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Educating Pharmacy’s Future

OCTOBER 19-20, 2022 | CHICAGO, IL
• 12+ hours CE
• Networking Opportunities
• Poster and Roundtable Sessions
• Energizing Keynote
Register Today!

National Pharmacy Preceptors Conference

October 19-20, 2022 • Chicago, Illinois
Registration is open now!

As the only national event focused on precepting, the National Pharmacy Preceptors Conference (NPPC) is a must-attend event for pharmacy practitioners at all levels and practice settings who seek quality programming and networking opportunities with other practitioners across the country.
Conference Highlights

- In-Person live learning environment
- Continuing education available
- Special Sessions on PharmAcademic™
- Hands-on opportunity with PhORCAS

For more information and full conference schedule [click here](#).

Registration is now open [here](#).

**Important Dates to Note:**

- **September 9, 2022**  
  Advance Rate Registration Deadline
- **After September 10, 2022**  
  Regular and On-site Registration Rate

**Note:** Residency Program Design and Conduct (RPDC) will **NOT** be held at NPPC due to retooling for the new Standard. The following RPDC sessions will be held at the 2022 Midyear Clinical Meeting reflecting the new Standard:

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

**Setup and Optimize YOUR PhORCAS- WebAdMIT Program Portal with the Experts at NPPC 2022**

Phorcas-WebAdMIT, the selection portal for PhORCAS is an amazing tool integrated into the system to make the process of sorting out resident information by residency program directors and preceptors much more efficient and less labor intensive than in the past! Come learn how WebAdMIT can help your program improve the efficiency of the residency selection process for the current application season.
2022 National Match Results

Results from the 2022 Phase I Pharmacy Resident Match were released on March 16, 2022. There were 5,782 positions for both PGY1 and PGY2 programs available within the Match. In Phase 1, 4,988 individuals matched with 2,430 pharmacy residency programs. The numbers include 595 individuals who early committed for a PGY2 position at the organization in which they are completing their PGY1.

Here’s how the 2022 Phase I Match Day compared to last year:

• 3,688 PGY1 positions matched, 1% decrease in filled positions over last year (3,741)
• 1,300 PGY2 positions matched, 6% decrease in filled positions over last year (1,380) includes early commitments (705 matched + 595 early commits=1,300)
• 12% decrease in participating PGY1 applicants overall
• 9% decrease in participating PGY2 applicants overall
• Decrease from 39.8% to 37.5% of PGY2 positions filled by early commitment process

Results from the 2022 Phase II Pharmacy Residency Match were released on April 13, 2022 accounting for another 573 filled positions. In total, 1,304 applicants participated in Phase II of the 2021 Match compared with 1,514 in Phase II in 2021. This represents a 14% decrease in Phase II applicants.

The results of Phase I and Phase II 2022 Pharmacy Residency Match*:

• Total of 4,966 applicants matched (4,152 in Phase I + 814 in Phase II)
• Overall position fill rate for PGY1 and PGY2 positions was 95.8% (compared to 98.9% in 2021)
• At the end of the 2022 Match (at the conclusion of Phase II), there were 220 unfilled positions (74 PGY1 and 146 PGY2) and 1,451 unmatched applicants (1,275 PGY1 + 176 PGY2)

(*total is not the sum of Phase I and Phase II due to changes occurring during the phases)

Obtaining a residency position continues to be competitive. This year at the conclusion of the 2022 Match (after Phase II), 1,275 individuals seeking PGY1 residencies did not match, and 74 PGY1 positions remained unfilled. Pharmacists seeking PGY2 residencies saw somewhat less competition, with 176 unmatched individuals seeking to fill 146 PGY2 open positions. Overall, the number of residency positions has increased by 250 positions over 2021 or 5% nationwide. The growth of PGY2 positions has outpaced the growth of PGY1 positions.

Read More: https://natmatch.com/ashprmp/stats.html
Commission on Credentialing Highlights

The Commission on Credentialing (COC) met virtually on March 9-11, 2022

The following actions were taken by the Commission on Credentialing:

**Length of Accreditation Granted at the March 2022 COC meeting**

<table>
<thead>
<tr>
<th>Residency</th>
<th>Total #</th>
<th>Conditional Accreditation</th>
<th>1yr</th>
<th>2yr</th>
<th>3yr</th>
<th>4yr</th>
<th>7yr</th>
<th>8yr Full Cycle</th>
<th>Withhold</th>
</tr>
</thead>
<tbody>
<tr>
<td>New</td>
<td>71</td>
<td>0</td>
<td>9</td>
<td>0</td>
<td>0</td>
<td>17</td>
<td>0</td>
<td>44</td>
<td>1</td>
</tr>
<tr>
<td>Reaccreditation</td>
<td>105</td>
<td>1</td>
<td>17</td>
<td>0</td>
<td>0</td>
<td>25</td>
<td>0</td>
<td>62</td>
<td>0</td>
</tr>
<tr>
<td>Special Cases</td>
<td>37</td>
<td>3</td>
<td>6</td>
<td>6</td>
<td>9</td>
<td>0</td>
<td>12</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>213</strong></td>
<td><strong>4</strong></td>
<td><strong>32</strong></td>
<td><strong>6</strong></td>
<td><strong>9</strong></td>
<td><strong>42</strong></td>
<td><strong>12</strong></td>
<td><strong>106</strong></td>
<td><strong>2</strong></td>
</tr>
</tbody>
</table>

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

**Voted To Approve:**

- To approve appointment of new, changes and provisionally appointed residency program directors.
- The Novel PGY2 Residency program and demonstration approval process.
- To approve the proposal for the Novel PGY2 Thrombosis and Hemostasis as a demonstration PGY2.
- To support continued development of a framework for Pediatric Subspecialty programs.
- To approve revised Standards 1 and 2 and Guidance.
- To approve the revised duty hour policy and implementation timeline and guidance (see below for more information).
- Additionally, the COC reviewed the Diversity Resource Guide that was developed by a diversity and cultural competence workgroup. The guide includes definitions, rationale, summary of work from AACP, ACGME, and AAMC data about race and ethnicity, disparities in healthcare, impact of diversity on health outcomes and residency training. This document also includes examples of recruitment strategies and ideas for promoting diversity in organizations, faculty, and preceptors.

**NEWS: REVISED Duty Hour Requirements for Pharmacy Residencies**

*Duty Hour Requirements for Pharmacy Residencies* policy has been revised and updated and will go into effect July 2022. The updated policy is linked above and can be found posted on the ASHP Residency Information website on the Residency Accreditation Survey Readiness page.

Some Highlights of the revisions to the *Duty Hour Requirements for Pharmacy Residencies* include:
• The policy also includes statements on well-being and resilience to ensure that residents and preceptors are educated on wellness and resilience, burnout syndrome, risks, and mitigation strategies.

• Duty hours include: inpatient and outpatient patient care (resident providing care within a facility, a patient’s home, or from the resident’s home when activities are assigned to be completed virtually); staffing/service commitment; in-house call; administrative duties; work from home activities (i.e., taking calls from home and utilizing electronic health record related to at-home call program); and scheduled and assigned activities, such as conferences, committee meetings, classroom time associated with a master’s degree for applicable programs or other required teaching activities and health and wellness events that are required to meet the goals and objectives of the residency program.

• Duty hours must be tracked and attested to monthly. This can be accomplished using attestations by the resident (written or in PharmAcademic), work hours/resident schedules, or timesheets.

• Moonlighting is defined as any compensated, voluntary work. If programs allow moonlighting and/or require an on-call program, monthly attestations are also required for these elements. A moonlighting policy should state if moonlighting is allowed and what type (e.g., internal, external) and maximum hours allowed. A structure for approval and actions taken if moonlighting affects the resident’s performance is required. Moonlighting hours are counted toward the 80 hour maximum weekly hour limit averaged over a four-week period and included in the tracking of duty hours.

• Additional clarification was included regarding in-house and at-home call maximums and expectations for level of supervision, back-up system, and methods for evaluating the impact.

See also: *New Tracking of Duty Hours in PharmAcademic*

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**Transitioning from Pre-Candidate to Candidate Status**

Congratulations to those new programs that were in the pre-candidate phase of the accreditation process and matched with your first resident(s) during Phase I in March, Phase II in April, or filled positions in the post-Match scramble! When your resident(s) begin the program in July 2022, you must submit an application for accreditation to ASHP’s Accreditation Services (to transition to candidate status). The application forms are listed by types of programs and are located on our website on the Residency Program Director’s page under “Applying for Accreditation” and scroll down to “Application Forms”.

Our receipt of the application for accreditation lets us know that your program has its first resident(s) and is ready to be placed on the wait-list for an accreditation survey visit in 2023. The date we receive this application is also the date that PGY1 pharmacy residency programs may use to retroactively apply for CMS pass-through funding once accreditation is achieved.
Accreditation Standard Revision

Highlights From the COC Update Residency Town Hall presentation at the Midyear Clinical Meeting 2021

The Commission on Credentialing (COC), lead surveyors, and Accreditation Services leadership have been hard at work revising the four current Residency Accreditation Standards into a single harmonized Standard. “Big picture” goals of the revised standard are to address preceptor qualifications, simplify/eliminate duplicates, include well-being/resilience, diversity, and cultural competence, and refresh pharmacy services.

The planned timeline for the Standard revision is to have final COC and ASHP Board of Directors approval in 2022 and have all programs implement with their incoming residency classes of 2023. Once all approvals are obtained, there will be a special edition of The Communique dedicated to the revised standards released later in 2022.

The complete MCM Residency Town Hall presentation including summarized highlights of the revised harmonized Standard can be found here.

Reminder: Year End Resident Survey

Resident surveys are being delivered to current residents 45 days before the program end date. As a reminder, this is a required report and residents cannot be closed out of the program in Pharm-Academic without submitting the survey. Below is the information from PharmAcademic™:

Residents will receive an email notification and task on their PharmAcademic Global Task List 45 days prior to their program end date. The questions included on the ASHP Annual Resident Survey are available in PharmAcademic™.

Residents are required to submit the Annual Resident Survey prior to graduation. RPDs will not be able to close out the resident in PharmAcademic™ until the survey has been submitted. Residents who have already graduated, or whose end date is in the past, will not receive a survey.
# Most Common Survey Citings PGY1 Standard

March 2022 COC: Top Areas of Partial Compliance with PGY1 Pharmacy Residencies

## PGY1 Standard: Top Items Overall by Frequency Cited

<table>
<thead>
<tr>
<th>Standard Number</th>
<th>Standard Verbiage</th>
<th>Percent of Time Cited</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.6</td>
<td>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.</td>
<td>78%</td>
</tr>
<tr>
<td>6.5b</td>
<td>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.)</td>
<td>72%</td>
</tr>
<tr>
<td>3.4c(t)</td>
<td>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.</td>
<td>65%</td>
</tr>
<tr>
<td>3.3c(t)a</td>
<td>Learning experiences are documented and include:</td>
<td>53%</td>
</tr>
<tr>
<td>3.3c(t)b</td>
<td>• expectations of residents; and,</td>
<td>61%</td>
</tr>
<tr>
<td>3.3c(t)d</td>
<td>• for each objective, a list of learning activities that will facilitate its achievement.</td>
<td>59%</td>
</tr>
<tr>
<td>3.4d(e)</td>
<td>On a quarterly basis, the RPD or designee assesses residents’ progress and determines if the development plan needs to be adjusted.</td>
<td>58%</td>
</tr>
</tbody>
</table>

## PGY1 Standard: Top Items Cited Related to Program Policies

<table>
<thead>
<tr>
<th>Standard Number</th>
<th>Standard Verbiage</th>
<th>Percent of Time Cited</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.6</td>
<td>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.</td>
<td>78%</td>
</tr>
<tr>
<td>1.5</td>
<td>Consequences of residents’ failure to obtain appropriate licensure either prior to or within 90 days of the start date of the residency must be addressed in written policy of the residency program.</td>
<td>55%</td>
</tr>
<tr>
<td>2.2</td>
<td>The program complies with the ASHP Duty-Hour requirements for Pharmacy Residencies.</td>
<td>55%</td>
</tr>
<tr>
<td>2.4b</td>
<td>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.</td>
<td>51%</td>
</tr>
<tr>
<td>1.1</td>
<td>The residency program director or designee must evaluate the qualifications of applicants to pharmacy residencies through a documented, formal, procedure based on predetermined criteria.</td>
<td>43%</td>
</tr>
</tbody>
</table>
### PGY1 Standard: Top Cited Items - Program Structure & Preceptors

<table>
<thead>
<tr>
<th>Standard Number</th>
<th>Standard Verbiage</th>
<th>Percent of Time Cited</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.4c(1)</td>
<td>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.</td>
<td>65%</td>
</tr>
<tr>
<td>3.3c(1)a</td>
<td>Learning experiences are documented and include:</td>
<td>53%</td>
</tr>
<tr>
<td>3.3c(1)b</td>
<td>• a general description, including the practice area and the roles of pharmacists in the practice area;</td>
<td>61%</td>
</tr>
<tr>
<td>3.3c(1)d</td>
<td>• expectations of residents; and,</td>
<td>59%</td>
</tr>
<tr>
<td>3.3c(1)e</td>
<td>• for each objective, a list of learning activities that will facilitate its achievement.</td>
<td></td>
</tr>
<tr>
<td>3.4d(2)</td>
<td>On a quarterly basis, the RPD or designee must assess residents’ progress and determines if the development plan needs to be adjusted.</td>
<td>58%</td>
</tr>
<tr>
<td>3.3a(1)a</td>
<td>The program description must include required learning experiences and the length of time for each experience</td>
<td>56%</td>
</tr>
<tr>
<td>4.8c</td>
<td>Preceptor's Qualifications: Recognition in the area of pharmacy practice for which they serve as preceptors</td>
<td>43%</td>
</tr>
<tr>
<td>4.8f</td>
<td>Preceptors' Qualifications: Ongoing professionalism, including a personal commitment to advancing the profession</td>
<td>43%</td>
</tr>
</tbody>
</table>

### PGY1 Standard: Top Cited Items – Pharmacy Services

<table>
<thead>
<tr>
<th>Standard Number</th>
<th>Standard Verbiage</th>
<th>Percent of Time Cited</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.5b</td>
<td>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.)</td>
<td>72%</td>
</tr>
<tr>
<td>6.6k</td>
<td>The medication distribution system includes the following components (as applicable to the practice setting): a system ensuring accountability and optimization for the use of safe medication-use system technologies.</td>
<td>50%</td>
</tr>
<tr>
<td>6.2d</td>
<td>The pharmacy is an integral part of the health-care delivery system at the practice site in which medications for patients are prescribed, dispensed, administered, and monitored.</td>
<td>48%</td>
</tr>
<tr>
<td>6.7l</td>
<td>The following patient care services and activities are provided by pharmacists in collaboration with other health-care professionals to optimize medication therapy for patients: a system to ensure and support continuity-of-care during patient care transitions.</td>
<td>34%</td>
</tr>
</tbody>
</table>

Reflects the 2016 PGY1 Residency Standard with Guidance Revisions Approved March 2021.

**Critical Factors appear in bold.**

Please refer to the Fall 2021 issue for the Most Common PGY2 Citings. Stay tuned for updated PGY2 Most Common Citings in the Fall 2022 issue.
**NEW: Tracking of Duty Hours in PharmAcademic !!!**

Tracking duty hours in PharmAcademic™ will be available and will be turned on automatically for the 2022-2023 residency year beginning July 1, 2022. Programs who do not wish to use this system must opt out.

The process in PharmAcademic™ satisfies the requirements for the new Standard but programs can also use their own method of monthly attestation. (If RPDs elect to track Duty Hours outside of PharmAcademic™, they should go to Manage Program > Details page and click the box to deselect this option.)

On the last day of each month (beginning July 31, 2022), resident(s) will be sent an email notification and receive a task on their PharmAcademic™ Home page to complete an ASHP standard Duty Hours Attestation Form.

The 1-page form is quick and easy to fill out with three sections:

1. Required Attestation Statement
2. Optional Moonlighting questions
3. Optional On-Call questions
To help programs identify issues, if a resident reports a violation, the form will be routed to the RPD to review and cosign. If needed, the RPD can send back the form to the resident to revise and re-submit. If no violations are reported, the form will not be sent to the RPD, but can be viewed in several places in PharmAcademic™. RPDs, Designees, and ASHP Surveyors can review Duty Hour information using:

- New resident-specific Duty Hours tab
- New Duty Hours Dashboard (all program)
- New Reports: Duty Hours Status and Duty Hours Responses
ASHP 2022 Residency Showcase Information for Programs

On-line Application System will open soon!

The 2022 Residency Showcase online application system will open on June 15 and will remain available through July 20, 2022. There is no advantage to applying early. All applications submitted while it is open will receive equal consideration.

Estimated important dates*:

- June 15 - The Residency Showcase application system will open. Programs can submit the application and payment for booth space at Midyear.
- July 20 – The Residency Showcase application system will close. ASHP will begin placing programs in their allotted space and session.
- August 2 – Booth space assignments and access to promote program listings will be distributed.
- August 9 – Residency Showcase booth selection will open for any program who did not participate in the application process.
- December 5-6 – Residency Showcase at the Midyear
- December 15 – Supplemental Virtual Residency Showcase available for all programs who participated in the live event.

*Please Note: All dates listed are not finalized and are subject to change

For more information, please visit the 2022 Residency Showcase Information for Programs website or contact us at showcase@ashp.org
Consider Starting a Technician Training Program!

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

Implementing a technician training program can be used to address technician staffing shortages, to recruit and retrain interested staff from other departments within health systems and hospitals as well as to recruit from outside your organization.

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

Consider starting an ASHP/ACPE accredited pharmacy technician education and training program at your site! “staffing shortage and how it’s a great tool to recruit, retool, and train staff from other departments and recruit from the outside

See more information here.
News: New Residency Program Director Mentoring Program

ASHP Accreditation Services Division (ASD) is piloting a residency program director (RPD) mentorship program to connect new RPDs to experienced RPDs who can provide advice, guidance, and knowledge related directing a residency program through one-on-one mentor/mentee relationships.

Program Goals

• Strengthen the pharmacy workforce and residency programs by supporting the development of new pharmacy residency program directors
• Create a safe, structured space that encourages learning and the exchange of information, knowledge, and ideas

Program Benefits

The RPD Mentorship Program aims to serve new RPDs who are seeking advice and guidance (Mentees) as well as more experienced practitioners who are looking for opportunities to engage with ASHP and give back to the profession (Mentors). The overall goal is to create mutually beneficial relationships built on trust and respect that foster the professional and personal growth and development of both mentees and mentors.

Mentee Benefits:

• Receive guidance and feedback from an experienced RPD
• Connect with an RPD who shares common practice area, program oversight, and/or interests
• Grow and expand professional network

Mentor Benefits:

• Help shape the future of the pharmacy workforce and pharmacy residency programs
• Enhance preceptor qualifications designated by the ASHP Accreditation Standards and give back to the pharmacy profession
• Grow and expand professional network

Program Roles and Expectations

All program participants are expected to:

• Be committed to the mentorship program
• Establish mutually agreed upon frequency of contact for one-on-one mentorship activities
• Be respectful, timely, and professional in all communications and interactions
• Maintain confidentiality
• Participants are encouraged to avoid giving/ soliciting specific advice related to accreditation standards.
Program Interest and Participation

The RPD Mentorship Program is open to ASHP members only. An electronic survey will be sent to ASHP members/RPDs in the Spring/Summer of 2022. Those interested in participating in the pilot as a mentor or mentee must complete the survey (online application). ASHP will use this information to match mentors and mentees in a number of areas, such as type of program, organization, geographic region, or other shared interests. Matched pairs will be contacted in the Summer/Fall of 2022. Formal participation will kick off with an orientation followed by one-on-one virtual meetings between participants.

If you have any questions about the RPD Mentorship Program, please contact Michelle McCarthy in Accreditation Services at mmccarthy@ashp.org.

News: ASHP Membership Forums

Sign Up Today to be an ASHP Well-Being Ambassador

ASHP is recruiting for our Well-Being Ambassador (WBA) program. The program is a free, curriculum based, virtual learning community to ensure the pharmacy workforce has the tools, resources, and critical support to protect patient safety and foster optimal medication outcomes. WBAs will be empowered to take local action to mitigate occupational burnout in their healthcare organizations. Sign up today.

2022 Regional Residency Conference Outreach Thank You

The Regional Residency Conferences had a successful season with meetings and events highlighting the hard work of resident research projects. Thank you to the conferences that hosted ASHP Board of Directors and staff members through keynote presentations.

Elective Rotation in Association Management at ASHP

ASHP offers an 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.

New Practitioners Forum Resident Resources

Share the Career Transitions Resource Center with your incoming residents for tools to help them succeed throughout residency. Residents can find guidance on transitioning from student to resident, tools to conduct a journal club, MUE, or research project, and our newest resource, the Research Project Tip Sheet.
**ASHP Resource Center for Pharmacy Educators**

ASHP has developed a resource center to assist pharmacy educators by providing educational, precepting and personal development information, references, and resources. Find tools to support RPDs, preceptors, pharmacy technician educators and more.

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**NEWS: Accreditation Services Office**

**Update: Virtual or In-Person Survey**

Accreditation Services continues to conduct both in person and virtual surveys. Your lead surveyor or will inform you in advance whether your upcoming survey will be in person or virtual. If you are scheduled for an accreditation survey in the next 12 months factors that will be considered include: current COVID-related public health guidelines; travel restrictions; and access constraints especially if multiple residency programs at your organization are being surveyed concurrently. Programs are encouraged to inform their lead surveyor of any changes in your visitor policy, social distancing guidelines, or any related factors that may affect the decision to conduct an in person versus virtual accreditation survey.

**Welcome New Contract Lead Surveyors**

*James S. Kalus, Pharm.D., FASHP*

James (Jamie) Kalus, Pharm.D., FASHP has been a contract lead surveyor with ASHP since 2021. He earned his Doctor of Pharmacy degree at the University of Toledo in Toledo, Ohio and completed a pharmacy residency at the Medical University of South Carolina and a cardiovascular research fellowship at Hartford Hospital and the University of Connecticut. Jamie was faculty at Wayne State University with a practice and research program focused on cardiovascular pharmacotherapy and he has authored several textbook chapters and over 70 articles published in peer-reviewed journals. He is currently a Director of Pharmacy with Henry Ford Health in Detroit, Michigan. Jamie was the PGY1 Residency Program Director at Henry Ford Hospital from 2005 – 2022. He also served on the ASHP Commission on Credentialing from 2014 – 2020, serving as Chair in 2019. Prior to being appointed to the Commission on Credentialing, he served as a practitioner surveyor since 2008. Jamie has also authored articles and provided national presentations related to pharmacy residency training.
Carolyn Kowalchik, RPh, MS
Carolyn is a contract lead surveyor for ASHP. She earned her BS in Pharmacy and Masters in Pharmacy Administration/ Health Services Administration from the University of Utah. She recently retired from Intermountain Healthcare where she was the Director of Pharmacy at Intermountain Medical Center since 2015. Prior to that, she was the Pharmacy Service Director at the University of Utah Hospital where she also was the PGY1 residency program director for 10 years. Carolyn served as a practitioner surveyor for ASHP for many years and recently completed 6 years on the Commission on Credentialing.

Mandy Leonard, Pharm.D., BCPS
Mandy Leonard earned her Bachelor of Science and Doctorate of Pharmacy from Duquesne University. She completed a Drug Information Residency at the Medical University of South Carolina. For the past 24 years, Mandy has overseen the Drug Information/Drug Use Policy Center at Cleveland Clinic. Additionally, she is responsible for coordinating all Cleveland Clinic Residency programs in the health-system. Mandy has helped to start many residency programs at Cleveland Clinic, including Pharmacotherapy and Drug Information (now Medication Use Safety and Policy). She was part of the team awarded the ASHP Residency Excellence Award in 2020. At present, Mandy is the Educational Affairs Director for the Ohio Society of Health-System Pharmacy (OSHP). She is also an Assistant Professor at the Cleveland Clinic Lerner College of Medicine and is the Pharmacology Thread Director. In 2018, Mandy was awarded Pharmacist of the Year by the Ohio College of Clinical Pharmacy (OCCP). Mandy has served as a guest residency practitioner surveyor for the past 8 years and currently works as a contract lead surveyor for ASHP’s Accreditation Division.

Michael Peters, RPh, B.S., BCCCP
Mike received his B.S. from the Wayne State University College of Pharmacy and Allied Health Science in 1987. He worked as a clinical specialist in the Medical intensive care unit at Henry Ford Health main campus in Detroit Michigan. Mike was also the residency program director of the critical care pharmacy residency at Henry Ford Hospital from 2008-2021. In 2020, he transitioned his role from pharmacy specialist to clinical manager. Mike has been an adjunct faculty member with the Wayne State College of Pharmacy for 20 years. He joined ASHP as a contracted lead surveyor in the fall of 2021.
Suzanne Turner, Pharm.D, FASHP

Suzanne is the Pharmacy Residency and Education Manager and PGY1 Program Director at Lee Health in Ft Myers, FL. She is a graduate of the University of Florida and completed an ASHP-accredited Pharmacy Practice Residency at Methodist Hospitals in Memphis, TN.

In her current role at Lee Health, she established the PGY1 program and has oversight for six ASHP accredited programs. While at Lee Health, her duties have also included developing educational, competency and development programs for the pharmacy department; coordinating early and advanced pharmacy student rotations; and serving as the ACPE Administrator.

She is an active member of the Florida Society of Health-System Pharmacists and has chaired numerous FSHP councils, including three years as the Education Council Co-Chair. She also served on the FSHP Board of Directors and as the FSHP Chair of the House of Delegates. Suzanne was recognized as the FSHP Pharmacist of the Year in 2012.

Prior to joining ASHP as a contract lead surveyor, she served as a practitioner surveyor for PGY1 programs for ten years and served on the ASHP Commission on Credentialing from 2016-2021, including serving as the Chair in 2020. She was a founding member of the Florida Residency Conference Steering Committee and served as the Florida Residency Conference Chair for three years. She is currently serving as part of the ASHP Residency Program Design and Conduct Workshop faculty and serves as an Advisory Board Member for the ASHP Preceptor Competency Assessment Center.

Know Your Surveyors

Click here to learn more about ASO lead surveyors.
Surveyor Tips: In the Know

From opportunities for professional growth to free continuing education and examples of documents and processes to shore up your program, we’ve got you covered!

Tips from the Lead Surveyor Team

Evaluating Applicants from Pass/Fail schools

Although not called out directly in the current accreditation standards, programs should have a plan for evaluating applicants from Non-GPA or Pass/Fail schools. (The DRAFT new Standards includes language in guidance addressing if GPA considered, how candidates from pass/fail schools will be addressed.) Some examples can be found on the ASHP Residency Resources page in the example document section, under Helpful Interview and Recruitment Resources.

Background: There were a number of applicant complaints to ASHP related to programs not considering applicants from pass/fail schools from the 2022-23 application cycle.

PGY2 Appendix Tracking

All direct patient care PGY2 programs have a PGY2 “Appendix” that describes the Core Areas or Types of Patient Care Experiences for their specific program type. Each program’s “Appendix” comes at the back of their program-specific PGY2 Competency Areas, Goals, and Objectives document on the ASHP website. Completion of the “Appendix” is a REQUIREMENT for each program that has an accompanying “Appendix”. As such, programs are expected to track their residents’ completion of the Appendix as one element of their graduation requirement checklist. Programs may use either their own system or the tracking option in PharmAcademic™ (see the “Appendix” tab). PGY2 program directors should also ensure that the completion of the Appendix is added to their graduation requirements in the resident commitment “offer” letters or contracts. A best practice is to also track “Appendix” completion quarterly within development plan updates.

Preceptor In Training Designation

As a reminder, the “preceptor-in-training” (PIT) designation is only for preceptors who can and are willing to work toward meeting preceptor qualifications within 2 years. Preceptors who do not meet Standard 4.6 regarding preceptor eligibility due to lack of experience should not be placed in the preceptor-in-training role.

Background: We often see programs who place any preceptor who does not meet qualifications in the PIT role. While this is appropriate for pharmacists new to precepting who are working toward meeting the qualifications, pharmacists who do not meet eligibility requirements (e.g., recent PGY1 resident or PharmD graduates) should not be placed in this role until they have a plan to meet criteria within 2 years.
Call for Posters and Pearls: 2022 ASHP National Pharmacy Preceptors Conference

If you have a dynamic and stimulating precepting technique or concept that has been effective in your practice, ASHP invites you to submit a poster abstract for presentation at the 2022 ASHP National Pharmacy Preceptors Conference, October 19-20 in Chicago. The deadline to submit proposal is **July 15, 2022.**

Get Involved

Pass on your “pearls” of wisdom. A Pearl is a short presentation – just 5 minutes – on one fact, concept or idea that is NOT commonly known and is valuable in your everyday practice. If you find this concept advantageous, then others may too! Abstract submission site closes **July 15, 2022.** We hope to see many of you involved at NPPC! These opportunities are a great way to demonstrate ongoing professionalism, including your personal commitment to advancing the profession on the Preceptor and Academic Professional Record (See Guidance 4.8f).

For More Ways to Stay “In the know”

- Check out the [ASHP website](http://www.ashp.org)
- Find more information on the [ASHP podcasts](http://www.ashp.org)
  - Subscribe to the podcast so you don’t miss an episode.
- Follow ASHPOfficial on Twitter: [@ASHPOfficial](http://twitter.com/ASHPOfficial)
- Follow ASHPOfficial on Instagram: [@ashpofficial](http://instagram.com/ashpofficial)
- For past issues of our newsletter, check out the [Communique – Accreditation Services Newsletter archive](http://www.ashp.org)

**NEWS: ASHP Foundation**

Click here for the latest news from the ASHP Foundation on grants and awards specific to residency training.

Also available on the ASHP Foundation website is the [Residency Excellence Educational Series](http://www.ashp.org) which includes free on-demand Continuing Education Activities by past award winners.
Available from ASHP

New! ASHP’s Competency Assessment Center for Preceptors

Ensure faculty members or preceptors involved in pharmacy student practice experiences (IPPEs and APPEs) and/or residency programs have the ongoing knowledge and skills needed to meet their responsibilities to the professional program. This fully online training is comprised of 23 key competencies on a variety of topics related to precepting students and residents. Includes 11+ CE hours.

Whether you have a question about features or pricing, our team is ready to answer all your questions. Learn more at ashp.org/pcac

Extemporaneous Formulations, 4th Edition

The go-to guide for treating patients who require medications not commercially available in appropriate forms or dosages for pediatric, geriatric, or special needs. Now even more comprehensive, the fourth edition provides the same evidence-based formulation in easy-to-follow “recipes”. Preorder your copy from the ASHP Store. Available in print and e-book format.

Master and Conquer Pharmaceutical Calculations

Offering a complete review of the basic mathematics concepts and skills, the second edition provides students with the pharmacy basics necessary for correctly interpreting prescriptions and drug orders, and for performing dosing calculations that technicians face every day. Take the mystery out of numbers and formulas with step-by-step examples ranging from simple to the most complex. Shop now.

Basic Skills, 7th Edition Newly Expanded for Students and Clinicians

Basic Skills continues to be the most popular teaching text on laboratory data for pharmacy students as well as the go-to reference for pharmacists in therapeutic practice. The seventh edition contains significant and notable new chapter content on Pharmacogenomics, Cardiology, Nutrition Support, and Infectious Diseases. Order your copy today from the ASHP Store.

Teaching Certificate for Pharmacists

Earn an ASHP Professional Certificate in Teaching with our online home-study program. Our certificates provide high-quality, manageable and practical professional development opportunities for pharmacy personnel. Learning modules are presented in manageable segments and
participants claim CE as each module is completed. Developed in partnership with the University of Kentucky, the Teaching Certificate for Pharmacists includes three distinct tracks that offer a well-rounded learning experience: the Core Track covers the fundamentals of teaching practice, the Academic Teaching Track concentrates on traditional didactic instruction, and the Experiential Teaching Track focuses on teaching in practice environments. Learn more

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 including the Online Review course, Practice exam, Core Therapeutic Modules, and other preparatory material. 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 and includes more than the required hours for each specialty. 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. Ambulatory Care and Geriatric Pharmacy activities are offered jointly with the American College of Clinical Pharmacy (ACCP). Learn more

New Research Skills Certificate

This self-guided, online activity addresses the basic foundational skills needed to facilitate research including leadership, time management, and project management. The certificate further concentrates on all aspects of starting a research project, research study design, data management, statistical analysis, interpreting and disseminating research results, general principles of authorship, and effectively communicating outcomes including preparing a manuscript for journal submission. Pass the comprehensive exam to earn an ASHP Professional Certificate. Learn More