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## ashp<sup>®</sup> NATIONAL PHARMACY PRECEPTORS CONFERENCE

### THE ONLY NATIONAL EVENT FOR **PHARMACY PRECEPTORS** AND **RESIDENCY DIRECTORS**

OCTOBER 21-22, 2021 | CHICAGO, IL



- 12+ hours CE
- Precepting Skills
- Residency Program Effectiveness
- Innovative Solutions

**Register Today!**



## National Pharmacy Preceptors Conference

**October 20-22, 2021 • Chicago, Illinois**  
**Registration is open now!**

As the only national event focused on pharmacy 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

- Continuing education available
- Residency Program Design and Conduct Workshops (RPDC)
- 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 17, 2021** Advance Rate Registration Deadline

**After September 17, 2021** Regular and On-site Registration Rate

## Don't Miss the RPDC Workshops at NPPC!

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 Q&A. You will definitely not want to miss this opportunity to get up close and personal with the Accreditation Standards. The RPDC Workshops will be held on **Wednesday, October 20, 2021**. There is an additional fee to attend these workshops. For more information and to register [click here](#).

## The Following Workshops are Available:

- PGY1 New Programs – Capacity: 80
- PGY1 Existing Programs – Capacity: 100
- PGY2 New and Existing Programs – Capacity: 100

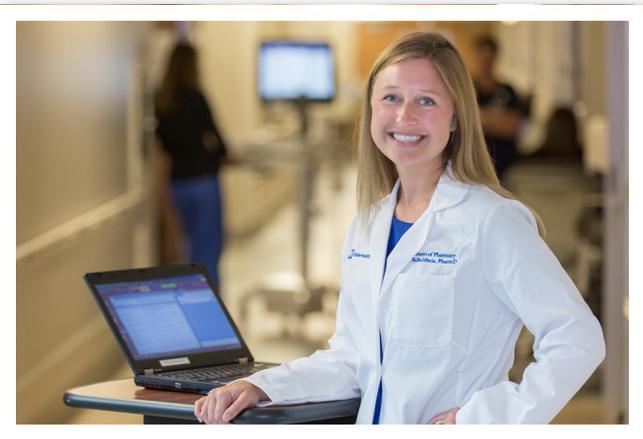
## Setup and Optimize YOUR PhORCAS- WebAdMIT Program Portal with the Experts at NPPC 2021

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.

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# 2021 National Match Results

Results from the 2021 Phase I Pharmacy Resident Match were released on March 19, 2021. More than 8945 graduating pharmacy students and new practitioners participated in the Resident Matching Program seeking PGY1 and PGY2 residencies, of which there were 5534 positions. An additional 594 PGY1 residents participated in the early commitment process to stay on at their site to complete a PGY2 residency, resulting in a total of 4873 positions filled during Phase I.



Here's how the 2021 Phase I Match Day compared to last year:

- 3741 PGY1 positions matched, 2% increase in filled positions over last year (3671)
- 1380 PGY2 positions matched, 10.2 % increase in filled positions over last year (1252) includes early commitments (786 matched + 594 early commits=1380)
- 1.5% increase in participating PGY1 applicants overall
- 2.5 % decrease in participating PGY2 applicants overall
- Increase from 35.2% to 39.8% of PGY2 positions filled by early commitment process

Results from the 2021 Phase II Pharmacy Residency Match were released on April 14, 2021. One thousand, five hundred and fourteen applicants (1514) participated in Phase II of the 2021 Match compared with 1494 in the phase two match in 2020. This represents a 1.3% increase in Phase II applicants.

The results of Phase I and Phase II 2020 Pharmacy Residency Match\*:

- Total of 4873 applicants matched (4527 in Phase I + 347 in Phase II)
- Overall position fill rate for PGY1 and PGY2 positions was 98.9% (compared to 99.1% in 2020)
- At the end of the 2021 Match (at the conclusion of Phase II), there were 53 unfilled positions (19 PGY1 and 34 PGY2) and 2448 unmatched applicants (2167 PGY1 + 281 PGY2)

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

Obtaining a residency continues to be competitive. This year at the conclusion of the 2021 Match (after Phase II), 2,167 individuals seeking PGY1 residencies did not match, and 19 PGY1 positions remained unfilled. Pharmacists seeking PGY2 residencies saw somewhat less competition, with 281 unmatched individuals seeking to fill 34 PGY2 open positions. The number of applicants entering the post-match scramble 2021 for PGY1 positions was a bit less competitive than in 2020 (2281 individuals for 5 positions). Further, the number of applicants in 2021 for PGY2 was also less competitive than in 2020 (315 individuals and 38 positions). Overall, the number of residency positions has increased by 192 positions over 2020 or 3.6% nationwide. The growth of PGY2 positions has outpaced the growth of PGY1 positions, at 5.2 percent and 3 percent, respectively.

[Read More](#)

# Commission on Credentialing Highlights

The Commission on Credentialing (COC) met virtually on March 3-5, 2021

The following actions were taken by the Commission on Credentialing:

## Length of Accreditation Granted at the March 2021 COC meeting

Residency	Total #	Conditional Accreditation	1yr	2yr	3yr	4yr	6yr	7yr	8yr Full Cycle	Withhold	Defer	Discontinue
New	104	0	14	0	0	23	0	0	64	2	1	0
Reaccreditation	143	0	14	0	0	46	0	0	82	0	1	0
Special Cases	99	1	5	8	75	1	1	6	0	0	1	1
<b>TOTAL</b>	<b>346</b>	<b>1</b>	<b>33</b>	<b>8</b>	<b>75</b>	<b>70</b>	<b>1</b>	<b>6</b>	<b>146</b>	<b>2</b>	<b>3</b>	<b>1</b>

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

### Voted To Approve:

- The elimination of the post graduate year one (PGY1) exemption from the residency match application process.
- Proposed definitions for full approval, provisional approval, and interim residency program directors for addition to the Regulations. Additionally, the COC voted to approve changes to the draft language for standard 4.1 guidance with final wording to be determined by the Standards Revision Team stating that when interim leadership for a residency program is required due to vacancy or leave of absence of the RPD, the director of pharmacy or administrative authority such as the residency advisory committee (RAC), may appoint a pharmacist residency preceptor to serve as Interim RPD. The interim appointment is acceptable for a period of no longer than 120 days. The organization is not required to notify ASHP, but must change the RPD in PharmAcademic™ to the Interim RPD for continued administration of the residency program. By the end of the 120-day period, a new RPD must be appointed if the previous RPD is unable to resume RPD responsibilities. Information for a change in RPD must be sent to the Accreditation Services Office (asd@ashp.org) at or before the completion of the 120-day interim appointment. Submitted information must include an updated Academic and Professional Record and an updated Curriculum Vitae. ([See more information on this change below](#))
- The proposed draft revision for standards one (1), two (2), four (4), excluding standards 2.3 and 2.16, for the standards revision and harmonization of the postgraduate year 1 (PGY1) pharmacy, managed care, and community-based pharmacy residency standards and to approve the corresponding Academic and Professional Record (APR).

The next meeting of the Commission on Credentialing will be held on August 11-13, 2021.



# Updated Documents and Revisions Posted to Website

Updated guidance documents have been posted and can be found [here](#).

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## NEWS: Approved, Provisional and Interim Residency Program Directors

### More information on new status terminology for Residency Program Directors

The Commission on Credentialing (COC) has revised the definition of the residency program director within the ASHP Regulations on Accreditation of Pharmacy Residencies and added terminology regarding approval status type that the COC shall recognize based upon the RPD requirements of the respective accreditation standards (PGY1 or PGY2). The following approval status types have been added to section III. Definitions (Program Personnel) B. Residency Program Director:

Residency program director (RPD): the pharmacist responsible for direction, conduct, and oversight of the residency program. In a multiple-site residency, the residency program director is a pharmacist designated in a written agreement between the sponsoring organization and all of the program sites. The COC recognizes the following status types of residency program director:

1. Full Approval: the RPD meets all qualifications and eligibility criteria as outlined in the accreditation Standard (PGY1 or PGY2).
2. Provisional Approval: the RPD does not meet all qualifications and eligibility criteria as outlined in the accreditation Standard (PGY1 or PGY2), but will meet them all within one year.
3. Interim RPD (does not require COC approval): a residency pharmacist preceptor appointed by the site to serve as the RPD due to vacancy or leave of absence of the RPD, for a period of no longer than 120 days.

You can review the [Regulations](#).

The COC has outlined specific requirements for the Interim RPD with the Guidance Documents for each of the four residency program types: PGY1, PGY1 managed care, PGY1 community-based and PGY2.

When interim leadership for a residency program is required due to vacancy or leave of absence of the RPD, the director of pharmacy or administrative authority such as the residency advisory committee (RAC), may appoint a pharmacist residency preceptor to serve as Interim RPD. The interim appointment is acceptable for a period of no longer than 120 days. The organization is not required to notify ASHP, but must change the RPD in PharmAcademic™ to the Interim RPD for continued administration of the residency program. By the end of the 120-day period, a new RPD must be appointed if the previous RPD is unable to resume RPD responsibilities.

You can review the [Guidance documents](#) for each program type at the link to the website.

# 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 2021, you must submit an application for accreditation to 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 2021. 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.

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## Annual Residency Accreditation Report and Resident Survey

### Highlights From the COC Update Residency Town Hall presentation at the Midyear Clinical Meeting 2020

The Annual Residency Accreditation Report survey was initiated in September 2018 to collect data on all accredited residency programs. It is sent out each September through PharmAcademic and allows collection of data in support of the accreditation process and program status concerning performance and quality.

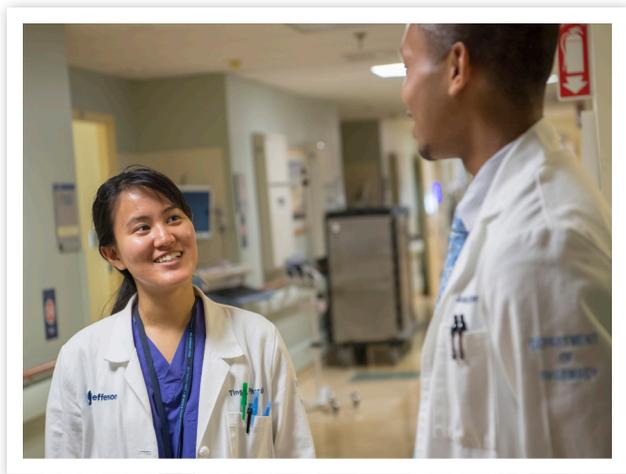
Data from the fall 2020 Annual Residency Accreditation Report survey had a 90% response rate. There was an 7% increase for all residency positions over 2019. This increase represented 325 positions across all residency types. Specifically, there was an increase of 158 PGY1 positions, 161 PGY2 positions, and seven combined PGY1/PGY2 positions. For PGY1 positions, the additional 158 positions in 2020 represented a 4.1 % increase over the total PGY1 positions available in 2019. The breakdown of PGY1 positions included 133 new PGY1 pharmacy positions, 27 new PGY1 community positions, and two fewer PGY1 managed care positions in 2020.

At the end of the 2019-20 residency year, overall 37.5% of all residency graduates were hired by the organization that trained them. Also, at the end of the 2019-20 residency year, overall 69.5% of graduates went into positions that required residency training.

When asked if programs were promoting diversity in residency classes through the recruiting process, the majority of all program types responded that they have procedures in place to enable

implementation of diversity policy and achieve diversity goals for their programs. Likewise, programs confirmed that diversity and/or cultural competence training is provided to pharmacy staff, including residents and preceptors

Regarding the impact of Covid-19, 71% of programs responded that residency programs were affected by the pandemic and 81% said the resident's training experience was affected. The most frequently reported impact was due to decisions to suspend routine care and elective surgeries disrupting resident learning experiences; and next most was the inability to present research projects virtually or live and/or participate in professional conferences.



Additionally, in the spring of 2020, the initial Resident's Survey was distributed to collect data from the resident's perspective. The survey is designed to gather feedback from residents on their residency experience, confirm compliance with duty hour policies, and collect resident opinions related to the effectiveness of their program in supporting residency training. All responses are anonymous and will only be viewed in aggregate by ASHP. The survey response rate at the time was 97% and some of the data is summarized here. When asked if preceptors spend sufficient time teaching residents in the program, the response indicated 87% agreed for PGY1, 84% for Combined PGY1/2 programs and 89% for PGY2 programs. When asked whether preceptors provide sufficient supervision of residents, over 90% agreed or highly agreed for all program types. Over 70% of all residents in all programs agreed with the statement "I feel comfortable providing honest feedback when I evaluate my PRECEPTORS at the completion of each learning experience." Over 80% of all residents in all program types agreed or highly agreed with the statement "I receive timely feedback on my performance for each rotation or major assignment." Additionally, the statement "I have had sufficient education (from my program, my hospital(s), my institution, or my preceptors) to recognize and counteract the signs of burnout" received agree or highly agree from over 70% of residents. Close to 90% of residents agreed or highly agreed with the statement, "Residents have the opportunity to assess the program for the purposes of program improvement". Overall, the resident survey has provided valuable information on residency training from the resident's perspective.

The new resident's survey along with the annual program survey and the preceptors survey returned some useful information to support the accreditation process. What is next? Combining the data from the annual surveys to create a report that includes shows trends from all three surveys to support the 8-year accreditation cycle and provide an aggregate picture of what is happening in residency training.

The complete MCM Residency Town Hall presentation can be found [here](#).

# Most Common Survey Citings PGY1 Standard

March 2021 COC: Top Areas of Partial Compliance with PGY1 Pharmacy Residencies

## PGY1 Standard: Top Items Overall by Frequency Cited

Standard Number	Standard Verbiage	Percent of Time Cited
3.4c(1)	<b>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.</b>	89%
6.5b	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.)	86%
3.3c(1)a	Learning experiences are documented and include: <ul style="list-style-type: none"> <li>a general description, including the practice area and the roles of pharmacists in the practice area;</li> </ul>	78%
3.3c(1)b	<ul style="list-style-type: none"> <li>expectations of residents; and,</li> </ul>	80%
3.3c(1)d	<ul style="list-style-type: none"> <li><b>for each objective, a list of learning activities that will facilitate its achievement.</b></li> </ul>	69%
1.6	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.	74%
3.4d(2)	<b>On a quarterly basis, the RPD or designee assesses residents' progress and determines if the development plan needs to be adjusted.</b>	72%

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

Standard Number	Standard Verbiage	Percent of Time Cited
1.6	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.	74%
1.5	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.	61%
2.4b	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.	52%
2.2	The program complies with the ASHP Duty-Hour requirements for Pharmacy Residencies.	51%

## PGY1 Standard: Top Cited Items - Program Structure & Preceptors

Standard Number	Standard Verbiage	Percent of Time Cited
3.4c(1)	<b>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.</b>	89%
3.3c(1)a	Learning experiences are documented and include: <ul style="list-style-type: none"> <li>• a general description, including the practice area and the roles of pharmacists in the practice area;</li> </ul>	78%
3.3c(1)b	<ul style="list-style-type: none"> <li>• expectations of residents; and,</li> </ul>	80%
3.3c(1)d	<ul style="list-style-type: none"> <li>• <b>for each objective, a list of learning activities that will facilitate its achievement.</b></li> </ul>	69%
3.4d(2)	<b>On a quarterly basis, the RPD or designee must assess residents' progress and determines if the development plan needs to be adjusted.</b>	72%
4.8f	Preceptors' Qualifications: Ongoing professionalism, including a personal commitment to advancing the profession.	70%

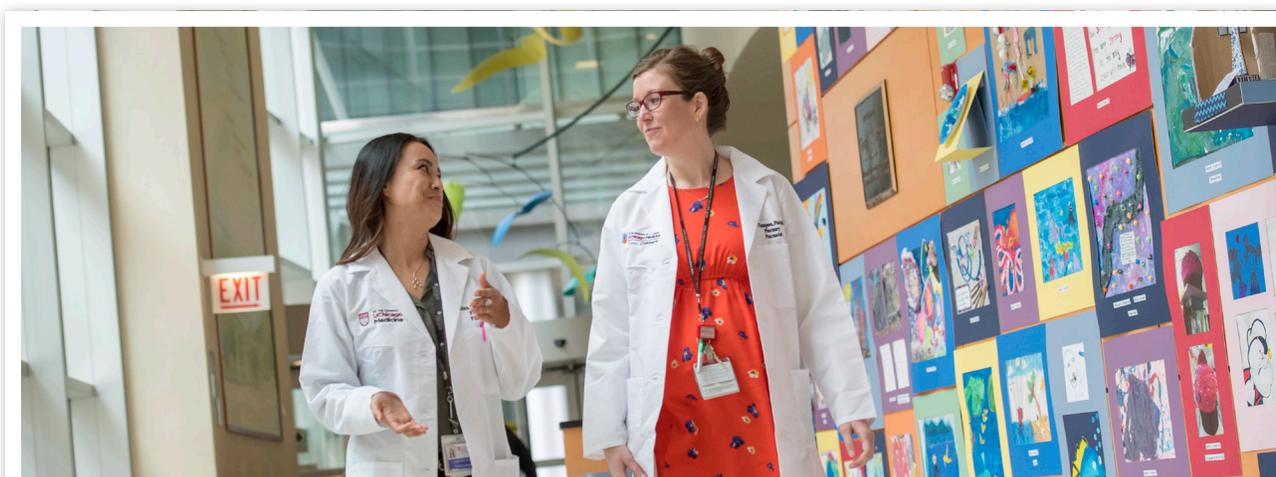
## PGY1 Standard: Top Cited Items – Pharmacy Services

Standard Number	Standard Verbiage	Percent of Time Cited
6.5b	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.)	86%
6.6k	The medication distribution system includes the following components (as applicable to the practice setting): <b>a system ensuring accountability and optimization for the use of safe medication-use system technologies.</b>	60%
6.2d	The pharmacy is an integral part of the health-care delivery system at the practice site in which the residency program is offered, as evidenced by the following: <b>pharmacy services extend to all areas of the practice site in which medications for patients are prescribed, dispensed, administered, and monitored.</b>	55%
6.7l	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.	44%

Reflects the 2016 PGY1 Residency Standard with Guidance Approved March 2020 (no change in March 2021).

*Critical Factors appear in bold.*

Please refer to Fall 2020 for the Most Common PGY2 Citings. Stay tuned for updated PGY2 Citings in Fall 2021.



# PHARMACADEMIC Notes and Tips:

## Residency Closeout Process:

- Remember during the residency closeout process to upload signed residents' certificates.

## Enrolling a resident that didn't go through Match process:

- Check out the HELP CENTER in PharmAcademic, then scroll to:  
Management of Residents
  - Enrolling a Resident
  - Creating and Updating a Resident Schedule
  - Adding Resident Files
  - Closing out a Resident
  - Tracking Graduate Information

## Help Center - Now "Searchable" (upper left corner)

- Search for information using key words to access additional information such as training materials (videos and checklists) and updates and communications from PharmAcademic. Consider printing the Help Documentation list to aid you throughout the residency year when you encounter questions.

## New Comment Guidance for Summative Evaluations (Standard 3.4c (1))

- Help Center: "Sample Standard Residency Evaluations"
- Guidance was added to summative evaluations for preceptors and residents for adding objective comments. The language was added to the instructions at the top of the page and abbreviated in a "tool tip" next to each Comments box (visible when users hover over the question mark).
- Comments should:
  - Be specific and actionable
  - Use criteria related to the objective
  - Recognize residents' skill development
  - Focus on how residents may improve their performance

## New Fields Added to Learning Experiences to Highlight Required Elements (Standard 3.3c)

- Help Center: "Sample Standard Residency Evaluations" and "Using Dashboards to Review Program Information"
- For current learning experiences, users will be asked to add any missing information when making changes to the page (updating or adding new learning experience descriptions (LEDs)). If your current LED contains all required elements, but they are not entered in the newly

developed sections of the template in PharmAcademic (PA), programs do not need to update PA immediately, but will want to use the new format as a guide during program review.

- Here is a list of the required fields on the Overview tab:
  - General Description of the Practice Area
  - Role(s) of Pharmacist(s) in the Practice Area
  - Expectations of Residents
  - Progression of the Resident over the Period of the Learning Experience (include progression timeline)

## Ability to Assign an Interim RPD for the Program

- Help Center: “Reassigning the Program to a new Permanent RPD” and “Assigning an Interim RPD.”
- RPDs and Designees can now assign an Interim RPD for the program by going to Manage Program > Tools > Change Residency Program Director.
- The following is noted:
  - An interim RPD can be assigned for up to 120 days. If longer than 120 days is needed, Accreditation Services Office must be notified ([asd@ashp.org](mailto:asd@ashp.org)).
  - PGY1 programs: the interim RPD should be a qualified preceptor.
  - For multi-program sites, the PGY1 interim RPD can also be a RPD for another program at the site.
  - PGY2 programs: the interim RPD should be a qualified preceptor and have an active practice in the specialty area.

## PGY1/2 Programs – Each year is now Managed Separately in PharmAcademic

- Help Center: “Managing PGY1/2 Programs as Separate Programs in PharmAcademic” and “Enrolling PGY1/2 Residents”
- Incoming 2021-2022 first year PGY1/2 combined program residents will be enrolled in the on-site PGY1 program, and then enrolled in the PGY2 program in the second year. First year residents in a combined program with a Master’s degree will have fifteen (15) months to successfully meet all requirements for completion of their PGY1 residency program in accommodation for completing required didactic courses.”

## Updated Delivery Schedule for Evaluations

- Help Center: “Completing Evaluations”
- Delivery dates for standard ASHP evaluations changed from 2 weeks to 30 days prior to due date. When evaluations are delivered, they will be available on the Task List and users will receive at least 1 email notification from PharmAcademic.

## New Reports

- Help Center: “Viewing Resident-Specific Reports” and “Downloading Program Reports”
- An Excel version of the resident-level report “Goals and Objectives with Evaluations” was added. Prior to the release, this report was only available in PDF format. The Excel version will allow programs to easier manipulate data and track resident progress. (Resident Reports tab)
- A new report was added to the Program Reports tab called “All Learning Activities with Mapped Objectives” so users can view all learning experience activities and the associated objectives – organized by learning experience. (Program Reports tab)

## Improvements to the Process for Marking ACHR on the Competencies Tab

- Help Center: “Marking Achieved for Residency (ACHR) for Educational Goals and Objectives”
- Improvements were made to the process for marking ACHR for multiple objectives at one time on the resident’s Competencies tab. (Residents tab > select resident > Competencies tab > select set > select goal).
- A new grid was added to the page that lists each objective associated with the goal. For each objective, you can view the description, whether the objective was evaluated via a summative evaluation, and its ACHR status. RPDs and Designees can use the checkboxes to mark the selected objectives as ACHR.
- Note: Just as before, objectives that have not been evaluated via a summative evaluation cannot be marked ACHR, but a comment can be added that will be viewable in reports.

## Assigning Objectives to Individual Residents – Coming Soon!

- A solution to allow programs to assign and evaluate educational objectives for individual residents in their program.
- Estimated Availability: Summer 2021

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# ASHP Residency Showcase Information for Programs

## On-line Application System will open soon!

The 2021 Residency Showcase online application system will open on June 28 and will remain available through July 27, 2021. There is no advantage to applying early. All applications submitted while it is open will receive equal consideration.

### Estimated important dates\*:

- June 28, 2021 – The 2021 Residency Showcase application system will open. Programs can submit the application and payment for booth space at Midyear.
- July 27, 2021 – The 2021 Residency Showcase application system will close. ASHP will begin placing programs in their allotted space and session.
- August 9, 2021 – Booth space assignments and access to promote program listings will be distributed.

- August 16, 2021 – Residency Showcase booth selection will open for any program who did not participate in the application process.
- December 6-7, 2021 – Residency Showcase at the Midyear
- December 16, 2021 – 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 2021 [Residency Showcase Information for Programs website](#) or contact us at [showcase@ashp.org](mailto:showcase@ashp.org) ASHP Midyear Clinical Meeting and Exhibition, Orlando, Florida

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## Consider Starting a Technician Training Program!

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

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 as of 1/1/2020

Consider starting an ASHP/ACPE accredited pharmacy technician education and training program at your site! See more information [here](#).

# News: Court Reverses Pharmacy Residency Program Disallowance

## CMS Pass-Through Funding and Residency training

On March 29, 2021, the U.S. District Court of South Carolina granted the Medical University of South Carolina's motion for summary judgment against the U.S. Department of Health & Human Services (HHS) for HHS's disallowance of its postgraduate year one (PGY1) pharmacy residency costs.

Based on a reinterpretation of program regulations made without notice to stakeholders or an opportunity to comment, the Centers for Medicare & Medicaid Services (CMS) disallowed two years of pass-through funding. The court remanded the case to HHS, directing the agency to reimburse MUSC for its residency costs with interest. ASHP lacked standing to intervene in the case, but submitted an amicus brief in support of MUSC outlining the failure of CMS to provide meaningful regulatory guidance to residency programs.

The MUSC lawsuit was a precursor to the recent spate of residency program disallowances based on a reinterpretation of program regulations following publication of the 2018 Transmittal for Medicare Administrative Contractors (MACs). In December 2019, ASHP had a preliminary meeting with CMS to discuss residency program audits and the MACs' application of new and inconsistent interpretations of residency program regulations. Since then, ASHP has followed up several times with the agency. We are still hoping to work with CMS to resolve the issue fully and to safeguard residency program funding.

The MUSC win is good news for residency programs facing disallowances following MAC program audits. While the facts of MUSC's case may differ from other cases, the court's finding that CMS's disallowance was "arbitrary and capricious" will likely extend to similarly situated programs facing disallowances. At a minimum, the MUSC decision should force CMS to develop guidance for residency programs, as ASHP has previously requested.

ASHP will submit a letter to the agency requesting that, on the basis of the court's decision, they reverse outstanding disallowances based on the agency's erroneous interpretation of program regulations and issue compliance guidance outlining CMS's expectations for PGY1 program operations.

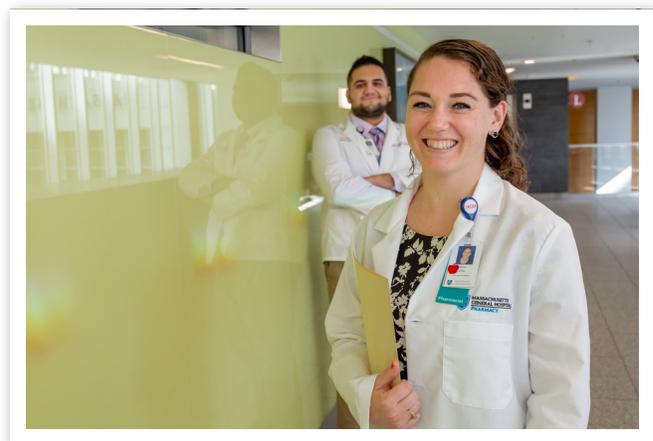
You can help by [sending an email](#) to members of Congress asking them to protect pharmacy residency programs. [Link](#) for more information.

# News: ASHP Membership Forums

## 2021 Regional Residency Conference

### Outreach Thank You

The Regional Residency Conferences had a successful season with virtual 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 platform presentations on workforce well-being and resilience and pharmacy workforce trends.



### ASHP Creates New Section of Pharmacy Educators

The ASHP Section of Pharmacy Educators is a new membership offering created to further strengthen and significantly enhance ASHP's efforts to lead the preparation of the pharmacy workforce. The new ASHP Section of Pharmacy Educators provides a unique and distinct membership home and leadership voice within ASHP for those involved in the training of pharmacists. ASHP members can add the Section for free online at [ashp.org](http://ashp.org). You can learn more about the Section by visiting ASHP's Section of Pharmacy Educators page at [ashp.org/Pharmacy-Educators](http://ashp.org/Pharmacy-Educators).

### ASHP Creates New Section of Community Pharmacy Practitioners

The ASHP Section of Community Pharmacy Practitioners focuses on continuity of care for patients and transitions of care in health systems. The Section provides a membership home for those who are involved in direct patient care, leadership and management, and implementation of advanced practice models and education in community pharmacy-based settings.

ASHP members can add the Section for free online at [ashp.org](http://ashp.org). You can learn about the Section by visiting [ASHP's Section of Community Pharmacy Practitioners page](#).

### ASHP Elective Resident Rotation in Association Management

ASHP offers a resident elective rotation in national association management to residents in ASHP-accredited residency programs with an interest in association management. The program is designed to provide experience in professional and public affairs, leadership, advocacy, membership, and association activities and operations.

## 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 preceptor resources, RPD resources, pharmacy technician education content, leadership, and professional development tools.

## ASHP Resident Visit Program

Stay Tuned for Information Regarding ASHP Resident Visit Program

The ASHP Resident Visit Program happens every fall and we look forward to inviting residents to learn more about ASHP and network with other new practitioners. We will be sending out information to RPDs later this summer regarding the status of virtual or in-person opportunities. During these visits, residents learn about ASHP initiatives, identify areas to contribute to the profession, and to network with ASHP staff and resident peers.

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## NEWS: Accreditation Services Office

### Virtual Survey Update

As conditions and vaccination rates improve, ASHP will begin phasing in a return to in person site visits this fall for residency surveys. Your lead surveyor will inform you in advance whether your upcoming survey will be on site or virtual. If you are scheduled for a survey visit in the last quarter of 2021, factors that will be considered include if your organization still has restrictions on access or limitations on the number of visitors, especially if multiple residency programs at your organization are to be surveyed concurrently. Programs are encouraged to inform their lead surveyor of any changes in your visitor policy as conditions improve.



### Congratulations

#### **William (Bill) Miller, ASHP Lead Surveyor**

William (Bill) Miller who was voted to receive the Harvey A.K. Whitney Lecture Award for 2020. Bill served on the ASHP Commission on Credentialing for a six-year period and was chair for two years. In addition, he has served as both a guest and lead accreditation surveyor for ASHP for 32 years. The annual Harvey A.K. Whitney Lecture Award recognizes individuals who have made outstanding contributions to health-system pharmacy. The award is considered to be health-system pharmacy's highest honor. Due to the pandemic, the lecture was moved to a virtual format.

You are invited to attend the virtual 2021 Harvey A.K. Whitney Lecture Award honoring Dr. William A. Miller, which will be held on Tuesday, June 22, 2021 at 7:00 p.m. Eastern.

To register to attend the virtual event, please click on the following link:

[Register for the 2021 Harvey A.K. Whitney Lecture Award](#)



## Congratulations

### Amy Hyduk-Cardillo, ASHP Lead Surveyor

Amy E. Hyduk-Cardillo, PharmD, MBA, BCPS has transitioned from a contract lead surveyor to a full-time Accreditation Services Associate at ASHP and we are thrilled to have her on-board full-time! See her full bio [here](#).

## Know Your Surveyors

[Click here](#) to learn more about ASO lead surveyors.

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## Surveyor Tips: In the Know

From opportunities for professional growth to free continuing education and examples of documents to shore up your program and information on COVID-19, we've got you covered!

### Call for Posters and Pearls: 2021 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 2021 ASHP National Pharmacy Preceptors Conference, October 21–22 in Chicago. The deadline to submit proposal is **July 15, 2021**.

#### [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, 2021.

#### [Get Involved](#)

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).

### Continuing Education Resources on the ASHP Website: Free On-Demand to Members and Non-members

Are you looking for a way to recharge your batteries before the new residency year begins while earning some free CE at the same time? ASHP's got you covered. Check out the following for some great options. As these resources are free to members and non-members, please share them with your preceptors and residents.

Expanding Primary Care with PGY2 Residents and Population Health Approaches

CE Credit: 1.0 hour [Click here](#).

Academic Education for Pharmacy Residents Destined for Nonfaculty Roles

CE Credit: 1.0 hour [Click here.](#)

The Art of Dialogue: A Stepwise Approach to Effective Communication

CE Credit 1.0 hour [Click here.](#)

From Practice to Publication: Helpful Tools for Successful Pharmacy Resident Research Projects.  
Planned in cooperation with the ASHP Foundation.

CE Credit 1.0 hour [Click here.](#)

Precepting Millennials: The How with Generation Why

CE Credit 1.0 hour [Click here.](#)

## Podcasts for Students and Residents

Are you looking for innovative ways to inform and engage your learners? Consider including a podcast as part of your orientation!

Join members of the ASHP New Practitioners Forum as they share advice for pharmacy students, residents and new practitioners on how to prepare for a journal club presentation.

[Best Practices for Preparing and Presenting a Journal Club](#)

### For More Ways to Stay “In the Know”

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

### Example Documents Section

Accreditation Services now has available for your use examples of policies and procedures created by ASHP lead surveyors that meet the intent of Standards 1 and 2. New examples are added periodically. Feel free to “steal shamelessly” from these examples and use as needed in support of your program(s). By providing these examples, the lead surveyors believe more time during survey can be committed to Standards 3 and 4 which are the crux of residency training.

These documents are available from:

[Program Resources](#) Example Documents Section and [Interview Recruitment Tools and Resources](#)

We hope you find these resources helpful in administration of your programs.



## ASHP COVID-19 RESOURCE CENTER

**ASHP is committed to supporting members and non-members in response to the COVID-19 pandemic.**

The [COVID-19 Resource Center](#) provides open-access, evidence-based resources and tools for pharmacists and healthcare professionals, including our COVID-19 Vaccines webpage. The frequently updated evidence table, **Assessment of Evidence for Covid-19 Related Treatments: Updated 5/27/21**, a catalog of COVID-19 resources and free on-line educational programming from ASHP is also available. Additionally, dedicated information on the [Covid-19 vaccines](#), vaccine safety, policy, vaccine confidence, and mass immunization program information is included. Lastly, there is information on Covid-19 diagnostic testing.

The resources and related information is updated regularly and includes open access to our evidence-based online resources and tools on [ashp.org](#), making them widely available to all pharmacists and healthcare professionals.

Our COVID-19 Community on [Connect](#) serves as a forum for any healthcare providers to ask questions, share experiences and resources, and our COVID-19 article collection in AJHP features articles relevant to the pandemic.

Live and recorded ASHP COVID-19 Webinars providing perspective and insight from experiences during the COVID-19 pandemic are also available. Podcasts are available on the common podcast platforms.

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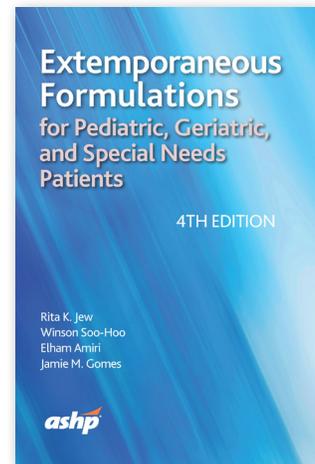
## NEWS: ASHP Foundation

Click [here](#) for the latest news from the [ASHP Foundation](#) on grants and awards specific to residency training.

# Available from ASHP

## New! Extemporaneous Formulations, 4th Edition

The go-to guide for treating patients who require any of the 80% of 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.



## Preorder the New Clinical Pharmacokinetics, 7th Edition & Workbook

Written by John E. Murphy, a well-known leader in the field of clinical pharmacokinetics, the seventh edition of this resource has been updated and expanded to include the latest information on dosing and monitoring. It also includes a companion workbook with questions, exercises, and detailed solutions to test your skills.



## Purchase the set of ASHP's Best Selling Letters Series

The first six books from a growing collection of personal letters created to inspire and comfort pharmacists through all stages of their professional journey, now available as a set. The series includes *Letters from Pharmacy Residents*, *Letters to a Young Pharmacist*, *Letters from Women in Pharmacy*, *Letters from Rising Pharmacy Stars*, *Letters from Pharmacy Preceptors*, and *Letters from Leaders in Pharmacy*.



## AHFS® Clinical Drug Information™ (CDI) FREE for ASHP resident members!

AHFS CDI expands your access to real-time drug and safety updates by linking directly and in context to 20 additional specialty databases. Access all the latest updates including drug shortages information, toggle between a quick summary of essentials and a comprehensive monograph, review compatibility matrices for patient care at the bedside, and view seamlessly incorporated FDA safety data. Resident members can access their personalized redemption code by logging into their ASHP account and then using the code at [ahfscdi.com](http://ahfscdi.com).

