

Education and Training

Quality of Pharmacy Education and Expansion of Colleges of Pharmacy (1108)

Source: Council on Education and Workforce Development

To support the Accreditation Council for Pharmacy Education's continuing role of promulgating accreditation standards and guidelines and engaging in sound accreditation processes to ensure quality in the education provided by colleges of pharmacy; further,

To acknowledge that, in addition to a robust curriculum, access to quality experiential educational sites and the availability of qualified faculty (including preceptors and specialty-trained clinical faculty) are essential determinants of the ability to expand enrollment in existing or additional colleges of pharmacy; further,

To oppose expansion of enrollment in existing or new colleges of pharmacy unless well-designed projections demonstrate that such enrollment increases are necessary to maintain a viable pharmacist workforce.

This policy supersedes ASHP policy 0607.

Residency Equivalency (1109)

Source: Council on Education and Workforce Development

To acknowledge the distinct role of ASHP-accredited residency training in preparing pharmacists to be direct patient-care providers; further,

To recognize the importance of clinical experience in developing practitioner expertise; further,

To affirm that there are no objective means to convert or express clinical experience as equivalent to or a substitute for the successful completion of an ASHP-accredited residency.

Pharmacy Internships (1110)

Source: Council on Education and Workforce Development

To encourage the National Association of Boards of Pharmacy to develop standardized pharmacy internship hour requirements that would be used uniformly by all state boards of pharmacy; further,

To support structured requirements, goals, and objectives for pharmacy internship experiences, in alignment with requirements for introductory and advanced pharmacy practice experiences; further,

To promote and expand new staffing models that foster expanded roles for pharmacy interns, providing work experiences that build upon their knowledge and help them develop as future pharmacists.

This policy supersedes ASHP policy 0802.

State-Specific Requirements for Pharmacist Continuing Education (1111)

Source: Council on Education and Workforce Development

To support the standardization of state pharmacist continuing education requirements; further,

To advocate that state boards of pharmacy adopt continuing professional development (CPD) as the preferred model for maintaining pharmacist competence and structure continuing education requirements as a component of CPD.

Innovative Residency Models (1112)

Source: Council on Education and Workforce Development

To support the development of innovative residency models that meet ASHP accreditation requirements.

Employment Classification and Duty Hours of Pharmacy Residents (1008)

Source: Council on Public Policy

To advocate that pharmacy residents should be classified as exempt employees; further,

To advocate that pharmacy residents be subject to duty hour limits (similar to resident physicians) with respect to all clinical and academic activities during their training program in accordance with the Accreditation Council on Graduate Medical Education (ACGME) standards and ASHP accreditation standards for pharmacy residency programs.

Interprofessional Education and Training (1014)

Source: Council on Education and Workforce Development

To support interprofessional education as a component of didactic and experiential education in Doctor of Pharmacy degree programs; further,

To support interprofessional education as a part of professional development for pharmacy practitioners and to collaborate with other disciplines to facilitate and promote programs that support this goal; further,

To encourage and support pharmacists' collaboration with other health professionals and health care executives in the development of team-based, patient-centered care models; further,

To foster documentation and dissemination of outcomes achieved as a result of interprofessional education of health care professionals.

This policy supersedes ASHP policy 0608.

Pharmacy Student Experiences in Medically Underserved Areas (0913)

Source: Council on Education and Workforce Development

To encourage colleges of pharmacy to require student learning experiences in traditionally medically underserved areas and with diverse patient populations.

Education About Patient Safety in the Medication-Use Process (0914)

Source: Council on Education and Workforce Development

To encourage colleges of pharmacy to include instruction on patient safety throughout the medication-use process in the didactic curriculum and during experiential education.

Pharmacy Expertise in the Preparation and Handling of Injectable Medications (0915)

Source: Council on Education and Workforce Development

To encourage colleges of pharmacy to include sterile compounding and aseptic technique instruction in the didactic curriculum and during experiential education; further,

To support the development of postgraduate, curriculum-based sterile compounding training programs to foster an increase in the number of pharmacists with sterile compounding expertise.

Continuing Professional Development (0916)

Source: Council on Education and Workforce Development
To endorse and promote the concept of continuing professional development (CPD), which involves personal self-appraisal, educational plan development, plan implementation, documentation, and evaluation; further,

To continue the development of a variety of mechanisms and tools that pharmacists can use to assess their CPD needs; further,

To encourage individual pharmacists to embrace CPD as a means of maintaining their own professional competence; further,

To encourage pharmacy managers to promote CPD as the model for ensuring the competence of their staff; further,

To collaborate with other pharmacy organizations, state boards of pharmacy, accrediting bodies, and regulatory bodies in the development of effective methods for implementing CPD; further,

To strongly support objective assessment of the impact of CPD on pharmacist competence; further,

To endorse the efforts of colleges of pharmacy and ASHP-accredited pharmacy residency programs to teach the principles, concepts, and skills of CPD.

This policy supersedes ASHP policy 0408.

Pharmacy Residency Training (0917)

Source: Council on Education and Workforce Development
To continue efforts to increase the number of ASHP-accredited pharmacy residency training programs and positions available.

This policy supersedes ASHP policy 9911.

Standardized Pharmacy Technician Training as a Prerequisite for Certification (0803)

Source: Council on Education and Workforce Development
To advocate that completion of an ASHP-accredited pharmacy technician training program be a prerequisite for the Pharmacy Technician Certification Examination.

Collaboration Regarding Experiential Education (0804)

Source: Council on Education and Workforce Development
To promote collaboration of health-system teaching sites with the colleges of pharmacy (nationally or regionally), for the purpose of fostering preceptor development, standardization of experiential rotation schedule dates and evaluation tools, and other related matters.

Entry-Level Doctor of Pharmacy Degree (0805)

Source: Council on Education and Workforce Development
To be an active participant in the Accreditation Council for Pharmacy Education (ACPE) process for the revision of accreditation standards for entry-level education in pharmacy; further,

To actively monitor the long-range impact that the single entry-level degree will have on residency education, availability of experiential training sites, graduate education, and continuing education programs, and the resulting health-system pharmacist applicant pool.

This policy supersedes ASHP policy 9809.

Requirement for Residency (0701)

Source: House of Delegates Resolution

To support the position that by the year 2020, the completion of an ASHP-accredited postgraduate-year-one residency

should be a requirement for all new college of pharmacy graduates who will be providing direct patient care.

Pharmacy Technician Training (0702)

Source: Council on Education and Workforce Development
To support the goal that pharmacy technicians entering the pharmacy workforce have completed an ASHP-accredited program of training; further,

To encourage expansion of ASHP-accredited pharmacy technician training programs.

This policy supersedes ASHP policy 0212.

Residency Programs (0704)

Source: Council on Education and Workforce Development
To strongly advocate that all pharmacy residency programs become ASHP-accredited as a means of ensuring and conveying program quality.

This policy supersedes ASHP policy 0216.

ASHP Guidelines, Statements, and Professional Policies as an Integral Part of the Educational Process (0705)

Source: Council on Education and Workforce Development
To encourage faculties in colleges of pharmacy and preceptors of ASHP-accredited residency training programs to use ASHP statements, guidelines, and professional policies as an integral part of training programs and courses.

This policy supersedes ASHP policy 8407.

Developing Leadership and Management Competencies (0509)

Source: Council on Educational Affairs

To work with health-system leadership to foster opportunities for pharmacy practitioners to move into pharmacy leadership roles; further,

To encourage current leaders to seek out and mentor practitioners in developing administrative, managerial, and leadership skills; further,

To encourage interested practitioners to obtain the skills necessary to pursue administrative, managerial, and leadership roles; further,

To encourage colleges of pharmacy and state affiliates to foster leadership skills in students through development and enhancement of curricula, leadership conferences, and other programs; further,

To encourage colleges of pharmacy to develop more opportunities for students to pursue combined degree programs; further,

To encourage colleges of pharmacy and health systems to develop more opportunities for students to pursue residency programs that develop administrative, management, and leadership skills; further,

To encourage residency programs to develop leadership skills by mentoring, training, and providing leadership opportunities; further,

To encourage residency programs to provide training for residents to develop administrative and management skills; further,

To foster leadership skills for pharmacists to use on a daily basis in their roles as leaders in medication safety and medication management in patient care.

This policy was reviewed in 2009 by the Council on Education and Workforce Development and by the Board of Directors and was found to still be appropriate.

Communication Among Health-System Pharmacy Practitioners, Patients, and Other Health Care Providers (0510)

Source: Council on Educational Affairs

To foster effective communication (with appropriate attention to patients' levels of general and health literacy) among health-system pharmacy practitioners, patients, and other health care providers; further,

To develop programs to enable pharmacy students, residents, and health-system pharmacy practitioners to self-assess their levels of health literacy and general communication skills; further,

To develop methods with which pharmacy students, residents, and health-system pharmacy practitioners can assess the level of general and health literacy of patients; further,

To disseminate information about resources for students, residents, and health-system pharmacy practitioners to use in working with patients and others having specific communication needs.

This policy was reviewed in 2009 by the Council on Education and Workforce Development and by the Board of Directors and was found to still be appropriate.

Patient-Centered Care (0313)

Source: Council on Educational Affairs

To encourage that the principles of patient-centered care be integrated throughout the college of pharmacy curriculum.

This policy was reviewed in 2007 by the Council on Education and Workforce Development and by the Board of Directors and was found to still be appropriate.

Cultural Competence (0314)

Source: Council on Educational Affairs

To foster cultural competence among pharmacy students, residents, and practitioners and within health systems for the purpose of achieving optimal therapeutic outcomes in diverse patient populations.

This policy was reviewed in 2007 by the Council on Education and Workforce Development and by the Board of Directors and was found to still be appropriate.

Practice Sites for Colleges of Pharmacy (0315)

Source: Council on Educational Affairs

To encourage practitioner input in pharmacy education; further,

To encourage that institutional and health-system environments be used as sites for experiential training of pharmacy students; further,

To encourage colleges of pharmacy and health systems to define and develop appropriate organizational relationships that permit a balance of patient care and service, as well as educational and research objectives, in a mutually beneficial manner; further,

To include the administrative interests of both the health system and the college of pharmacy in defining these organizational relationships to ensure compatibility of institutional (i.e., health system or university) and departmental (i.e., pharmacy department and department in the college) objectives; further,

To encourage pharmacists and pharmacy leaders to recognize that part of their professional responsibility is the development of new pharmacy practitioners.

This policy was reviewed in 2007 by the Council on Education and Workforce Development and by the Board of Directors and was found to still be appropriate.

Licensure for Pharmacy Graduates of Foreign Schools (0323)

Source: Council on Legal and Public Affairs

To support state licensure eligibility of a pharmacist who has graduated from a pharmacy program accredited by the Accreditation Council for Pharmacy Education (ACPE) or accredited by an ACPE-recognized accreditation program.

This policy was reviewed in 2007 by the Council on Public Policy and by the Board of Directors and was found to still be appropriate.

Public Funding for Pharmacy Residency Training (0325)

Source: Council on Legal and Public Affairs

To support legislation and regulation that ensures public funding for accredited pharmacy residency programs consistent with the needs of the public and the profession; further,

To oppose legislation or regulation involving reimbursement levels for graduate medical education that adversely affects pharmacy residencies at a rate disproportionate to other residency programs.

This policy was reviewed in 2007 by the Council on Public Policy and by the Board of Directors and was found to still be appropriate.

Substance Abuse and Chemical Dependency (0209)

Source: Council on Educational Affairs

To collaborate with appropriate professional and academic organizations in fostering adequate education on substance abuse and chemical dependency at all levels of pharmacy education (i.e., colleges of pharmacy, residency programs, and continuing-education providers); further,

To support federal, state, and local initiatives that promote pharmacy education on substance abuse and chemical dependency; further,

To advocate the incorporation of education on substance abuse and chemical dependency into the accreditation standards for Doctor of Pharmacy degree programs and pharmacy technician training programs.

This policy was reviewed in 2006 by the Council on Education and Workforce Development and by the Board of Directors and was found to still be appropriate.

“P.D.” (Pharmacy Doctor) Designation for Pharmacists (0217)

Source: Council on Educational Affairs

To oppose the use of “P.D.” or any other designation that implies an academically conferred degree where none exists.

This policy was reviewed in 2006 by the Council on Education and Workforce Development and by the Board of Directors and was found to still be appropriate.

Residency Training for Pharmacists Who Provide Direct Patient Care (0005)

Source: Council on Educational Affairs

To recognize that optimal direct patient care by a pharmacist requires the development of clinical judgment, which can be acquired only through experience and reflection on that experience; further,

To establish as a goal that pharmacists who provide direct patient care should have completed an ASHP-accredited residency or have attained comparable skills through practice experience.

This policy was reviewed in 2009 by the Council on Education and Workforce Development and by the Board of Directors and was found to still be appropriate.

Fostering Pharmacy Leadership (9901)

Source: Council on Administrative Affairs

To encourage pharmacy managers to serve as mentors to their staff, pharmacy students, pharmacy residents, and peers in a manner that fosters the development of future pharmacy leaders.

This policy was reviewed in 2008 by the Council on Pharmacy Management and by the Board of Directors and was found to still be appropriate.

Career Counseling (8507)

Source: Council on Educational Affairs

To urge colleges of pharmacy to develop career counseling programs to make students aware of postgraduate career

options, including residency training and career paths in various types of practice; further,

To urge that career counseling occur in a structured manner early in the curriculum and be continued throughout the curriculum; further,

To urge practitioners in various organized health care settings to make themselves available to colleges of pharmacy for participation in both structured and unstructured career counseling.

This policy was reviewed in 2006 by the Council on Education and Workforce Development and by the Board of Directors and was found to still be appropriate.