

PGY2



Brief Highlights

ASHP Accreditation Standard for Postgraduate Year Two (PGY2) Pharmacy Residency Programs vs current ASHP Accreditation Standard for Specialized Pharmacy Residency Training

- The new format follows that of the PGY1 accreditation standard. The current ASHP Accreditation Standard for Specialized Pharmacy Residency Training (with guide to interpretation) is arranged as follows:
 - I Qualifications of the training site
 - II Qualifications of the Residency Program Director and Preceptors
 - III Selection & Qualifications of the Resident
 - IV Residency Training Program and Pharmacy Services
 - V Development of Individualized Learning Objectives
 - VI Evaluation of Resident and Residency Program
 - VII Experimentation and Innovation
 - VIII Certificate
- Supplemental standards for each of the specialized areas of practice may have been more stringent than this global standard, and the more stringent criteria were in effect.
- With the new standard the supplemental standards will no longer exist, however the goals and objectives will remain until each section of goals and objectives have been updated. The new PGY2 standard will be used in combination with a specific set of educational goals and objectives for each of the specialized areas of training (e.g. oncology, infectious diseases, etc).
- The new standard is effective January 1, 2007.

	Continues	NEW
I. Qualifications of the Resident (old section III)	<ul style="list-style-type: none"> ▪ Formal assessment of the candidates ▪ Pharm D. ▪ Licensed 	<ul style="list-style-type: none"> ▪ Must complete a PGY1 (supplemental standards said “must”, overarching standard said “should”) ▪ Must participate in the Resident Matching Program
II. Obligations of the Program to the Resident (New plus old section VIII, parts of section IV)	<ul style="list-style-type: none"> ▪ Certificate 	<ul style="list-style-type: none"> ▪ 12 months vs 1 year ▪ Patient safety and residents well being to be considered (ACGME Duty Hrs) ▪ Must participate in the Resident Matching Program ▪ Acceptance letter & conditions ▪ Policy on leave ▪ Support for resident, space, financial, etc.

PGY2 comparison continued

<p>III. Obligations of the Resident to the Program (old section IV)</p>	<ul style="list-style-type: none"> ▪ Residency is the primary commitment 	
<p>IV. Requirements for Design & Conduct of the Residency Program (old sections IV, V, VI)</p>	<ul style="list-style-type: none"> ▪ Feedback ▪ Learning Objectives ▪ Resident Self-evaluation 	<ul style="list-style-type: none"> ▪ Divided into 4 sections: <ul style="list-style-type: none"> -Design -Delivery -Evaluation & improvement -Tracking Residents ▪ Systems-based approach to training ▪ Refers to the educational goals and objectives in the advanced area of pharmacy practice
<p>V. Residency Program Director and Preceptors (old section II)</p>	<p><i>RPD -previously</i></p> <ul style="list-style-type: none"> ▪ <i>Residency & 2 years of experience or 4 years of experience</i> ▪ <i>Active Practice in specialized area</i> ▪ <i>Contribution to the profession</i> <p><i>Preceptors -previously</i></p> <ul style="list-style-type: none"> ▪ <i>Residency & 1 year of experience or 3 years of experience</i> ▪ <i>Contribution to the profession</i> 	<p><i>RPD - New PGY2 standard</i></p> <ul style="list-style-type: none"> ▪ PGY2 Residency & 3 years of experience or 5 years of experience ▪ Board Certification, where applicable <p><i>Preceptors-New PGY2 standard</i></p> <ul style="list-style-type: none"> ▪ PGY2 residency & 1 year of experience or 3 years of experience
<p>VI. Minimum requirements of the site conducting the residency (old section I)</p>	<ul style="list-style-type: none"> ▪ Must be accredited by an outside agency 	<ul style="list-style-type: none"> ▪ Seek excellence in patient care
<p>VII. Qualifications of the Pharmacy (old section I, IV)</p>	<ul style="list-style-type: none"> ▪ Comply with state, federal & local laws ▪ Comply with professional and operational national standards ▪ Chief pharmacist & leadership provided ▪ Safe & effective drug distribution system ▪ Facilities, personnel and resources 	<ul style="list-style-type: none"> ▪ Continuously improving medication-use process