

ASHP Statement on Continuing Education

Next to integrity, competence is the first and most fundamental moral responsibility of all the health professions....Each of our professions must insist that competence will be reinforced through the years of practice. After the degree is conferred, continuing education is society's only real guarantee of the optimal quality of health care.

—Edmund D. Pellegrino

In an era of rapidly accelerating change in health-care delivery, the roles of pharmacy practitioners are being constantly re-defined. As roles change, competency requirements change; and as pharmacy practitioners assume the increased responsibilities demanded in these new roles, they must make a corresponding commitment to improve their professional competence. Continuing education is a means by which practitioners can gain the knowledge and skills necessary to develop, maintain, and improve their professional competence.

In keeping with the mission of the American Society of Health-System Pharmacists (ASHP), the purpose of continuing education for health professionals is the improvement of patient care and health maintenance and the enrichment of health careers. Every practitioner should assume personal responsibility for maintaining and improving professional competence through lifelong, self-directed education. Every pharmacist should set personal educational objectives based on individual needs and career goals. One way to achieve these objectives is through continuing education experiences judiciously selected from among area, regional, and national resources. It should be the role of ASHP to facilitate the efforts of the pharmacist in self-directed education.

Objectives

The objectives for the continuing education services of ASHP shall be

1. To help pharmacists develop a more complete understanding of the importance and methods of lifelong, self-directed education and to encourage and assist them toward this goal.
2. To help practitioners evaluate their professional performance, identify areas where improvement is needed, and set realistic and attainable educational goals.
3. To provide to practitioners information on available area, regional, and national educational resources which will help them achieve their personal educational objectives.
4. To assist pharmacists in selecting educational resources that most effectively fulfill their individual needs.
5. To provide to pharmacists continuing education resources in a variety of formats and media best suited for the

subject matter and needs of the greater number of learners.

Authority

Matters relating to continuing education services will be considered by the Council on Educational Affairs and will be submitted to the Board of Directors for review.

Guidelines

The following guidelines are used in the development and conduct of continuing education programs and activities of ASHP:

1. Continuing education programs will be planned and conducted in accordance with the Criteria for Quality of the Continuing Education Provider Approval Program of the Accreditation Council for Pharmacy Education.
2. ASHP will collaborate, when appropriate, with other professional organizations, agencies, and educational institutions in the planning and conduct of continuing education activities.
3. When appropriate, due consideration will be given to the curricular approach in the planning and implementation of continuing education activities.
4. ASHP may limit or restrict the enrollment for any continuing education program, depending on the nature and requirements of the particular program.
5. ASHP's overall continuing education activity is intended to be self-supporting; however, the benefit versus cost value to members of a specific educational program must also be considered.

This statement was reviewed in 2003 by the Council on Educational Affairs and by the ASHP Board of Directors and was found to still be appropriate.

Approved by the ASHP Board of Directors, November 15, 1989. Developed by the Council on Educational Affairs. Supersedes a previous version approved by the ASHP House of Delegates on May 15, 1978.

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