GUIDANCE DOCUMENT FOR
REQUIRED COMPETENCY AREAS, GOALS, AND OBJECTIVES FOR
POSTGRADUATE YEAR ONE (PGY1) PHARMACY RESIDENCIES
Updated April 2016

Introduction

The competency areas, goals, and objectives are for use with the ASHP Accreditation Standard for Postgraduate Year One (PGY1) Pharmacy Residency Programs. The first four competency areas described herein are required, and the others are elective.

The required competency areas and all of the goals and objectives they encompass must be included in all programs. Programs may add one or more additional competency areas. Programs selecting an additional competency area are not required to include all of the goals and objectives in that competency area. In addition to the potential additional competency areas described in this document, programs are free to create their own additional competency areas with associated goals and objectives. Each of the goals encompassed by the program’s selected program competency areas (required and additional) must be evaluated at least once during the residency year. In addition, elective competency areas may be selected for specific residents only.

Each of the objectives listed in this document has been classified according to educational taxonomy (cognitive, affective, or psychomotor) and level of learning. An explanation of the taxonomies is available elsewhere.1

Definitions

Competency Areas: Categories of the residency graduates’ capabilities. Competency areas are classified into one of three categories:

Required: Four competency areas are required (all programs must include them and all their associated goals and objectives).

Additional: Competency area(s) that residency programs may choose to use (in addition to the four required areas) to meet program-specific program needs.

Elective: Competency area(s) selected optionally for specific resident(s).

Educational Goals (Goal): Broad statement of abilities.

Educational Objectives: Observable, measurable statements describing what residents will be able to do as a result of participating in the residency program.

Criteria: Examples intended to help preceptors and residents identify specific areas of successful skill development or needed improvement in residents’ work.

**Guidance**
Criteria are examples that describe competent performance of educational objectives. They are intended to be used to give feedback to residents on the how well they are doing on the skill described in educational objectives while they engage in an activity, as well as how they can improve.

**Activities:** The Standard requires that learning activities be specified for each educational objective in learning experience descriptions. Activities are what residents will do, and how they will do it, to learn and practice the skills described in objectives. Activities are the answer to the question “What can residents do in the context of this learning experience that will provide the kind of experiences necessary to achieve the educational objective?” Specified activities should match the Bloom’s Taxonomy learning level stated in parentheses before each objective. Link to program on Bloom’s Taxonomy learning levels: [http://www.ashpmedia.org/softchalknewbloomlearningtaxonomiesandlevels-2015-Jan/index.html](http://www.ashpmedia.org/softchalknewbloomlearningtaxonomiesandlevels-2015-Jan/index.html)

**Example:**
Objective R1.1.2 (Applying) Interact effectively with patients, family members, and caregivers.
Learning activity: Provide education to patients regarding proper medication use and administration, adherence, and possible adverse drug effects for all new medications initiated during clinic appointments.
Criteria:
- Interactions are respectful and collaborative.
- Uses effective communication skills.
- Shows empathy.
- Empowers patients to take responsibility for their health.
- Demonstrates cultural competence.

If/when residents produce documents, they are maintained for possible review during a survey; this includes feedback on the document residents received, if applicable.

**How it will be surveyed**
The competency areas, goals, and objectives are surveyed as part of the survey of Standard 3, most commonly in the following areas:
3.2.b–c: Surveyors review the program’s teach/evaluate grid, descriptions of required and elective learning experiences, residents’ schedules, and residents’ evaluations. Surveyors have discussions with preceptors and residents to determine that the required competency areas, goals, and objectives are included in the program’s design. Also, residents’ written work products (electronic or paper) are reviewed for applicable objectives.
3.3.a.2: Surveyors review the teach/evaluate grid and residents’ schedules and have discussions with the program director, preceptors, and residents to determine the structure of the program and how the goals and objectives are assigned to be evaluated in the learning experiences provided in the program.
3.3.a.3-4: Surveyors review the teach/evaluate grid, residents’ schedules, and learning experience descriptions and have discussions with residents and preceptors to determine if residents are given experience in an adequate diversity of issues.
3.3.c and 3.3.c.1.d: Surveyors review learning experience descriptions to determine that residents’ learning activities teach the objectives.
3.4.c.1: Surveyors review residents’ evaluations and interview preceptors and residents to determine
that specific feedback is provided to residents about how they can improve.

Documentation to be requested pre-survey*:
- Teach/evaluate grid*
- Description of the program’s structure that indicates required and elective learning experiences
- Residents’ schedules for current and past year*
- Examples of residents’ evaluations for current and past year*

*Access to PharmAcademic® will be requested prior to the survey. Program using PharmAcademic® do not need to include these items with the documents to be supplied to ASHP prior to the survey

Competency Area R1: Patient Care

Goal R1.1: In collaboration with the health care team, provide safe and effective patient care to a diverse range of patients, including those with multiple co-morbidities, high-risk medication regimens, and multiple medications following a consistent patient care process.

Objective R1.1.1: (Applying) Interact effectively with health care teams to manage patients’ medication therapy.
Criteria:
- Interactions are cooperative, collaborative, communicative, and respectful.
- Demonstrates skills in negotiation, conflict management, and consensus building.
- Demonstrates advocacy for the patient.

Objective R1.1.2 (Applying) Interact effectively with patients, family members, and caregivers.
Criteria:
- Interactions are respectful and collaborative.
- Uses effective communication skills.
- Shows empathy.
- Empowers patients to take responsibility for their health.
- Demonstrates cultural competence.

Objective R1.1.3: (Analyzing) Collect information on which to base safe and effective medication therapy.
Criteria:
- Collection/organization methods are efficient and effective.
- Collects relevant information about medication therapy, including:
  - History of present illness.
  - Relevant health data that may include past medical history, health and wellness information, biometric test results, and physical assessment findings.
  - Social history.
  - Medication history, including prescription, non-prescription, illicit, recreational, and non-traditional therapies; other dietary supplements; immunizations; and allergies.
  - Laboratory values.
  - Pharmacogenomics and pharmacogenetic information, if available.
  - Adverse drug reactions.
Medication adherence and persistence.
Patient lifestyle habits, preferences and beliefs, health and functional goals, and socioeconomic factors that affect access to medications and other aspects of care.

- Sources of information are the most reliable available, including electronic, face-to-face, and others.
- Recording system is functional for subsequent problem solving and decision making.
- Clarifies information as needed.
- Displays understanding of limitations of information in health records.

**Objective R1.1.4: (Analyzing) Analyze and assess information on which to base safe and effective medication therapy.**

**Criteria:**

- Includes accurate assessment of patient’s:
  - Health and functional status.
  - Risk factors.
  - Health data.
  - Cultural factors.
  - Health literacy.
  - Access to medications.
  - Immunization status.
  - Need for preventive care and other services, when appropriate.
  - Other aspects of care, as applicable.

- Identifies medication therapy problems, including:
  - Lack of indication for medication.
  - Medical conditions for which there is no medication prescribed.
  - Medication prescribed or continued inappropriately for a particular medical condition.
  - Suboptimal medication regimen (e.g., dose, dosage form, duration, schedule, route of administration, method of administration).
  - Therapeutic duplication.
  - Adverse drug or device-related events or the potential for such events.
  - Clinically significant drug–drug, drug–disease, drug–nutrient, drug–DNA test interaction, drug–laboratory test interaction, or the potential for such interactions.
  - Use of harmful social, recreational, nonprescription, nontraditional, or other medication therapies.
  - Patient not receiving full benefit of prescribed medication therapy.
  - Problems arising from the financial impact of medication therapy on the patient.
  - Patient lacks understanding of medication therapy.
  - Patient not adhering to medication regimen and root cause (e.g., knowledge, recall, motivation, financial, system).
  - Laboratory monitoring needed.
  - Discrepancy between prescribed medications and established care plan for the patient.

**Objective R1.1.5: (Creating) Design or redesign safe and effective patient-centered therapeutic regimens and monitoring plans (care plans).**

**Criteria:**

- Specifies evidence-based, measurable, achievable therapeutic goals that include consideration of:
  - Relevant patient-specific information, including culture and preferences.
• The goals of other interprofessional team members.
• The patient’s disease state(s).
• Medication-specific information.
• Best evidence.
• Ethical issues involved in the patient’s care.
• Quality-of-life issues specific to the patient.
• Integration of all the above factors influencing the setting of goals.

• Designs/redesigns regimens that:
  • Are appropriate for the disease states being treated.
  • Reflect:
    ▪ The therapeutic goals established for the patient.
    ▪ The patient’s and caregiver’s specific needs.
    ▪ Consideration of:
      • Any pertinent pharmacogenomic or pharmacogenetic factors.
      • Best evidence.
      • Pertinent ethical issues.
    ▪ Pharmacoeconomic components (patient, medical, and systems resources).
    ▪ Patient preferences, culture, and/or language differences.
    ▪ Patient-specific factors, including physical, mental, emotional, and financial factors that might impact adherence to the regimen.
  • Adhere to the health system’s medication-use policies.
  • Follow applicable ethical standards.
  • Address wellness promotion and lifestyle modification.
  • Support the organization’s or patient’s formulary.
  • Address medication-related problems and optimize medication therapy.
  • Engage the patient through education, empowerment, and promotion of self-management.

• Designs/redesigns monitoring plans that:
  • Effectively evaluate achievement of therapeutic goals.
  • Ensure adequate, appropriate, and timely follow-up.
  • Establish parameters that are appropriate measures of therapeutic goal achievement.
  • Reflect consideration of best evidence.
  • Select the most reliable source for each parameter measurement.
  • Have appropriate value ranges selected for the patient.
  • Have parameters that measure efficacy.
  • Have parameters that measure potential adverse drug events.
  • Have parameters that are cost-effective.
  • Have obtainable measurements of the parameters specified.
  • Reflects consideration of compliance.
  • If for an ambulatory patient, includes strategy for ensuring patient returns for needed follow-up visit(s).
  • When applicable, reflects preferences and needs of the patient.

Objective R1.1.6: (Applying) Ensure implementation of therapeutic regimens and monitoring plans (care plans) by taking appropriate follow-up actions.
Criteria:
• Effectively recommends or communicates patients’ regimens and associated monitoring plans to relevant members of the health care team.
• Recommendation is persuasive.
• Presentation of recommendation accords patient’s right to refuse treatment.
• If patient refuses treatment, pharmacist exhibits responsible professional behavior.
• Creates an atmosphere of collaboration.
• Skillfully defuses negative reactions.
• Communication conveys expertise.
• Communication is assertive but not aggressive.
• Where the patient has been directly involved in the design of the plans, communication reflects previous collaboration appropriately.

• Ensures recommended plan is implemented effectively for the patient, including ensuring that the:
  • Therapy corresponds with the recommended regimen.
  • Regimen is initiated at the appropriate time.
  • Medication orders are clear and concise.
  • Activity complies with the health system’s policies and procedures.
  • Tests correspond with the recommended monitoring plan.
  • Tests are ordered and performed at the appropriate time.

• Takes appropriate action based on analysis of monitoring results (redesign regimen and/or monitoring plan if needed).
• Appropriately initiates, modifies, discontinues, or administers medication therapy as authorized.
• Responds appropriately to notifications and alerts in electronic medical records and other information systems that support medication ordering processes (based on factors such as patient weight, age, gender, comorbid conditions, drug interactions, renal function, and hepatic function).
• Provides thorough and accurate education to patients and caregivers, when appropriate, including information on medication therapy, adverse effects, compliance, appropriate use, handling, and medication administration.
• Addresses medication- and health-related problems and engages in preventive care strategies, including vaccine administration.
• Schedules follow-up care as needed to achieve goals of therapy.

**Objective R1.1.7: (Applying) Document direct patient care activities appropriately in the medical record or where appropriate.**

Criteria:
• Selects appropriate direct patient care activities for documentation.
• Documentation is clear.
• Documentation is written in time to be useful.
• Documentation follows the health system’s policies and procedures, including requirements that entries be signed, dated, timed, legible, and concise.

**Objective R1.1.8: (Applying) Demonstrate responsibility to patients.**

Criteria:
• Gives priority to patient care activities.
• Plans prospectively.
• Routinely completes all steps of the medication management process.
• Assumes responsibility for medication therapy outcomes.
• Actively works to identify the potential for significant medication-related problems.
• Actively pursues all significant existing and potential medication-related problems until satisfactory resolution is obtained.
• Helps patients learn to navigate the health care system, as appropriate.
• Informs patients how to obtain their medications in a safe, efficient, and cost-effective manner.
• Determines barriers to patient compliance and makes appropriate adjustments.

Goal R1.2: Ensure continuity of care during patient transitions between care settings.

Objective R1.2.1: (Applying) Manage transitions of care effectively.
Criteria:
• Effectively participates in obtaining or validating a thorough and accurate medication history.
• Conducts medication reconciliation when necessary.
• Participates in thorough medication reconciliation.
• Follows up on all identified drug-related problems.
• Participates effectively in medication education.
• Provides accurate and timely follow-up information when patients transfer to another facility, level of care, pharmacist, or provider, as appropriate.
• Follows up with patient in a timely and caring manner.
• Provides additional effective monitoring and education, as appropriate.
• Takes appropriate and effective steps to help avoid unnecessary hospital admissions and/or readmissions.

Goal R1.3: Prepare, dispense, and manage medications to support safe and effective drug therapy for patients.

Objective R1.3.1: (Applying) Prepare and dispense medications following best practices and the organization's policies and procedures.
Criteria:
• Correctly interprets appropriateness of a medication order before preparing or permitting the distribution of the first dose, including:
  o Identifying, clarifying, verifying, and correcting any medication order errors.
  o Considering complete patient-specific information.
  o Identifying existing or potential drug therapy problems.
  o Determining an appropriate solution to an identified problem.
  o Securing consensus from the prescriber for modifications to therapy.
  o Ensuring that the solution is implemented.
• Prepares medication using appropriate techniques and following the organization's policies and procedures and applicable professional standards, including:
  o When required, accurately calibrating equipment.
  o Ensuring that solutions are appropriately concentrated, without incompatibilities; stable; and appropriately stored.
  o Adhering to appropriate safety and quality assurance practices.
  o Preparing labels that conform to the health system’s policies and procedures.
  o Ensuring that medication has all necessary and appropriate ancillary labels.
  o Inspecting the final medication before dispensing.
• When dispensing medication products:
  o Follows the organization's policies and procedures.
- Ensures the patient receives the medication(s) as ordered.
- Ensures the integrity of medication dispensed.
- Provides any necessary written and/or verbal counseling.
- Ensures the patient receives medication on time.

- Maintains accuracy and confidentiality of patients’ protected health information.
- Obtains agreement on modifications to medication orders when acting in the absence of, or outside, an approved protocol or collaborative agreement.

**Objective R1.3.2: (Applying) Manage aspects of the medication-use process related to formulary management.**

**Criteria:**
- Follows appropriate procedures regarding exceptions to the formulary, if applicable, in compliance with policy.
- Ensures non-formulary medications are dispensed, administered, and monitored in a manner that ensures patient safety.

**Objective R1.3.3: (Applying) Manage aspects of the medication-use process related to oversight of dispensing.**

**Criteria:**
- When appropriate, follows the organization’s established protocols.
- Makes effective use of relevant technology to aid in decision-making and increase safety.
- Demonstrates commitment to medication safety in medication-use processes.
- Effectively prioritizes workload and organizes workflow.
- Checks accuracy of medications dispensed, including correct patient identification, medication, dosage form, label, dose, number of doses, and expiration dates; and proper repackaging and relabeling medications, including compounded medications (sterile and nonsterile).
- Checks the accuracy of the work of pharmacy technicians, clerical personnel, pharmacy students, and others according to applicable laws and institutional policies.
- Promotes safe and effective drug use on a day-to-day basis.

**Competency Area R2: Advancing Practice and Improving Patient Care**

**Goal R2.1: Demonstrate ability to manage formulary and medication-use processes, as applicable to the organization.**

**Objective R2.1.1 (Creating) Prepare a drug class review, monograph, treatment guideline, or protocol.**

**Criteria:**
- Displays objectivity.
- Effectively synthesizes information from the available literature.
- Applies evidenced-based principles.
- Consults relevant sources.
- Considers medication-use safety and resource utilization.
- Uses the appropriate format.
- Effectively communicates any changes in medication formulary, medication usage, or other procedures to appropriate parties.
• Demonstrates appropriate assertiveness in presenting pharmacy concerns, solutions, and interests to internal and external stakeholders.

Objective 2.1.2 (Applying) Participate in a medication-use evaluation.
• Uses evidence-based principles to develop criteria for use.
• Demonstrates a systematic approach to gathering data.
• Accurately analyzes data gathered.
• Demonstrates appropriate assertiveness in presenting pharmacy concerns, solutions, and interests to internal and external stakeholders.
• Implements approved changes, as applicable.

Objective 2.1.3: (Analyzing) Identify opportunities for improvement of the medication-use system.
Criteria:
• Appropriately identifies problems and opportunities for improvement and analyzes relevant background data.
• Accurately evaluates or assists in the evaluation of data generated by health information technology or automated systems to identify opportunities for improvement.
• Uses best practices to identify opportunities for improvements.
• When needed, makes medication-use policy recommendations based on a review of practice standards and other evidence (e.g., National Quality Measures, Institute for Safe Medication Practices alerts, Joint Commission sentinel alerts).
• Demonstrates appropriate assertiveness in presenting pharmacy concerns, solutions, and interests to internal and external stakeholders.

Objective 2.1.4: (Applying) Participate in medication event reporting and monitoring.
Criteria:
• Effectively uses currently available technology and automation that supports a safe medication-use process.
• Appropriately and accurately determines, investigates, reports, tracks, and trends adverse drug events, medication errors, and efficacy concerns using accepted institutional resources and programs.

Goal R2.2: Demonstrate ability to evaluate and investigate practice, review data, and assimilate scientific evidence to improve patient care and/or the medication-use system.

Guidance
Objectives R2.2.1–R2.2.5 may be addressed through residents working on one practice-related project or research project; however, if this is not possible, all objectives must be addressed by the end of the residency year and can be addressed through work on more than one initiative.

For example, residents might participate in a medication use evaluation to accomplish some of the objectives and assist in developing a clinical pathway to fulfill other objectives. However they should have sole responsibility for, present, and prepare a manuscript for one major project to be completed during the residency. The major project could address quality improvement, a practice problem, or a research question.

Objective R2.2.5 (the presentation and preparation of the manuscript) refers to the major project.
Objective R2.2.1: (Analyzing) Identify changes needed to improve patient care and/or the medication-use system.
Criteria:
• Appropriately identifies problems and opportunities for improvement and analyzes relevant background data.
• Determines an appropriate topic for a practice-related project of significance to patient care.
• Uses best practices or evidence-based principles to identify opportunities for improvements.
• Accurately evaluates or assists in the evaluation of data generated by health information technology or automated systems to identify opportunities for improvement.

Objective R2.2.2: (Creating) Develop a plan to improve patient care and/or the medication-use system.
Criteria:
• Steps in plan are defined clearly.
• Applies safety design practices (e.g., standardization, simplification, human factors training, lean principles, FOCUS-PDCA, other process improvement or research methodologies) appropriately and accurately.
• Plan for improvement includes appropriate reviews and approvals required by department or organization and addresses the concerns of all stakeholders.
• Applies evidence-based principles, if needed.
• Develops a sound research or quality improvement question that can be realistically addressed in the desired time frame, if appropriate.
• Develops a feasible design for a project that considers who or what will be affected by the project.
• Identifies and obtains necessary approvals, (e.g., IRB, funding) for a practice-related project.
• Uses appropriate electronic data and information from internal information databases, external online databases, appropriate Internet resources, and other sources of decision support, as applicable.
• Plan design is practical to implement and is expected to remedy or minimize the identified challenge or deficiency.

Objective R2.2.3: (Applying) Implement changes to improve patient care and/or the medication-use system.
Criteria:
• Follows established timeline and milestones.
• Implements the project as specified in its design.
• Collects data as required by project design.
• Effectively presents plan (e.g., accurately recommends or contributes to recommendation for operational change, formulary addition or deletion, implementation of medication guideline or restriction, or treatment protocol implementation) to appropriate audience.
• Plan is based on appropriate data.
• Gains necessary commitment and approval for implementation.
• Effectively communicates any changes in medication formulary, medication usage, or other procedures to appropriate parties.
• Demonstrates appropriate assertiveness in presenting pharmacy concerns, solutions, and interests to external stakeholders.
• Change is implemented fully.
Objective R2.2.4: (Evaluating) Assess changes made to improve patient care or the medication-use system.
Criteria:
- Outcome of change is evaluated accurately and fully.
- Includes operational, clinical, economic, and humanistic outcomes of patient care.
- Uses continuous quality improvement (CQI) principles to assess the success of the implemented change, if applicable.
- Correctly identifies need for additional modifications or changes.
- Accurately assesses the impact of the project, including its sustainability (if applicable).
- Accurately and appropriately develops plan to address opportunities for additional changes.

Objective R2.2.5: (Creating) Effectively develop and present, orally and in writing, a final project report.
Criteria:
- Outcome of change is reported accurately to appropriate stakeholders(s) and policy-making bodies according to departmental or organizational processes.
- Report includes implications for changes to or improvement in pharmacy practice.
- Report uses an accepted manuscript style suitable for publication in the professional literature.
- Oral presentations to appropriate audiences within the department and organization or to external audiences use effective communication and presentation skills and tools (e.g., handouts, slides) to convey points successfully.

Competency Area R3: Leadership and Management

Goal R3.1: Demonstrate leadership skills.

Objective R3.1.1: (Applying) Demonstrate personal, interpersonal, and teamwork skills critical for effective leadership.
Criteria:
- Demonstrates effective time management.
- Manages conflict effectively.
- Demonstrates effective negotiation skills.
- Demonstrates ability to lead interprofessional teams.
- Uses effective communication skills and styles.
- Demonstrates understanding of perspectives of various health care professionals.
- Effectively expresses benefits of personal profession-wide leadership and advocacy.

Objective R3.1.2: (Applying) Apply a process of ongoing self-evaluation and personal performance improvement.
Criteria:
- Accurately summarizes own strengths and areas for improvement (in knowledge, values, qualities, skills, and behaviors).
- Effectively uses a self-evaluation process for developing professional direction, goals, and plans.
- Effectively engages in self-evaluation of progress on specified goals and plans.
- Demonstrates ability to use and incorporate constructive feedback from others.
- Effectively uses principles of continuous professional development (CPD) planning (reflect, plan, act, evaluate, record/review).

**Guidance**

The residency program creates a strategy describing what residents will do, and how they will do it, that will help residents develop the skills to effectively self-evaluate. Residents compare their self-evaluation with the preceptor for feedback during formative and summative evaluations, if applicable, to determine the degree of accuracy of their self-evaluation. An example for formative might include asking the resident what they thought they did well and how they can improve on specified objectives.

Residents are able to identify their strengths and areas for improvement and define a plan for improving, where indicated. This objective is included in at least three learning experiences or one learning experience and two times in a longitudinal learning experience or required 3 times in a longitudinal learning experience.

Beyond the requirements, programs are encouraged to use other methods.

**Resources**


**How it will be surveyed**

Review of:

- Strategy for self-evaluation, if written, or verbal description of strategy in discussions with RPD, preceptors, and residents.
- Evidence that preceptors track resident progress toward achievement of this objective.

**Goal R3.2: Demonstrate management skills.**

**Objective R3.2.1: (Understanding) Explain factors that influence departmental planning.**

Criteria:

- Identifies and explains factors that influence departmental planning, including:
  - Basic principles of management.
  - Financial management.
  - Accreditation, legal, regulatory, and safety requirements.
  - Facilities design.
  - Human resources.
  - Culture of the organization.
  - The organization’s political and decision-making structure.
- Explains the potential impact of factors on departmental planning.
- Explains the strategic planning process.

**Guidance**

Include direct instruction about this objective, including discussions with residents.
Objective R3.2.2 (Understanding) Explain the elements of the pharmacy enterprise and their relationship to the health care system.
Criteria:
• Identifies appropriate resources to keep updated on trends and changes within pharmacy and health care.
• Explains changes to laws and regulations (e.g., value-based purchasing, consumer-driven health care, reimbursement models) related to medication use.
• Explains external quality metrics (e.g., FDA-mandated Risk Evaluation and Mitigation Strategy) and how they are developed, abstracted, reported, and used.
• Describes the governance of the health care system and leadership roles.

Guidance
Include direct instruction about this objective, including discussions with residents.

Objective R3.2.3: (Applying) Contribute to departmental management.
Criteria:
• Helps identify and define significant departmental needs.
• Helps develop plans that address departmental needs.
• Participates effectively on committees or informal work groups to complete group projects, tasks, or goals.
• Participates effectively in implementing changes, using change management and quality improvement best practices and tools, consistent with team, departmental, and organizational goals.

Objective R3.2.4: (Applying) Manage one’s own practice effectively.
Criteria:
• Accurately assesses successes and areas for improvement (e.g., a need for staffing projects or education) in managing one’s own practice.
• Makes accurate, criteria-based assessments of one’s own ability to perform practice tasks.
• Regularly integrates new learning into subsequent performances of a task until expectations are met.
• Routinely seeks applicable learning opportunities when performance does not meet expectations.
• Demonstrates effective workload and time-management skills.
• Assumes responsibility for personal work quality and improvement.
• Is well prepared to fulfill responsibilities (e.g., patient care, projects, management, meetings).
• Sets and meets realistic goals and timelines.
• Demonstrates awareness of own values, motivations, and emotions.
• Demonstrates enthusiasm, self-motivation, and a “can-do” approach.
• Strives to maintain a healthy work–life balance.
• Works collaboratively within the organization’s political and decision-making structure.
• Demonstrates pride in and commitment to the profession through appearance, personal conduct, planning to pursue board certification, and pharmacy association membership activities.
• Demonstrates personal commitment to and adheres to organizational and departmental policies and procedures.
Competency Area R4: Teaching, Education, and Dissemination of Knowledge

Goal R4.1: Provide effective medication and practice-related education to patients, caregivers, health care professionals, students, and the public (individuals and groups).

**Guidance**
Resident has experience presenting to a variety of health care professionals other than pharmacists, including physicians.

**Objective R4.1.1:** (Applying) Design effective educational activities.
Criteria:
- Accurately defines educational needs with regard to target audience (e.g., individual versus group) and learning level (e.g., health care professional versus patient).
- Defines educational objectives that are specific, measurable, at a relevant learning level (e.g., applying, creating, evaluating), and address the audiences’ defined learning needs.
- Plans use of teaching strategies that match learner needs, including active learning (e.g., patient cases, polling).
- Selects content that is relevant, thorough, evidence based (using primary literature where appropriate), and timely and reflects best practices.
- Includes accurate citations and relevant references and adheres to applicable copyright laws.

**Objective R4.1.2:** (Applying) Use effective presentation and teaching skills to deliver education.
Criteria:
- Demonstrates rapport with learners.
- Captures and maintains learner/audience interest throughout the presentation.
- Implements planned teaching strategies effectively.
- Effectively facilitates audience participation, active learning, and engagement in various settings (e.g., small or large group, distance learning).
- Presents at appropriate rate and volume and without exhibiting poor speaker habits (e.g., excessive use of “um” and other interjections).
- Body language, movement, and expressions enhance presentations.
- Summarizes important points at appropriate times throughout presentations.
- Transitions smoothly between concepts.
- Effectively uses audio-visual aids and handouts to support learning activities.

**Objective R4.1.3:** (Applying) Use effective written communication to disseminate knowledge.
Criteria:
- Writes in a manner that is easily understandable and free of errors.
- Demonstrates thorough understanding of the topic.
- Notes appropriate citations and references.
- Includes critical evaluation of the literature and knowledge advancements or a summary of what is currently known on the topic.
- Develops and uses tables, graphs, and figures to enhance reader’s understanding of the topic when appropriate.
- Writes at a level appropriate for the target readership (e.g., physicians, pharmacists, other health care professionals, patients, the public).
• Creates one’s own work and does not engage in plagiarism.

**Objective R4.1.4: (Applying) Appropriately assess effectiveness of education.**
Criteria:
• Selects assessment method (e.g., written or verbal assessment or self-assessment questions, case with case-based questions, learner demonstration of new skill) that matches activity.
• Provides timely, constructive, and criteria-based feedback to learner.
• If used, assessment questions are written in a clear, concise format that reflects best practices for test item construction.
• Determines how well learning objectives were met.
• Plans for follow-up educational activities to enhance or support learning and (if applicable) ensure that goals were met.
• Identifies ways to improve education-related skills.
• Obtains and reviews feedback from learners and others to improve effectiveness as an educator.

**Goal R4.2: Effectively employ appropriate preceptor roles when engaged in teaching students, pharmacy technicians, or fellow health care professionals.**

**Objective R4.2.1: (Analyzing) When engaged in teaching, select a preceptor role that meets learners’ educational needs.**
Criteria:
• Identifies which preceptor role is applicable for the situation (direct instruction, modeling, coaching, facilitating).
  o Selects direct instruction when learners need background content.
  o Selects modeling when learners have sufficient background knowledge to understand the skill being modeled.
  o Selects coaching when learners are prepared to perform a skill under supervision.
  o Selects facilitating when learners have performed a skill satisfactorily under supervision.

**Objective R4.2.2: (Applying) Effectively employ preceptor roles, as appropriate.**
Criteria:
• Instructs students, technicians, or others as appropriate.
• Models skills, including “thinking out loud,” so learners can “observe” critical-thinking skills.
• Coaches, including effective use of verbal guidance, feedback, and questioning, as needed.
• Facilitates, when appropriate, by allowing learner independence and using indirect monitoring of performance.

Approved by the Commission on Credentialing of the American Society of Health-System Pharmacists on March 8, 2015. This is the document referenced in the *ASHP Accreditation Standard for Postgraduate Year One (PGY1) Pharmacy Residency Programs* approved on September 19, 2014, and is intended to be used in conjunction with that Standard.

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