in the Help Center, there are options to enter a query or select a topic from a curated list. By selecting one of these topics, you be given a list of information regarding the common tasks, reports, and options you have within your program. Each topic will also include step-by-step instructions and screenshots to help you navigate the system if applicable.

If you want to search for a topic, simply start typing in the convenient search bar at the top of the main Help Center page. Here you can find the link to several topics related to your search. Note in the example below how topics are populated below the search bar as the query was entered.

How can we help you?

Search

From McCreddie Group > PharmAcademic Communications and Announcements
[NEW Ability to Assign an Interim RPD for the Program \(1/2021\)](#)

Training and Guidance > Tips and Tricks
[Updating Resident's Program Dates](#)

PharmAcademic Instructions > Account and Program Information
[Viewing Program Announcements and Files](#)

PharmAcademic Instructions > Learning Experiences and Schedules
[Copying a Learning Experience](#)

PharmAcademic Instructions > Program Management (for RPDs)

If you can't seem to find the answer you need, head to the link to PharmAcademic™ support. There you will be able to send a message to customer support about your specific issue or question. RPDs may also enter an enhancement request via this option by selecting this option in the Type of Request field.

NEWS Accreditation Services Office

Annual Accreditation Fees

ASHP Accreditation Services Office distributes accreditation fee invoices electronically by email to residency programs annually in mid-November. The invoices are released between November 12 and 15, 2024. 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 [2025 Accreditation Fee Schedule here](#). Should you have any questions related to your invoice after receipt, please contact ASHP Customer Service (custserv@ashp.org) or ASHP Accounts Receivable (AR@ashp.org) or by calling 1-866-279-0681 with your organization name and address, order number and 5-digit ASHP program ID code.

Residency Program Director Changes

What is the process when we have a Residency Program Director (RPD) change?

Programs that have RPD changes must submit information to ASHP in accordance with [Regulations on Accreditation of Pharmacy Residencies](#).

The RPD's [current academic and professional record \(APR\)](#) and the information below must be submitted by email to ASD@ashp.org:

- Name and credentials of the RPD
 - This will be how your name and credentials will be displayed in the on-line residency directory, so please be complete.
- Effective date of RPD change
- ASHP 5-digit program number
- Program type
- Address
- Email
- Work phone number

The RPD's curriculum vitae is NO longer required. The submitted APR must coincide with the 2023 harmonized accreditation standard. ASO will accept either a downloaded PharmAcademic™ APR OR [the updated Preceptor Academic and Professional Record form](#). Older/ prior APR versions (dated prior to 2023) will NOT be accepted. To align with the recent changes to [The Standard](#), language is being added to PharmAcademic™ and the paper APR to indicate the ongoing professional engagement section is no longer required.

Formal communication from the Accreditation Services Office is distributed following review and approval. RPDs should manage the program as necessary including updating the program director within PharmAcademic™ prior to formal communication from ASHP.

Residency Program Director (RPD) Mentor Program

ASHP Accreditation Services Office (ASO) oversees a residency program director (RPD) mentorship program to connect new and experienced RPDs. The program began in 2022-2023 with a pilot and continued with a new cohort in 2023-2024. To date, the RPD mentoring program has matched 459 mentees to 277 mentors. Participation is limited to ASHP members, and mentor/mentee matches are based primarily on program type. Recruitment for this year's cohort of mentors and mentees is currently underway. A Qualtrics survey sent to RPDs on September 24 and remained open through October 24, 2024. Matched results are planned to be released prior to the Midyear Clinical Meeting (MCM).

We are pleased to announce that the 2024 RPD Mentor/ Mentee Meet and Greet will be held on Monday, December 9 from 4:30-5:30 PM in Ballroom B, Level 2. Please mark your calendars to attend this event and meet with other mentees and mentors. Refreshments will be provided.

Questions about the RPD Mentorship Program should be directed to Michelle McCarthy in ASO at mmc-carthy@ashp.org.

Surveyor Tips: In the Know

Standard 2.2.a.1 - Clarifying “time and competencies missed”

Standard 2.2.a.1 - Training is extended to make up any absences that exceed the allotted time and extension beyond the allotted time is equivalent in competencies and time missed.

As part of a residency programs' required leave policy, Standard 2.2.a.1 requires that any program that allows for an extension of the residency year due to a resident exceeding the time away allowance ensures that “training is extended to make up any absences that exceed the allotted time and extension beyond the allotted time is equivalent in competencies and time missed.” It is important that the program leave policy specifically indicates this when describing what an extension of the residency program will look like if the resident exceeds the maximum allowed time away from the program.

To break it down, “time missed” would mean that the extension is equivalent to the number of days missed that exceed the allowed time away. For example, a program that allows up to 37 days of time away from the program before requiring an extension has a resident with various types of approved leave equal to 45 days away would result in eight days needing to be made up by extending the residency program.

“Competencies missed” would mean that whatever required learning experiences, activities, completion requirements, and deliverables missed during a leave that exceeded the allowed time away are required to be made up. For example, a resident missing four weeks of leave beyond the allowed 37 days that included 1) the required four-week critical care learning experience, 2) two required staffing weekends, and 3) developing and presenting a required nursing in-service would necessitate the resident making up the following during the extension 1) a four-week critical care learning experience; 2) two staffing weekends; and 3) a nursing in-service. A resident could not “make up” time and objectives missed from required learning experiences in other dissimilar learning experiences or activities. For example, staffing additional weekends in the ICU instead of completing the missed four-week critical care learning experience does not meet the intent of the standard.

Tips for Implementing the New Objectives in the PGY1 Harmonized CAGOs

Many of the previous PGY1 pharmacy, PGY1 community-based pharmacy, and PGY1 managed care pharmacy required objectives were cross-walked to similar objectives through PGY1 CAGO harmonization (please review the crosswalks at [PGY1 Competency Areas](#)). Entirely new objectives and tips for their implementation are described below.

- **R1.4.1: (Applying) Deliver and/or enhance a population health service, program, or process to improve medication-related quality measures. [New]** – Population health describes the focus of outcomes for a specific group of patients with similar characteristics. The population may include patients within a similar location (e.g., in a specialized care unit, in an outpatient practice), under the same insurance coverage, with a common health condition, with a common ethnic background. This objective was added so that residents gain experience in the use of quality metrics in a population, participate in the delivery of care for the population, and/or enhance the current program. This objective

may be assigned to a direct patient care experience where residents will participate in patient care that is driven by outcome measures for the population. Examples may include work within antimicrobial stewardship, diabetes management in the inpatient and outpatient settings, or evaluation of the use of appropriate evidence-based medications in a specific population. Programs should ensure that learning activities extend beyond a review of data. While some resident projects may involve the evaluation of population data, if the resident is not delivering or enhancing a process, assigning this objective to a project learning experience will not meet the full intent of the objective and be cited with Standard 3.1.b.1 on survey.

- **R3.2.4: (Applying) Demonstrate engagement in the pharmacy profession and/or the population served. [New]** – The intent of this objective is to have PGY1 residents participate in professional activities outside of the primary practice site. Programs should determine opportunities for residents to engage with the profession through advocacy and participation within local, state, regional, and national professional societies. While membership within a professional organization is a vital part of professional development, learning activities should extend beyond professional organization membership. Examples may include activities at professional meetings, work within committees, and engagement in focused educational content (e.g., journal club, newsletter). Professional engagement is not limited to pharmacy organizations and may include other healthcare or community organizations (e.g., Society of Critical Care Medicine, YMCA). Activities related to community service may also be assigned to this objective and should include engagement in organizing events or serving a population.

Required Deliverables

The [PGY1 Harmonized CAGO document](#) outlines the required deliverables each PGY1 resident must complete during their residency year (see p. 15-16). These deliverables are also required to be a part of the program’s completion requirements list (Standard 2.5.b). There are six objectives within the PGY1 Harmonized CAGOs that require deliverables; however, some will require more than one deliverable each.

- R1.4.2 Deliverable(s): Drug class review, monograph, treatment guideline, treatment protocol, utilization management criteria, and/or order set.
 - PGY1 Pharmacy – **one** deliverable is required
 - PGY1 Community-Based Pharmacy – **one** deliverable is required
 - PGY1 Managed Care Pharmacy – **three** deliverables are required
 - Programs should list the final product/deliverable as the completion requirement (e.g., One monograph) rather than stating a resident would participate in a formulary activity to ensure the appropriate deliverable is completed.
- R2.1.2 Deliverables: A project plan as defined in the Objective and Criteria
 - PGY1 Pharmacy – **two** deliverables are required
 - PGY1 Community-Based Pharmacy – **three** deliverables are required
 - PGY1 Managed Care Pharmacy – **two** deliverables are required
 - Project plans are required for **both a major project** (i.e., longitudinal residency project) **and a second project** (e.g., quality improvement project, medication use evaluation). Therefore, objective R2.1.2 must also be assigned to the learning experience(s) where each of these projects will be completed, and two deliverables are required.

- A Business Plan for a new or enhanced service is also required for PGY1 Community - Based Pharmacy programs. This should be a formal written document with the core components of the plan (e.g., Executive Summary, Business Description, Service Description, Marketing Plan, Financial Plan, Operations, Analysis). The Business Plan may be linked to either the major or second project and does not require completion of a third project.
- R2.1.6 Deliverables:
 - PGY1 Pharmacy – three deliverables are required
 - PGY1 Community-Based Pharmacy - three deliverables are required
 - PGY1 Managed Care Pharmacy – three deliverables are required
 - Project reports are required for both a major project (i.e., longitudinal residency project) and a second project (e.g., quality improvement project, medication use evaluation). Therefore, the objective R2.1.6 must also be assigned to the learning experience(s) where each of these projects will be completed.
 - The reports for the major project include 1) platform or poster presentation presented to an external audience and 2) written report (e.g., manuscript or formal written report).
 - The report for the second project may be presented via verbal or written formats. Depending on the program, project and/or resident, this deliverable may vary (e.g., poster, platform presentation slides, formal written report, one page summary).
 - [Guidance](#) was recently updated to address management of the objective and deliverables when residents work on more than one project/initiative (i.e., the “flipped model”).
- Competency area R4: Teaching and Education is focused on teaching small and large groups. Activities and deliverables in this section are not related to individual patient care, delivery of information for one person (e.g., one health care provider, one student), or topics not related to medication or practice education.
- R4.1.1 Deliverable:
 - No specific deliverable is required for this objective alone. The deliverables for the following objectives (R4.1.2 and R4.1.3) will satisfy this objective since the resident is required to create the education delivered verbally and in writing.
- R4.1.2 Deliverable:
 - PGY1 Pharmacy – **one** deliverable is required
 - PGY1 Community-Based Pharmacy - **one** deliverable is required
 - PGY1 Managed Care Pharmacy – **one** deliverable is required
 - Written communication must be created with the intent of delivering education to a small or large group in the written format only (i.e., slide handouts from a verbal presentation provided to the audience do not meet the intent of the objective). The content of written education must also be focused on medication management and/or the practice area (i.e., a newsletter about events for pharmacy week will not meet the intent of the objective). The same written report or project results for objective R2.1.6. may not be used to satisfy this objective.
- R4.1.3 Deliverable:
 - PGY1 Pharmacy – **one** deliverable is required
 - PGY1 Community-Based Pharmacy - **one** deliverable is required
 - PGY1 Managed Care Pharmacy – **three** deliverables are required

- Verbal education must be created with the intent of delivering education to a small or large group orally. While all verbal education the resident provides may not be formal (e.g., presentation slides), at least one presentation must have evidence in the form of slides or a presentation handout for the deliverable. The same presentation of project results for objective R2.1.6 may not be used to satisfy this objective.

Technician Training Program Updates and Opportunities at MCM

From First Student to ASHP/ACPE-Accreditation: How to Get Your Executive Suite to Support a Technician Education and Training Program for Your Department: A Toolkit

Providing ASHP/ACPE-accredited pharmacy technician education and training programs within health systems has provided an excellent opportunity for organizations to fight the workforce shortage within their health systems.

To date, there are close to 36 health systems with ASHP/ACPE accredited or candidate- status programs serving at least seventy-five institutions, and that number continues to grow. A wide variety of institutions that already have taken the plunge to offer training and education and can be found in the [ASHP/ACPE Directory of Accredited Pharmacy Technician Education and Training programs](#).

Surveyed program directors have indicated that graduates from ASHP/ACPE accredited pharmacy technician education and training programs exhibit greater job satisfaction, longevity in staying within their departments, and have more potential for promotion. Programs provide opportunities for employees from other departments to become trained and educated in pharmacy, obtain an advanced position and more likely stay at the institution as a career. Hospitals and health systems that offer ASHP-accredited pharmacy residencies already understand the accreditation process and become familiar with the accreditation for pharmacy technician education and training programs very easily.

A comprehensive toolkit has been developed by a group within the Pharmacy Technician Accreditation Commission (PTAC) to assist health system pharmacy administrators to share with their C-Suite to educate them on the value of offering an ASHP/ACPE accredited program. The toolkit includes how to start a program, numerous tips from the PTAC, sample job descriptions for pharmacists/pharmacy technicians to lead the program, as well as sample career ladders. An additional document includes answers to some frequently asked questions. Of the current technician programs in health systems, several were developed by PGY2 HSPAL residents as their residency project. Please consider sharing the toolkit and FAQs with incoming PGY2 residents as a potential residency project. The *Hospital and Health System Technician Program Toolkit* can be found posted on the Technician Accreditation webpage under [Accreditation Standards, Regulations and Other Tools](#).

After reviewing the Toolkit if you have any questions, please contact Lisa Lifshin at llifshin@ashp.org or better yet, attend the session on how to start a program at the Midyear on Sunday, December 8 from 1-2pm (with an Update from the PTAC to follow).



2024 Program Award Recipient

UC Davis Health
Postgraduate Year 2 (PGY2) Ambulatory Care Residency Program
Sacramento, California



2024 Preceptor Award Recipient

David Nash, PharmD, MHA,
Director of pharmacy and residency program
Children's Hospital Colorado
Colorado Springs, Colorado



2024 New Preceptor Award Recipient

Abigayle R. Campbell, PharmD
Clinical Pharmacy Specialist and Adjunct Professor
Self Regional Healthcare
Greenwood, South Carolina

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](#).

NEWS ASHP New Practitioner Forum

Apply for the ASHP Executive Fellowship and Learn to Lead

The ASHP Executive Fellowship in Association Leadership and Management is a paid, 12-month program providing hands-on training in every aspect of not-for-profit association leadership and management. Under direct mentorship from ASHP's senior leaders, fellows work on strategic initiatives that impact the association and the profession of pharmacy. Learn more at our virtual open house on **November 14, 1 p.m. or 8 p.m. EST**, interview at **PPS**, or visit the **Residency Showcase at Midyear on Tuesday, December 10, from 1 p.m. to 4 p.m. CST (Booth #6482)**.

Be a Midyear Poster Mentor and Influence the Next Generation of Pharmacists

Want to give back to the profession and have fun while doing it? Volunteer as a poster mentor at the Mid-year Clinical Meeting & Exhibition. Poster mentors work one-on-one with a student or resident and provide feedback on their project. The application portal for mentors is now open.

Visiting Leaders Program

Preparing new pharmacists for practice by supporting nearly 250 residency program visits by pharmacy leaders through the Visiting Leaders Program since 2012, reaching more than 5,161 residents. Application opens December 1st for Spring 2025 visits.

Available from ASHP

ASHP Professional CertificatesSM

The ASHP Professional CertificatesSM educational product line supports the professional development and training needs of residents and preceptors working together in residency programs. Currently, ASHP is willing to offer significant discounted bulk pricing on certain resources that support the unique needs of pharmacy residents:

1. Teaching Certificate for Pharmacists
2. Research Skills Certificate
3. Medical Writing Certificate

Contact ASHP Sales & Business Development at sales@ashp.org to discuss pricing.

Additionally, ASHP recently refreshed our popular Pharmacogenomics and Diversity, Equity, & Inclusion Certificates. Learn more at www.ashp.org/certificates

ASHP provides free board review material for residents and new practitioners with the Review and Recertification Reward Program

Save \$1500 on preparation costs associated with board exam preparation. The Review and Recertification Reward Program (RRRP) eases the financial burden on residents and new practitioners preparing for board certification during this unique time in their pharmacy careers.

ASHP provides free study resources that vary by specialty. In return, you complete your recertification cycle with ASHP for only \$10 per month. That price is guaranteed for the entire 7-year recertification cycle. The RRRP is an ASHP member-only benefit and available for the Ambulatory Care Pharmacy*, Critical Care Pharmacy*, Geriatric Pharmacy*, Pediatric Pharmacy*, and Pharmacotherapy specialties.

[Enroll online](#)

*Offered jointly with the American College of Clinical Pharmacy (ACCP).



Review & Recertification Reward Program



Includes Free Board Exam Prep Resources

Hidden Narratives: Perspectives of Diversity, Equity, and Inclusion in Pharmacy

Stories and experiences of pharmacy professionals who identify as members of historically underrepresented groups.

This collection of 24 personal essays provides a candid look at the lives of those in the pharmacy community whose journeys have been shaped by a variety of defining factors, such as race, ethnicity, gender, sexual orientation, ability, language, and mental health.

In sharing their stories, the authors provide valuable insights and advice for others facing similar situations. Their reflections serve as a guide, fostering a deeper understanding among pharmacy colleagues, patients, and society as a whole.

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