In This Issue

- Action required: On-Line Residency Program Listing
- NEW Requirement-ALL Programs-Graduate Tracking
- CMS Pass-Through Funding
- Update: Department of Labor Ruling
- MCM 2016: Workshops, Schedule and Residency Showcase information
- News: PhORCAS/WebAdMIT
- Update: 2017 NMS Two Phase Match
- Update: PharmAcademic™
- News: Commission on Credentialing
- Survey Response
- Most Common Survey Citings PGY1 Standards
- News: Board of Pharmaceutical Specialties
- News: ASHP Foundation
- Get Involved: Opportunities for Preceptors
- Resident Visits to ASHP
- News: Accreditation Services
- Teaching Certificate/New Professional Certification Programs, and more

Thanks for making this a very well attended National Pharmacy Preceptors Conference!

The National Pharmacy Preceptors Conference was held August 11-13 at the Washington Hilton Hotel in Washington, DC. The conference was attended by over 800 participants and included residency training program directors, coordinators, preceptors for both residents and students, pharmacy administrators and anyone interested and involved in pharmacy education. In addition to Residency Program Design and Conduct (RPDC) workshops and informative educational sessions, a networking poster session and reception was held for preceptors to share innovations in residency training and pharmacy student education and was a great success!

Stay tuned for more information on the next National Pharmacy Preceptors Conference to be held August 16-18, 2017 in Washington, DC.
Important!
Update Your Online Residency Program Listing

Any and all updates to your on-line residency program directory listing should be e-mailed to asd@ashp.org.

Please check that links to your own webpage are working. Please note, both PhORCAS and the National Matching Service (NMS) link to the directory listing, so make sure it is up to date.

REMINDER: Directors of accredited programs must submit written notification of substantive changes to the residency program to ASHP’s Director, Accreditation Services Division, within 30 days of the change. Substantive changes include changes to leadership (i.e., changes in residency program director or chief pharmacist), content and construct of the program, and organizational ownership and accreditation. Residency program directors of multiple-site programs must get approval from ASHP’s Accreditation Services Division prior to adding or removing a site. Notification forms that must be used are posted on the ASHP web site. Any substantive change in the organization of a program may be considered justification for re-evaluation of the program and/or a site survey.

- ASHP Regulations on Accreditation of Pharmacy Residencies

New Requirement! ALL Programs – Graduate Tracking

All programs in the accreditation process, including candidate and accredited programs MUST utilize PharmAcademic to close out their residents at the end of the 2016-17 residency year.

This requirement was approved by the Commission on Credentialing at its August meeting and also by the ASHP Board of Directors. This new requirement will be in effect starting with the end of this current residency year for all programs, including those in candidate status, as well as those who may not be using PharmAcademic for program management. While it is currently not mandatory to use PharmAcademic for program management, the use of PharmAcademic to close out all residents in all programs is mandatory beginning in June 2017. This new requirement will allow ASHP to be able to verify residency completion in the future.

As a reminder, all matched resident names are given to PharmAcademic annually for pre-loading into the PharmAcademic system for all residency programs in the accreditation process.

CMS Pass-Through Funding:

Residency program directors must work with their organization’s finance department to determine eligibility for CMS (Medicare) pass-through funding. PGY1 programs must be accredited by ASHP and be funded by hospitals to qualify for this type of reimbursement. More information can be found on our website under the Starting a Residency heading. Additionally, ASHP Accreditation Services has created a webinar on this topic. The slides from this presentation are also available.

Stay tuned for more helpful resources to be available soon in a new tool kit.
Update: 
Department of Labor Changes to Overtime Eligibility Requirements of the Fair Labor Standards Act (FLSA)

The DOL changes are still scheduled to go into effect as of December 1, 2016.

As an update, a supplemental bill is under consideration, HR 6094 Regulatory Relief for Small Businesses, Schools and Nonprofits Act. The bill delays by six months — from Dec. 1, 2016, to June 1, 2017 — the date when the Labor Department’s new overtime rule would become effective. It has passed the House but not the Senate. Congress reconvenes the second week of November and it could be reconsidered then, although the President has vowed to veto it. It could come back for consideration after the election but that is not certain. ASHP is submitting an advisory opinion to the Department of Labor requesting pharmacy residents be considered similarly to medical residents. The rule exempts medical residents and we believe that pharmacy residents should also be exempt.

MCM2016: Residency and Accreditation Educational Sessions

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

Don’t Miss the New RPDC Workshops! Our newly redesigned Residency Program Design and Conduct (RPDC) workshops are customized for the various stages of a residency program. These “hands-on” workshops provide an intensive, in-depth review of current standards, competency areas, and educational goals and objectives for residency program structure, orientation, learning experiences, preceptor roles, evaluation, resident development plans, and continuous program improvement. Each workshop will include information, examples, scenarios, resources, idea-sharing and time for questions and answers. You will definitely not want to miss the first opportunity to get up close and personal with the new PGY1 or new PGY2 Accreditation Standards. The RPDC Workshops will be held on Saturday, December 3rd, 2016. There is an additional fee to attend these workshops. Deadline for workshop registration is November 20, 2016 and seating is limited. Click here for more information on registration.

Pre-Meeting Workshops

Saturday December 3
8:00 a.m. – 5:00 p.m.

Residency Program Design and Conduct (RPDC)
RPDC A: PGY1 New Programs (Limit 80 participants)
RPDC B: PGY1 Existing Programs (Limit 100 participants)
RPDC C: PGY2 New and Existing Programs (Limit 80 participants)

Workshop Fee: $355
MCM2016: Residency and Accreditation sessions

Pharmacy Technician Training Program Directors and Instructors

**Sunday, December 4**

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

2:00 p.m. – 3:00 p.m. Pharmacy Technician Training: What’s New for 2017!

Residency Program Directors and Preceptors

**Sunday, December 4**

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

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

**Monday, December 5**

6:30 a.m. – 9:00 a.m. Veterans Affairs Residency Open Forum

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

**Tuesday, December 6**

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

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

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

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
Residency Showcase Tips and Reminders

Residency Program Directors:

• There are still a few booths available for Tuesday AM and Tuesday PM Residency Showcase Sessions—21 Available Booth Spaces left (You still have time!)

• [Click here to apply.]

• Some booth assignments have changed: Please contact Cheri Zollicoffer czollicoffer@ashp.org to confirm your booth reservation before traveling.

• View your booth assignment location on the floor plan.

• The Mobile App goes live on 11/15! The app will display Residency Showcase booth assignments and program names ONLY. Please make sure to send your program name updates to Cheri ASAP to ensure prospective residents can find your program.

• Don’t forget to stop by the Residency Showcase Information Desk onsite if you have trouble with your booth assignment.

PhORCAS/WebAdMIT™ Updates

Pharmacy Online Residency Centralized Application Service

PhORCAS, the Pharmacy Online residency Centralized Application Service opened for applicants on November 2nd at 3pm. The ASHP website includes new information regarding PhORCAS for applicants, programs and reference writers for this year. Information regarding how PhORCAS can save applicants time, effort, and money can also be found on the website.

WebAdMIT is the selection portal of PhORCAS that allows residency program directors and preceptors to sort resident applicant information and has been completely revamped this year with the implementation of enhanced WebAdMIT software. WebAdMIT turbo charges the previous selection portal capabilities for programs and adds in a wealth of brand new features such as facilitating interview scheduling, integration of scoring models, custom access rights on a per user basis, a single sign-on for users with multiple programs within an organization, and much more. A session will be held at the Midyear Clinical Meeting at 12 noon on Sunday December 4th. Come learn how WebAdMIT can help your program improve the efficiency of the residency selection process for the current application season.
Important Dates for 2017 National Matching Service – Two Phase Match

November 2, 2016  Applicant will be able to register for the Match. List of ASHP Match programs available.

December 16, 2016  Final date for Early Commitment of PGY2 positions.

March 3, 2017  Rank order list submission deadline for Phase I Match.

March 17, 2017  Results of Phase I Match are released to applicants, program directors. Program directors must send letters of confirmation of the Phase I Match result, no later than April 16, 2017, to matched applicants who must sign and return the letters of confirmation.

March 21, 2017  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.

April 5, 2017  Rank order list submission deadline for Phase II Match.

April 12, 2017  Results of Phase II Match are released to applicants and program directors. Program directors must send letters of confirmation of the Phase II Match result, no later than May 12, 2017, to matched applicants who must sign and return the letters of confirmation.

April 13, 2017  Applicants who did not obtain a position in either Phase of the Match, or who did not participate in either Phase of the Match, will be able to submit applications using PhORCAS to programs with available positions.

April 19, 2017  Recommended date for programs with available positions to begin making offers to applicants.

Learn more about the 2017 ASHP Match process.

The ASHP Resident Matching Program incorporates an Early Commitment Process, whereby a position in a PGY2 program can be committed to a current PGY1 resident within the same organization in advance of the matching process. Information on this Early Commitment Process is available from the Match web site.
PharmAcademic™ Update: Release Notes 9/20/16 and 10/15/16

New Process: Preceptors will Score Summative Evaluations on the Objective Level Only

For programs who elect to allow preceptors to mark Achieved for Residency (ACHR) on summative evaluations, preceptors will now only score at the objective level (not goal). ACHR will be marked automatically at the goal level once ALL associated educational objectives are marked as ACHR.

Updated Documents: Sample Residency Evaluations and Selecting Achieved for Residency (ACHR) for Educational Goals and Objectives

More Information Available on Summative Evaluations for Preceptors

When marking ACHR for objectives on summative evaluations, additional information has been added for the evaluator to view. When clicking the ACHR button at the objective level, the preceptor has the opportunity to view criteria, evaluation history, feedback, and ACHR history for the selected objective before confirming ACHR status.

Updated Documents: Sample Residency Evaluations, Selecting Achieved for Residency (ACHR) for Educational Goals and Objectives

Cosign Capabilities for Formative Feedback

RPDs can now elect to cosign formative feedback. When feedback is entered for the resident, the RPD/Designee will receive an email notification to cosign the feedback and a task will be listed on their Global Task list where they can view and cosign the feedback. To select this option, click on the Edit Residency Program button, and next to “Feedback Cosigners” select RPD, Designee(s), or Both RPD and Designee(s). (For this option, both the RPD and Designee(s) will receive a cosign notification. The co-sign will be complete after the first person cosigns the feedback and the task will be removed from the other’s task list.)

Updated Documents: Entering Residency Description and Selecting Program Details; Providing Formative Feedback; Reviewing Formative Feedback

New View/Manage Evaluations

The new “View/Manage Evaluations” page allows the RPD/Designee to view and manage all evaluations for a resident on one page (instead of per learning experience), as well as multiple evaluators. They can filter on the status of the resident, submission status (for example, “submitted – cosigns incomplete”), evaluation name, learning experience name, resident or preceptor name, and/or due date. Beyond viewing evaluations on this page, the RPD/Designee can edit due dates, delete evaluations, send reminders, send evaluations back for edit, and re-assign evaluations.

Updated Document: Managing Resident Evaluations

Overdue co-signature requests have been added to the “Over Due Evaluations” report.
New Combined Summative Responses Report (similar to the previous Side-by-Side report in ResiTrak)

The “Combined Summative Responses Report” displays the rating and comments for each objective from the submitted summative evaluations associated with the selected learning experience. The report can be used to track the progression of the resident and/or compare the responses of multiple evaluators, such as preceptor and resident (similar to the Side-by-Side report in ResiTrak).

The report can be filtered by submit date and/or by evaluator(s). The list of possible evaluators includes the resident (if a self-summative was submitted) and each preceptor who submitted a summative evaluation for that learning experience.

The Combined Summative Responses Report is located under the resident’s Reports tab.

Small Updates/Bug Fixes

• Surveyors can no longer edit evaluations on the View/Manage Evaluations page.

Previously, any surveyor (including lead and practitioner surveyors) with access to a program had the ability to ‘manage’ or edit the evaluations for the program from this screen; this is no longer possible, as this was not the intent. All surveyors can still review any records and information on this page, as needed.

• When a resident is removed from a program, he/she is removed from any learning experiences scheduled in the future.

Previously, if a resident was dismissed from a program or withdrew from a program, the preceptor would still receive notifications and emails pertaining to this resident, although they were no longer part of the program; this has now been resolved.

• Preceptors with RAC role can now add learning experiences (if allowed by program).

Previously, for preceptors classified in PharmAcademic as both the ‘RAC’ role and the ‘preceptor’ role, the ‘RAC’ role took precedence over the ‘preceptor’ role, thereby limiting full access to the functions of the ‘preceptor’ role; this has now been resolved.

• A new column called “Type” was added to Global Task List (user’s homepage) to simplify evaluation titles and allow for potential future sorting capabilities.

Don’t miss PharmAcademic at the Midyear on Sunday, December 4th at 2:00 p.m. - 3:00 p.m.
“Using PharmAcademic to Support Resident Learning”
Commission On Credentialing (COC)
Meeting Highlights

Executive Summary of Length of Accreditation Granted to Programs at the August 2016 Meeting

<table>
<thead>
<tr>
<th>Residency</th>
<th>Total #</th>
<th>Deny Accreditation</th>
<th>Conditional Accreditation</th>
<th>1yr</th>
<th>2yr</th>
<th>3yr</th>
<th>4yr</th>
<th>5yr</th>
<th>6yr</th>
<th>Continue Accreditation</th>
<th>Defer Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>New</td>
<td>72</td>
<td>0</td>
<td>0</td>
<td>14</td>
<td>0</td>
<td>19</td>
<td>0</td>
<td>0</td>
<td>38</td>
<td>X</td>
<td>1</td>
</tr>
<tr>
<td>Reaccreditation</td>
<td>93</td>
<td>0</td>
<td>0</td>
<td>7</td>
<td>0</td>
<td>27</td>
<td>0</td>
<td>0</td>
<td>59</td>
<td>X</td>
<td>0</td>
</tr>
<tr>
<td>Midterms</td>
<td>50</td>
<td>0</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td>49</td>
</tr>
<tr>
<td>Special Cases</td>
<td>89</td>
<td>1</td>
<td>3</td>
<td>5</td>
<td>6</td>
<td>64</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>TOTAL residencies</td>
<td>304</td>
<td>1</td>
<td>3</td>
<td>26</td>
<td>6</td>
<td>110</td>
<td>1</td>
<td>4</td>
<td>97</td>
<td>50</td>
<td>0</td>
</tr>
</tbody>
</table>

Residency Program Statistics:

- Deny Accreditation: (1) 0.33%
- Conditional Accreditation: (3) 0.99%
- Defer Accreditation: (6) 1.97%
- Continue Accreditation: (50) 16.45%
- 1 year Accreditation: (26) 8.55%
- 2 year Accreditation: (6) 1.97%
- 3 year Accreditation: (110) 36.18%
- 4 year Accreditation: (1) 0.33%
- 5 year Accreditation: (4) 1.32%
- 6 year Accreditation: (97) 31.91%

COC Decisions approved by the ASHP Board of Directors:

VOTED: To approve the following Residency Standards and Competency Areas, Goals and Objectives:

- The PGY1 Community-based Competency Areas, Goals and Objectives
- The PGY1 Community-based Standards Guidance Document
- The new PGY1 Managed Care Pharmacy Residency Standard
- The PGY1 Residency Accreditation Standard (2014) and the PGY1 International Residency Accreditation Standard (2015) have been consolidated into one PGY1 Residency Standard (2016).
- The PGY2 Residency Accreditation Standard (2015) and the PGY2 International Residency Accreditation Standard (2015) have been consolidated into one PGY2 Residency Standard (2016).
- The following PGY2 Competency Areas, Goals and Objectives:
  - Critical Care
  - Oncology
  - Pediatrics
  - Psychiatry

(The next PGY2 areas under review for revised Competency Areas, Goals and Objectives: Pharmacotherapy, Ambulatory Care, Infectious Diseases, Cardiology, Internal Medicine, Solid Organ Transplant, Geriatrics, and, Pain and Palliative Care.)
As a reminder the PGY2 Pharmacy Residency Standard was approved and available for PGY2 pro-
grams to transition to starting in July 2016 and all programs must comply with the new standards
effective July 2017.

Also, Guidance documents will be updated twice yearly after each COC meeting and posted to the
ASHP website.

Other COC actions approved by the ASHP Board of Directors:

- **MANDATORY REQUIREMENT**: Beginning with the 2016-17 residency year, all programs are
  now required to enter resident close out information in the graduate tracking function of
  PharmAcademic. See Article “New Requirement-ALL programs-Graduate Tracking”
- PGY2 Transition of Care Pharmacy Residency programs do not meet the PGY2 criteria for a
  new area of advanced pharmacy practice. Applications for accreditation and pre-candidate
  applications will no longer be accepted and current programs will have their accreditation end
  at the current period of approved accreditation.

---

**Updated Documents and Revisions Posted to Website**

Newly approved Accreditation Standards, Competency Areas Goals and Objectives, and updated
Guidance Documents are now available on the accreditation webpage. You will find the following:

- Summary of changes document for the PGY1 Pharmacy Accreditation Standard
- Updated PGY1 guidance document
- NEW PGY1 Community Competency Areas, Goals, and Objectives
- NEW Community based Standards guidance document
- NEW Managed Care PGY1 Accreditation Standards

NEW 2016 Competency Areas, Goals and Objectives for the following PGY2 programs: Critical Care,
Oncology, Psychiatry, and Pediatrics. Revised: Academic and Professional Form

Click for the revised Academic and Professional Form with imbedded guidance
Responding to an Accreditation Survey Report: Surveyed on “old” standards.

During the phase in time for new standards, the time between publication of new standards and the required implementation date, programs have a choice of being surveyed under the new or old standards. This raises the question, how does a program respond to the survey if choosing to be surveyed under the old standards but needing to make the transition to the newly approved standards? This would also apply for programs preparing midterm reports which were surveyed under the old standards and have transitioned to the new standards in the interim. Accreditation services has published a crosswalk that maps old standards with the new standards and can be found on the website under the PGY1 standards and under the PGY2 standards. These crosswalks will help with preparing your response since some standards have been renumbered and some may have been removed. For example, if the program is cited on a standard that has been renumbered, both standard numbers should be included in the response for that citation for clarity. (e.g. PGY2 2005 standard 5.1 is now 4.2 in the new PGY2 standards) and if the standard is no longer included your response would indicate that the program has transitioned to the new standards and the citation is no longer applicable. (e.g., PGY2 2005 standard 3.5 is no longer included in the new standard). Please refer to the guideline document “Guidelines for Preparing Responses to Residency Accreditation Survey Reports and Progress Reports”. Also, for any questions on how to respond feel free to reach out to Accreditation Services asd@ashp.org or your assigned lead surveyor directly.
Most Common Citings – NEW PGY1 Standards

August 2016 Top Areas of Partial Compliance with PGY1 Pharmacy Residencies:

2014 PGY1 Standard: Top 5 Citings 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>3.4c(1)</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>83%</td>
</tr>
<tr>
<td>3.3c(1)(d)</td>
<td>For each objective, the learning experience contains a list of learning activities that will facilitate its achievement.</td>
<td>79%</td>
</tr>
<tr>
<td>3.3c(1)(a)</td>
<td>The program’s description of the structure of the program includes required learning experiences and the length of time for each experience.</td>
<td>67%</td>
</tr>
<tr>
<td>3.4d(2)</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>61%</td>
</tr>
<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 leaves and the consequences of any such leave on residents’ ability to complete the residency program and for dismissal from the residency program.</td>
<td>58%</td>
</tr>
</tbody>
</table>

2014 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 leaves and the consequences of any such leave on residents’ ability to complete the residency program and for dismissal from the residency program.</td>
<td>58%</td>
</tr>
<tr>
<td>2.2</td>
<td>The program complies with the ASHP Duty-Hour Requirements for Pharmacy Residencies.</td>
<td>41%</td>
</tr>
<tr>
<td>2.4b</td>
<td>Residents’ acceptance of these terms and conditions, requirements for successful completion, and expectations of the residency program is documented prior to the beginning of the residency.</td>
<td>34%</td>
</tr>
<tr>
<td>2.7a</td>
<td>The RPD documents residents’ completion of the program’s requirements.</td>
<td>31%</td>
</tr>
</tbody>
</table>

2014 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 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>83%</td>
</tr>
<tr>
<td>3.3c(1)(d)</td>
<td>For each objective, the learning experience contains a list of learning activities that will facilitate its achievement.</td>
<td>79%</td>
</tr>
<tr>
<td>3.3c(1)(a)</td>
<td>Learning experiences include a general description, including the practice area and the roles of pharmacists in the practice area.</td>
<td>67%</td>
</tr>
<tr>
<td>3.4d(2)</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>61%</td>
</tr>
</tbody>
</table>
### 2014 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>6.8a(2)</td>
<td>The pharmacy practice has personnel, facilities, and other resources to carry out a broad scope of pharmacy services (as applicable to the practice setting). The pharmacy’s professional, technical, and clerical staff complement is sufficient and diverse enough to ensure that the department can provide the level of service required by all patients served.</td>
<td>56%</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 technologies.</td>
<td>52%</td>
</tr>
<tr>
<td>6.2d</td>
<td>The medication distribution system includes the following components (as applicable to the practice setting): pharmacy services extend to all areas of the practice site in which medications for patients are prescribed, dispensed, administered, and monitored.</td>
<td>45%</td>
</tr>
<tr>
<td>6.7b</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: prospective participation in the development of individualized medication regimens and treatment plans.</td>
<td>45%</td>
</tr>
</tbody>
</table>

### News: Board of Pharmaceutical Specialties (BPS)

The Board of Pharmaceutical Specialties – Currently “Added Qualifications” (enhanced level of training and experience within one segment of a BPS-recognized specialty) are in place for Infectious Diseases and Cardiology. These two areas are being developed as stand-alone specialties and exams will be created. The “AQ” designation and process will be in place until those exams are available. Once the exams are available, those with the AQ designation will need to apply for and pass the new examinations to be granted board certification in Cardiology or Infectious Diseases. 

[Learn more](#)

### News: ASHP Foundation

#### 2016 Pharmacy Residency Excellence Awards

**Congratulations to the 2016 Awardees**

**Program Award**

Nebraska Medicine Postgraduate Year One Pharmacy Residency Program
Omaha, NE

**Preceptor Award**

Sandra Kane-Gill, Pharm.D., M.S.
University of Pittsburgh
Pittsburgh, PA
**New Preceptor Award**
Joshua Raub, Pharm.D., BCPS
Detroit Receiving Hospital/Detroit Medical Center
Detroit, MI

This awards program is supported by an educational donation provided by Amgen, Inc. The recipients have demonstrated excellence and innovation in training pharmacy residents and serve as models for other residency programs and preceptors. Awardees will be honored at a presentation and reception at the Mandalay Bay South Convention Center, Level 2, Reef E, on Saturday, December 3, 2016 from 6:30 – 7:30 p.m. **Learn more**

Learn more about Foundation Events at the 2016 ASHP Midyear Clinical Meeting.

**Pharmacy Residency Expansion Grant Program Application Deadline January 6, 2017**

The overarching goal of the ASHP Foundation Pharmacy Residency Expansion Grant (PEG) program is to expand the number of health-system-based PGY1 and PGY2 pharmacy residency positions for the 2017-2018 training year. Grants are supported by an educational donation provided by Amgen, Inc., ASHP Foundation corporate sponsors, and gifts made in memory of Janet Teeters.

New Supplemental Funds Requirement: The ASHP Foundation will award $25,000 grants, for which institutions applying for the grant must agree to secure supplemental funds to offer a new or expanded residency position.

**Learn more about eligibility criteria.**

---

**Get Involved**

Looking for a way to give back while earning credit for preceptor development? Check out these upcoming opportunities:

**Seeking Poster Mentors for Midyear**

Influence the next generation of pharmacists. Volunteer as a Poster Mentor and help guide the careers of our students and residents down their own “road to success”.

What does a Poster Mentor do? A Poster Mentor reviews 3 posters during any poster session and provides feedback to the student or resident. That’s it! In just a few moments, you can pass along guidance and encouragement that could last a lifetime.

**Learn more**
NPPC 2017 Presenters Wanted

If you are an experienced pharmacy preceptor skilled in the art of molding and mentoring pharmacy students or residents, but have never had the opportunity to share your expertise with the ASHP community, then this is the opportunity for you!

ASHP would like to invite you to submit a proposal for an educational session for the 2017 National Pharmacy Preceptors Conference. Planning an educational session is the perfect platform for you to educate and encourage other pharmacy preceptors to practice at a higher level. Presentations and posters from community hospital practice sites are particularly requested and desired in addition to all other newcomers!

Join our mission to impact the future of pharmacy.

Learn more

Accreditation Services Office News

Jim Carlson, PharmD, ASHP Lead Surveyor
Contact: jcarlson@ashp.org, (301) 664-8885

Jim Carlson is an accreditation services associate in ASHP’s Accreditation Services Division. Jim joined ASHP as a lead surveyor in 2016. Jim earned his Bachelor of Pharmacy degree from Washington State University in Pullman, WA and earned his Doctor of Pharmacy from the University of Minnesota in Minneapolis, MN. He comes to ASHP from Regence Blue Cross/Blue Shield in Seattle, where he was Vice President, Clinical Pharmacy Services. Previously, he worked for Group Health Cooperative in Seattle for 30 years in various leadership roles in hospital, ambulatory care and health plan areas. He has received the AMCP Individual Contribution Award and the AMCP Distinguished Service Award. Jim has been the program director of two PGY1 Managed Care Residency programs and been a practitioner surveyor for ASHP since 1999. He has served on the ASHP Commission on Credentialing as the AMCP representative since 2011 and recently completed his term as Chair of the ASHP Commission on Credentialing.

New General ASO Voicemail Number

The Accreditation Services Office now has an active general voice number. Access to the ASO general voicemail will be available to the administrative staff to access daily to provide assistance.

Accreditation Services Office (301) 664-8835 Voice

All general inquiries, as well as requested updates and reports, should be e-mailed to our central e-mail address: asd@ashp.org
Resident Visits to ASHP Headquarters

Each year, ASHP schedules several days for pharmacy residents in ASHP-accredited programs to visit our headquarters in Bethesda, Maryland. At the end of the program, participating residents will be able to:

• Define the role that ASHP can play in their professional life, both on a daily basis and over the span of their career.
• Explain ASHP’s involvement in selected current pharmacy issues.
• Identify one or more ways that they would like to be actively involved in ASHP activities.
• Explain the relationship between their professional goals and ASHP member benefits.

The 2016 Resident Visit Dates were October 14, October 21, November 1, and November 4. If your program missed the Live Resident Visits this year, consider a Virtual Resident Visit.

Learn more
New from ASHP

Institutional rates for the Teaching Certificate Program are available. For rates please call Chris Jezowski, Institutional Sales Rep in Marketing at 847-245-3850 or CJezowski@ashp.org.

Learn more

Other Current and Upcoming Certificate Programs

- Pharmacy Informatics Certificate
- Sterile Product Preparation Training and Certificate Program
- Advanced Sterile Product Preparation Training and Certificate Program

Learn more

ASHP Review and Recertification Reward Program (RRRP)

You can earn free resources for your department when your residents and new practitioners enroll in ASHP’s 2017 Resident Reward & Recertification Program (RRRP). The RRRP is open to all eligible residents and new practitioners who wish to pursue a specialty certification in Ambulatory Care Pharmacy, Critical Care Pharmacy, Pediatric Pharmacy or Pharmacotherapy.

Learn more