

AMERICAN SOCIETY OF HEALTH-SYSTEM PHARMACISTS
ACCREDITATION COUNCIL FOR PHARMACY EDUCATION



GUIDANCE DOCUMENT
for
ASHP / ACPE ACCREDITATION STANDARDS FOR PHARMACY
TECHNICIAN EDUCATION AND TRAINING PROGRAMS

APPROVED:
June 2, 2018
June 23, 2018

PUBLISHED:
July 10, 2018

Pharmacy Technician Accreditation Commission (PTAC)

Bethesda, MD
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PREAMBLE

These Standards are developed to:

- protect the public by ensuring the availability of a competent workforce;
- describe pharmacy technician education and training program development at the Entry-level and Advanced-level;
- provide criteria for the evaluation of new and established education and training programs; and
- promote continuous improvement of established education and training programs.

The ASHP/ACPE Standards for Pharmacy Technician Education and Training (Standards) were developed with input from a broad range of constituents interested in or affected by pharmacy technician education and training. The intent is to establish a national standard for the preparation of the pharmacy technician workforce. The Standards focus on the competency expectations required of pharmacy technicians completing training programs and the assessment of those competencies by the program. The Standards also address the structural and process-related elements within training programs necessary to implement evidence-based outcome measures that document achievement of the Standards. ASHP/ACPE expects pharmacy technician education and training programs to be in compliance with all elements outlined in the Standards.

ASHP (American Society of Health-System Pharmacists) has been accrediting pharmacy residencies since 1963 and pharmacy technician education and training programs since 1983 (www.ashp.org). The Accreditation Council for Pharmacy Education (ACPE) was established in 1932 for the accreditation of professional degree programs in pharmacy, and in 1975, its scope was broadened to include accreditation of providers of continuing pharmacy education (www.acpe-accredit.org). In 2014, a collaboration was formed between ASHP and ACPE with the goal of working together in the accreditation of pharmacy technician education and training programs.

Pharmacy Technician Accreditation Commission (PTAC)

The Pharmacy Technician Accreditation Commission (PTAC) is a collaboration between ASHP and ACPE to promote, assure, and advance the quality of pharmacy technician education and training programs in the United States. The responsibilities of the PTAC include recommending changes to the accreditation Standards, surveying programs for accreditation, modifying the Standards and regulations, and making recommendations for accreditation of programs to the ASHP and ACPE Boards of Directors. The ASHP and

ACPE Boards of Directors ratify the recommendations made by the PTAC and have the final vote for accreditation of programs and other work performed by the PTAC.

Revision of Standards: Summary of Changes

- Entry-level and Advanced-level pharmacy technician education and training standards have replaced the previous concept of one level of pharmacy technician education and training.
- Programs can choose to offer an Entry-level, an Advanced-level, or a combination of Entry-level and Advanced-level pharmacy technician education and training programs.
- All students need to complete an Entry-level program to pursue Advanced-level education and training or can complete a program that prepares for both levels as a continuous program.
- Standards have been reorganized into three sections with the competency expectations being moved to the forefront.
- The Standards have been restructured into 15 standards with key elements of each standard that need to be met.
- For some of the Standards, the key elements are broken into Entry-level and Advanced-level.
- These Standards no longer include the words “must” and “should”. The Standards are declarative statements of expectation.
- Minimum hour requirements have been edited to reflect education and training needs for Entry-level and Advanced-level competencies.
- More emphasis on collaborative behaviors and workflow with pharmacist and health care staff.

SECTION I: COMPETENCY EXPECTATIONS

The education and training program develops the competencies that reflect current and future pharmacy technician functions and responsibilities at the Entry-level and the Advanced-level.

To educate at the Advanced-level, the education and training program will prepare students to achieve both Entry-level and Advanced-level knowledge, skills, behaviors, and abilities.

The program prepares students for practice as Entry-level pharmacy technicians in a variety of contemporary settings (e.g., community, hospital, home care, long-term care) and has students acquire knowledge, skills, behaviors, and abilities needed for such practice.

The program prepares students for practice as Advanced-level pharmacy technicians, in a broad range of advanced roles in a variety of contemporary settings (e.g., community, hospital, home care, long-term care) and has students acquire additional knowledge, skills, behaviors, and abilities beyond those of the Entry-level pharmacy technician, needed for such advanced practice.

Guidance is provided throughout the document, indicated by boxes similar to this, below the Standard/Key Element where appropriate. See Glossary for definitions to specific terms.

Standard 1: Personal/Interpersonal Knowledge and Skills

Key Elements for Entry-level:

1.1 Demonstrate ethical conduct.

For additional guidance on the Key Elements 1.1 - 1.12, see the Model Curriculum.

1.2 Present an image appropriate for the profession of pharmacy in appearance and behavior.

1.3 Demonstrate active and engaged listening skills.

1.4 Communicate clearly and effectively, both verbally and in writing.

Provide samples of how student communication is assessed, including any of the following: research paper(s), resume/CV, email(s), poster(s), presentation(s), and explain any verbal communication skill examples from lab activities or group discussions. Provide a minimum of three written samples and two verbal anecdotes.

- 1.5 Demonstrate a respectful and professional attitude when interacting with diverse patient populations, colleagues, and professionals.
- 1.6 Apply self-management skills, including time, stress, and change management.
- 1.7 Apply interpersonal skills, including negotiation skills, conflict resolution, customer service, and teamwork.
- 1.8 Demonstrate problem solving skills.

Additional Key Elements for Advanced-level

- 1.9 Demonstrate capability to manage or supervise pharmacy technicians in matters such as conflict resolution, teamwork, and customer service.
- 1.10 Apply critical thinking skills, creativity, and innovation.
- 1.11 Apply supervisory skills related to human resource policies and procedures.

Provide documentation of exercises where students display supervisory skills (e.g., scheduling, interviewing potential employees, performing evaluations, exercise disciplinary action(s)).

- 1.12 Demonstrate the ability to effectively and professionally communicate with other healthcare professionals, payors and other individuals necessary to serve the needs of patients and practice.

Standard 2: Foundational Professional Knowledge and Skills

Key Elements for Entry-level

- 2.1 Explain the importance of maintaining competency through continuing education and continuing professional development.
- 2.2 Demonstrate ability to maintain confidentiality of patient information, and understand applicable state and federal laws.
- 2.3 Describe the pharmacy technician's role, pharmacist's role, and other occupations in the healthcare environment.
- 2.4 Describe wellness promotion and disease prevention concepts.
- 2.5 Demonstrate basic knowledge of anatomy, physiology and pharmacology, and medical terminology relevant to the pharmacy technician's role.
- 2.6 Perform mathematical calculations essential to the duties of pharmacy technicians in a variety of settings.

2.7 Explain the pharmacy technician's role in the medication-use process.

Documented evidence of comparison of program site location (state laws and regulations) versus other state requirements/pharmacy technician roles in other states. For additional guidance on the Key Element, see the Model Curriculum.

2.8 Practice and adhere to effective infection control procedures.

Additional Key Elements for Advanced-level

2.9 Describe investigational drug process, medications being used in off-label indications, and emerging drug therapies.

Provide list of resources used to teach investigational drug process, medications being used in off-label indications, and emerging drug therapies.

2.10 Describe further knowledge and skills required for achieving advanced competencies.

Provide a list of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. For additional guidance on the Key Element, see the Model Curriculum.

2.11 Support wellness promotion and disease prevention programs.

Provide a list of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. For additional guidance on the Key Element, see the Model Curriculum.

Standard 3: Processing and Handling of Medications and Medication Orders

Key Elements for Entry-level:

3.1 Assist pharmacists in collecting, organizing, and recording demographic and clinical information for the [Pharmacist Patient Care Process](#).

Provide a list of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. May include:

- Understanding of the pharmacy technician's role in the Patient Care Process
- Medical-history/retrieval for Medication-Reconciliation
- Collection Patient demographic information
- Gather Lab result values for pharmacist rounds, etc.

For additional guidance on the Key Element, see the Model Curriculum.

- 3.2 Receive, process, and prepare prescriptions/medication orders for completeness, accuracy, and authenticity to ensure safety.

Provide a sample of completed prescriptions and medication orders that students have filled/completed. Provide a sample of prescriptions with errors evident, which the student must resolve.

For additional guidance on the Key Element, see the Model Curriculum.

- 3.3 Assist pharmacists in the identification of patients who desire/require counseling to optimize the use of medications, equipment, and devices.

- 3.4 Prepare patient-specific medications for distribution.

Provide a sampling of students' criteria-based completed assessment tools utilized at the program site for the evaluation of preparation of patient specific medications.

For additional guidance on the Key Element, see the Model Curriculum.

- Be prepared to show medications that are used during simulation/laboratory.
- Include number of prescriptions filled during simulation since the beginning of the program.
- Include number of medication orders filled during simulation since the beginning of the program.

- 3.5 Prepare non-patient-specific medications for distribution.

Provide a sampling of students' criteria-based completed assessment tools utilized at the program site for the evaluation of preparation of non-patient specific medications.

For example, include variety of oral syringes prepared, unit dose medications, long-term care, and non-sterile compounding during simulation. For additional Guidance on the Key Element, see the Model Curriculum.

- 3.6 Assist pharmacists in preparing, storing, and distributing medication products including those requiring special handling and documentation.

Provide documentation of exercises where students assisted pharmacists in preparation of medications requiring special handling (e.g., narcotics, refrigerated items, chemotherapy, REM drugs, etc.).

For additional guidance on the Key Element, see the Model Curriculum.

- 3.7 Assist pharmacists in the monitoring of medication therapy.

Provide documentation of exercises where students participated to achieve the Key Element through didactic, simulated (lab), and experiential activities.

For additional guidance on the Key Element, see the Model Curriculum.

- 3.8 Maintain pharmacy facilities and equipment.

If simulation is conducted in an online format, provide documentation of how virtual education and training is executed, for both didactic and any potential simulation (e.g.,

cleaning equipment, measuring and maintaining temperature controls/logs, externship experiences).

- 3.9 Use information from Safety Data Sheets (SDS), National Institute of Occupational Safety and Health (NIOSH) Hazardous Drug List, and the United States Pharmacopeia (USP) to identify, handle, dispense, and safely dispose of hazardous medications and materials.

For additional guidance on the Key Element, see the Model Curriculum.

- 3.10 Describe Food and Drug Administration product tracking, tracing and handling requirements.

Visit the [FDA website](#) to learn more about the topic.
For additional guidance on the Key Element, see the Model Curriculum.

- 3.11 Apply quality assurance practices to pharmaceuticals, durable and non-durable medical equipment, devices, and supplies.

- 3.12 Explain procedures and communication channels to use in the event of a product recall or shortage, a medication error, or identification of another problem.

Visit the FDA website for current information: <https://www.fda.gov/Drugs/DrugSafety/>
For additional guidance on the Key Element, see the Model Curriculum.

- 3.13 Use current technology to ensure the safety and accuracy of medication dispensing.

- 3.14 Collect payment for medications, pharmacy services, and devices.

- 3.15 Describe basic concepts related to preparation for sterile and non-sterile compounding.

- 3.16 Prepare simple non-sterile medications per applicable USP chapters (e.g., reconstitution, basic ointments and creams).

Evidence of student knowledge of USP 795, see for more information:
<http://www.usp.org/compounding/general-chapter-795>
For additional guidance on the Key Element, see the Model Curriculum.

- 3.17 Assist pharmacists in preparing medications requiring compounding of non-sterile products.

Provide a sampling of students' criterion-based completed assessment tools utilized at the program site for the evaluation of preparation of compounding non-sterile products.
For additional guidance on the Key Element, see the Model Curriculum.

- 3.18 Explain accepted procedures in purchasing pharmaceuticals, devices, and supplies.

- 3.19 Explain accepted procedures in inventory control of medications, equipment, and devices.
- 3.20 Explain accepted procedures utilized in identifying and disposing of expired medications.
- 3.21 Explain accepted procedures in delivery and documentation of immunizations.
- 3.22 Prepare, store, and deliver medication products requiring special handling and documentation.

Provide documentation of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. Provide a sampling of students' criteria-based completed assessment tools utilized at the program site for evaluation.

Additional Key elements for Advanced-level

- 3.23 Prepare compounded sterile preparations per applicable, current USP Chapters.

Provide documentation of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. Provide a sampling of students' criteria-based completed assessment tools utilized at the program site for evaluation.

- 3.24 Prepare medications requiring moderate and high level non-sterile compounding as defined by USP (e.g., suppositories, tablets, complex creams).

Provide documentation of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. Provide a sampling of students' criteria-based completed assessment tools utilized at the program site for evaluation.

- 3.25 Prepare or simulate chemotherapy/hazardous drug preparations per applicable, current USP Chapters.

Provide documentation of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. Provide a sampling of students' criteria-based completed assessment tools utilized at the program site for evaluation.

- 3.26 Initiate, verify, and manage the adjudication of billing for complex and/or specialized pharmacy services and goods.
- 3.27 Apply accepted procedures in purchasing pharmaceuticals, devices, and supplies.
- 3.28 Apply accepted procedures in inventory control of medications, equipment, and devices.

- 3.29 Process, handle, and demonstrate administration techniques and document administration of immunizations and other injectable medications.

If your state has regulations restricting pharmacy technicians from administration of immunizations, students still need to be taught the processing, handling, and administration techniques for immunizations (e.g., administration techniques modeled on an orange).
For additional guidance on the Key Element, see the Model Curriculum.

- 3.30 Apply the appropriate medication use process to investigational drugs, medications being used in off-label indications, and emerging drug therapies as required.

Handle investigational drugs, including immunotherapy agents, biologic agents, and pharmacologic therapies.

- 3.31 Manage drug product inventory stored in equipment or devices used to ensure the safety and accuracy of medication dispensing.

Standard 4: Patient Care, Quality and Safety Knowledge and Skills

Key Elements for Entry-level

- 4.1 Explain the [Pharmacists' Patient Care Process](#) and describe the role of the pharmacy technician in the patient care process.

Provide documentation of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. May include:

- Understanding of the pharmacy technician's role in the Patient Care Process
- Medical-history/retrieval for Medication-Reconciliation
- Collection Patient demographic information
- Gather Lab result values for pharmacist rounds, etc.

For additional guidance on the Key Element, see the Model Curriculum.

- 4.2 Apply patient- and medication-safety practices in aspects of the pharmacy technician's roles.

- 4.3 Explain how pharmacy technicians assist pharmacists in responding to emergent patient situations, safely and legally.

Be knowledgeable and provide examples of patient emergent situations (e.g., heart attacks, anaphylaxis, falling in the pharmacy).
For additional guidance on the Key Element, see the Model Curriculum.

- 4.4 Explain basic safety and emergency preparedness procedures applicable to pharmacy services.

Be knowledgeable and provide examples of emergency situations (e.g., floods, hurricanes, robberies, bio-terrorism, terrorism).
For additional guidance on the Key Element, see the Model Curriculum.

- 4.5 Assist pharmacist in the medication reconciliation process.

Provide a documentation of a learning activity for which the pharmacy technician assists the pharmacist in the medication reconciliation process. Provide a sampling of students' criteria-based completed assessment tools utilized at the program site for evaluation.
For additional guidance on the Key Element, see the Model Curriculum.

- 4.6 Explain point-of-care testing.

Point-of-care testing (e.g., glucose monitoring, cholesterol screening, blood pressure, temperature).
For additional guidance on the Key Element, see the Model Curriculum.

- 4.7 Explain pharmacist and pharmacy technician roles in medication management services.

Links provided for reference on medication management services:
<https://www.pharmacist.com/Practice/Patient-Care-Services/Medication-Management>
<https://www.accp.com/docs/govt/advocacy/Leadership%20for%20Medication%20Management%20-%20MTM%20101.pdf>
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5998476/>

- 4.8 Describe best practices regarding quality assurance measures according to leading quality organizations.

Have familiarity of organizations such as: Institute for Safe Medication Practices (ISMP), The Joint Commission (TJC), US Food and Drug Administration (FDA), United States Pharmacopedia (USP), Occupational Safety and Health Administration (OSHA), National Institute for Occupational Safety and Health (NIOSH), Institute for Healthcare Improvement (IHI), National Coordinating Council for Medication Error Reporting and Prevention (NCC MERP), Drug Enforcement Administration (DEA).
For additional guidance on the Key Element, see the Model Curriculum.

Additional Key Elements for Advanced-level

- 4.9 Verify measurements, preparation, and/or packaging of medications produced by other healthcare professionals.

Provide documentation of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. Provide a sampling of students' criteria-based completed assessment tools utilized at the program site for evaluation.

4.10 Perform point-of-care testing to assist pharmacist in assessing patient's clinical status.

Provide documentation of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities.
Provide a sampling of students' criteria-based completed assessment tools utilized at the program site for evaluation.
For additional guidance on the Key Element, see the Model Curriculum.

4.11 Participate in the operations of medication management services.

Provide documentation of various learning activities that students participate in, to demonstrate operational competencies (e.g., patient history, identification of patients) for medication management services.

4.12 Participate in technical and operational activities to support the [Pharmacists' Patient Care Process](#) as assigned.

Provide documentation of activities students participate in to achieve Key Element through didactic, simulated (lab), and experiential activities. May include:

- Understanding of the pharmacy technician's role in the Patient Care Process
- Medical-history/retrieval for Medication-Reconciliation
- Collection Patient demographic information
- Gather Lab result values for pharmacist rounds

For additional guidance on the Key Element, see the Model Curriculum.

4.13 Obtain certification as a Basic Life Support Healthcare Provider.

Standard 5: Regulatory and Compliance Knowledge and Skills

Key Elements for Entry-level

- 5.1 Describe and apply state and federal laws pertaining to processing, handling and dispensing of medications including controlled substances.
- 5.2 Describe state and federal laws and regulations pertaining to pharmacy technicians.
- 5.3 Explain that differences exist between states regarding state regulations, pertaining to pharmacy technicians, and the processing, handling and dispensing of medications.
- 5.4 Describe the process and responsibilities required to obtain and maintain registration and/or licensure to work as a pharmacy technician.
- 5.5 Describe pharmacy compliance with professional standards and relevant legal, regulatory, formulary, contractual, and safety requirements.

- 5.6 Describe Occupational Safety and Health Administration (OSHA), National Institute of Occupational Safety and Health (NIOSH), and United States Pharmacopeia (USP) requirements for prevention and treatment of exposure to hazardous substances (e.g., risk assessment, personal protective equipment, eyewash, spill kit).
- 5.7 Describe OSHA requirements for prevention and response to blood-borne pathogen exposure (e.g., accidental needle stick, post-exposure prophylaxis).
- 5.8 Describe OSHA Hazard Communication Standard (i.e., “Employee Right to Know”).

Additional Key Elements for Advanced-level

- 5.9 Participate in pharmacy compliance with professional standards and relevant legal, regulatory, formulary, contractual, and safety requirements.

Provide documentation of activities students participate in to achieve Key Element through simulation and experiential activities (e.g., State Board of Pharmacy, Joint Commission, ISMP, State regulatory agencies).
For additional guidance on the Key Element, see the Model Curriculum.

- 5.10 Describe major trends, issues, goals, and initiatives taking place in the pharmacy profession.

Provide lists of resources utilized as references for students to be informed on latest trends in the pharmacy and pharmacy technician professions.
For additional guidance on the Key Element, see the Model Curriculum.

SECTION II: STRUCTURE AND PROCESS TO PROMOTE ACHIEVEMENT OF COMPETENCY EXPECTATIONS

The following Standards and Key Elements, unless otherwise designated, apply to both Entry-level and Advanced-level programs.

Standard 6: Authority and Responsibility provided to Program Director

- 6.1 The program director is accountable for the overall quality of the program. He/she has considerable latitude in delegating instructors' and preceptors of records' responsibilities.
- 6.2 The program director:
- (a) is a licensed pharmacist or a nationally certified pharmacy technician;
 - (b) has at least five years of experience as a pharmacist or pharmacy technician in pharmacy practice prior to entering the position;
 - (c) adheres to the state's regulations for licensure or registration in the practice of pharmacy; and
 - (d) demonstrates on-going continuing education in the field of pharmacy and/or education.
- 6.3. If the program director is a pharmacy technician, he/she:
- (a) has graduated from an ASHP/ACPE-accredited pharmacy technician training program; or
 - (b) possesses or is actively pursuing, with a written plan for achieving, at least an Associate's Degree; or
 - (c) has an appropriate state teaching credential.

Provide completed academic and professional form for the program director. [Click here](#) to download the form. Examples of evidence:

- If pharmacist, pharmacy license
- If technician, proof of national certification and/or graduate of an accredited pharmacy technician training program and state licensure or registration, if applicable.
- Completed Academic and Professional Record

- 6.4. To stay current with professional issues, the program director is a member of a national pharmacy or education association and a state pharmacy association. He/she ensures that memberships in pharmacy and education associations are represented among the program faculty members.

Certificates of national pharmacy or education association and a state pharmacy association (PTCB and NHA are not qualifying organizations for this).

- 6.5. The program director ensures that there is a sufficient complement of appropriate program faculty and staff to meet the needs of the program and to enable compliance with the Standards.

Provide documentation of compliance of the program since inception of the program. Provide ratio of instructor to student for simulation and didactic learning experiences, for each section of program (e.g., day class, evening class, weekend class).

- 6.6. In the simulated portion of the program, the program director takes necessary precautions to ensure an effective and safe level of direct supervision of students.

Provide the student to faculty ratio within your program.

- 6.7. Maintains records required in the Standards for at least three years or the time period specified by the institution's policy.

If you are a new program, provide documentation of compliance of the program since inception of the program. If you have an established program, maintain at least three years of records (records may be electronic or hard copy).

- 6.8. For the experiential component of the program, the program director or a qualified pharmacy technician instructor:
- (a) selects adequate and appropriate experiential sites;
 - (b) documents that each experiential site has proper licensing;
 - (c) determines that students will have the opportunity to practice a sufficiently wide range of activities in order to achieve the desired knowledge, skills, and abilities;
 - (d) reviews experiential training sites within the 12-month period prior to students being assigned/active in a site;
 - (e) ensures that affiliation agreements for all sites are completed and current;
and
 - (f) ensures that the preceptor of record has received instruction regarding the requirements of the program and the responsibilities of the site.

The person who reviews must be a pharmacist or pharmacy technician. Provide completed inspection forms (blank forms are not acceptable) for experiential training sites. Provide current executed affiliation agreements (within the last 3-5 years; blank forms are not acceptable) for experiential training sites. Provide information given to the preceptor of record, describing the requirements of the program and the responsibilities of the site.

- 6.9. The program director ensures that students' achievement of educational objectives is evaluated appropriately, to include their knowledge, skills, and abilities leading to Entry-level or Advanced-level pharmacy technician job competencies.

Provide completed competency criteria-based assessment tools and documentation that all Key Elements are met per the Standard (e.g., simulated competency check-list, utilizing a crosswalk, and the checklist for the externships).

Standard 7: Strategic Plan

- 7.1 The program develops a strategic plan that is reviewed annually and revised every three years.

Provide documentation of a strategic plan developed/revised within the last 3 years (evidenced entering the date(s) of creation/revision of the strategic plan document and review process).

Resources to reference for 7.1 and 7.2 include videos on the ASHP website, visit link below:

<https://www.youtube.com/watch?v=yn1OSWfp1IA&feature=youtu.be>

- 7.2 The plan:
- (a) reflects the role of the program within the community;
 - (b) includes short-term and long-term program goals;
 - (c) has specific measurable objectives;
 - (d) has strategies for achieving the goals and objectives of the strategic plans;
 - (e) has a schedule for analyzing and evaluating the plan and progress on the plan; and
 - (f) addresses program outcomes. (See section 14.2)

Standard 8: Advisory Committee

An advisory committee, comprised of a broad-based group of pharmacists, faculty, pharmacy technicians, and others as deemed appropriate, is established and meets at least twice a year. The advisory committee has specific authority for approving:

- 8.1 the curriculum;
- 8.2 experiential training sites;
- 8.3 criteria for admission and dismissal;

- 8.4 criteria for successful completion of the program; and
- 8.5 the training program's strategic plan.

Provide agenda, documented background materials provided to all members prior to or at meetings, and approved meeting minutes.

Examples of Evidence:

- Description of advisory committee
- Roster of advisory committee. Names, job titles, and facility should be included.
- Minutes for three years (if applicable) of advisory committee meetings, including documentation of attendance by appropriate attendees (i.e., external stakeholders).
- 8.1-8.5 should be reviewed regularly (annually)
- Evidence in advisory committee minutes that it affirmed 8.1-8.5 by consensus

Resources to reference for 7.1 and 7.2 include videos on the ASHP website, visit link below:

https://www.youtube.com/watch?v=dnC_aYrr1GY&feature=youtu.be

Standard 9: Curricular Length

Students are required to complete the number of hours for each component to graduate.

Key Elements for Entry-level

- 9.1 The training schedule consists of a minimum of 400 hours total, of health-related education and training, extending over a period of at least 8 weeks.
- 9.2 The period of training includes the following educational modalities: Didactic; Simulated; and Experiential.
- 9.3 The minimum number of hours for each component is as follows: Didactic – 120 hours; Simulated – 50 hours; Experiential – 130 hours (total of 300 hours); plus 100 additional hours, to obtain the minimum of 400 hours of training total. The additional 100 hours may be allocated to the three educational modalities listed above, based on the discretion of the program director and faculty.
- 9.4 Programs document their method of time calculation and the attribution of hours of academic instruction within all instructional components for the program.

Provide a method to calculate hours for both on-site and distance learning programs. Calculations should include clock hours.

Key Elements for Advanced-level

- 9.5 The training schedule consists of a minimum of 600 hours total, of health-related education and training, extending over a period of at least 15 weeks (at least 7 additional weeks beyond Entry-level requirements).
- 9.6 The minimum number of hours for each component is as follows: Didactic – 160 hours (40 additional hours beyond Entry-level requirements); Simulated – 100 hours (50 additional hours beyond Entry-level requirements); and Experiential – 200 hours (70 additional hours beyond Entry-level requirements); plus 140 additional hours beyond Entry-level requirements, to equal a minimum of 600 hours training total. The additional 140 hours may be allocated to the three educational modalities listed above, based on the discretion of the program director and faculty.

Institutions can provide both Entry-Level and Advanced-Level programs that run contiguously / consecutively.

Standard 10: Curricular Composition and Delivery

- 10.1 The didactic component provides a foundation that prepares students for the simulated and experiential components.
- 10.2 The simulated component:
- (a) is a hands-on practice of skills without impact, or potential for impact, on patients and occurs before the experiential component;
 - (b) includes sufficient equipment and supplies for each student to realistically simulate an actual work environment and achieve the program's educational competencies;
 - (c) while each skill may be taught in isolation, by the end of the simulated component, students will be able to perform each skill in a sequential manner the way the skill is performed in an actual pharmacy setting; and
 - (d) prepare students for the experiential component.

Provide a list of all equipment and supplies utilized for the simulation component for students, to emulate an actual work environment.

Examples of Evidence:

The following list is an example of equipment and supplies, depending on the type of program you are operating. Simulation with actual equipment and supplies is preferred. In its absence, realistic models/mock-ups are expected.

- Fill prescriptions
- Complete unit dose packaging
- Fill automated dispensing cabinet (ADC)
- Extemporaneously compound oral, topical and sterile products and suppositories
- Prepare sterile compounded chemotherapy agents
- Prepare total parenteral nutrition (TPN), including the use of different syringe sizes and bag sizes (mini and LVP)
- Prepare investigational drugs
- Prepare oral syringes, including pediatric syringes
- Prepare unit dose carts
- Prepare emergency drug carts/boxes
- Fill narcotics cabinet
- Monitor refrigerator temperature/systems
- Apply proper hand-washing procedures with an operational sink
- Employ aseptic technique in accordance with USP 797 requirements
- Utilize pharmacy references
- Utilize outpatient and inpatient computerized systems
- Reconstitute lyophilized powders
- Manipulate ampules
- Maintain electronic medical records
- Use computers and printers to produce medication labels
- Handle over-the-counter (OTC) products
- Operate durable medical devices
- Maintain inventory records (automated vs Want Book)
- Utilize appropriate interpersonal skills when speaking with customers on the phone or in-person.
- Prepare medications for nursing home patients
- Maintain medication administration records
- Implement tall man lettering and other “look alike, sound alike” (LASA) techniques for medication error reduction
- Operate cash register

Equipment and supplies that may assist in providing adequate practice of these skills, (e.g., retail vs hospital equipment and supplies, wall of meds (IV and PO), tall man lettering, computer systems).

- References (online and text)
- Packaging equipment and supplies
- Blister packs

- Computers
- Printer
- Calculators
- Software for medication profiles
- Cash Register
- Refrigerator with thermometer
- Scales and/or balances with weights
- Ingredients for compounding
- Spatulas
- Ointment slab
- Cylinders
- Beakers
- Spatulas
- Suppository molds
- Hot plate
- Compounding logs
- Pill counting trays
- Weighing papers or boats
- Cleaning supplies i.e.: alcohol and gauze
- Rx bottles and vials with lids
- Automated simulation software
- Automated drug distribution cabinets
- Medication carts
- Shelving with practice medications and bins
- Inventory practice software
- Countertop surfaces for working
- Oral syringes with caps
- Labels
- Narcotic cabinet
- Written practice prescriptions
- Written physician's orders
- Patient profiles
- Reference library
- Laminar IV hood
- Sink
- Biological safety cabinet
- Automatic fill or TPN compounder
- Vials
- IV Solutions
- Filters
- Stocked IV room shelving
- Syringes
- Needles
- Solutions for admixing
- Powder vials for reconstitution
- Sticky mat
- Gloves

- Gowns
- Masks
- Goggles
- Shoe covers
- Hair covers
- IV cleaning supplies

10.3.a Students in an **Entry-level program** complete at least one experiential rotation in a dispensing pharmacy setting where the student will utilize skills learned during their Entry-level curriculum.

Provide list of experiential rotations offered for students during the program.

10.3.b Students in an **Advanced-level program** complete at least one additional experiential rotation, in addition to any completed during an Entry-level program. This advanced experiential rotation takes place in a facility where the student will utilize skills learned during the Advanced-level curriculum.

Provide list of experiential rotations offered for students during the advanced program. Provide one year of 5 individual students' schedules of rotations to illustrate that each has completed two types of practice environments.

10.4 Experiential training sites are recognized by an organization(s) appropriate to the practice setting (e.g., licensed by the State Board of Pharmacy).

10.5 The sequence of activities to transition from simulated to experiential is:

- (a) observation (student observes expert performing task);
- (b) simulation (including observation, feedback, and evaluation by an expert);
- and
- (c) experiential performance under supervision.

10.6 The preceptor of record:

- (a) is a person who works at the experiential site and coordinates or oversees students' activities;
- (b) has at least two years of experience in the type of pharmacy setting for which they are training students;
- (c) is a certified pharmacy technician or licensed pharmacist; and
- (d) acts as a liaison between the site and the program director to ensure that the student receives the intended educational experience and is evaluated effectively.

- (e) ensures that only qualified pharmacy personnel are assigned to train students.

Provide a list of preceptors of record with their completed academic and professional forms.

- (f) ensures that required documentation (e.g., academic and professional record, student time sheets, evaluations) is submitted to the program in a timely fashion.

Provide list of qualified pharmacy personnel assigned to training students with the number of years that they have been working at the site, as well as the number of years working in the area for which they are training the student.

The following apply to programs using distance learning

- 10.7 Distance learning programs comply with all Key Elements of Standard 10.

Distance learning programs are required to follow the same sequencing as didactic, simulation, and experiential learning experiences. Distance learning programs are required to align and comply with all Key Elements of the full Accreditation Standards.

- 10.8 Program directors and faculty make appropriate and effective use of technology to teach specified objectives. The technology is made readily accessible by students, including, but not limited to, reasonable accommodations for unexpected technology outages.

Provide description of the technology used in the program to teach students and policies for accommodations for unexpected technology outages (e.g., type of Learning Management System, or any other proprietary technological systems).

- 10.9 The program verifies that a student who registered for distance education or is participating in program-related off-campus activities is the same student attending the clinical experiential portion of the program, receiving credit, and graduating.

Provide tools used to verify students for experiential training and for taking tests and participating in the program (e.g., proctoring services, electronic verification methods).

- 10.10 The technology ensures engagement and assessment of skill understanding throughout the course and provides procedures for response to student questions in a timely manner.

Provide policy for response to student questions (e.g., documentation of staffing allocations, average response times).

Standard 11: Student Recruitment, Acceptance, Enrollment, and Representation

- 11.1 A policy and process is documented and provided to student recruitment personnel (staff who enroll prospective students, such as telephone marketers, enrollment advisors, and admissions representatives), that includes guidance to them as follows:
- (a) prior to the application process, providing prospective applicants complete and accurate information on the total student financial obligation they will incur by participating in the program;
 - (b) prior to enrollment, providing students complete and accurate information about financing options and answering any questions; and
 - (c) prior to enrollment, informing students that illicit drug use, criminal background checks, and immunization status may prevent future employment as a pharmacy technician, and that externship sites, employers, and State Boards of Pharmacy have regulations about drug use, criminal backgrounds, and immunization status.

Provide document given to students prior to the application process regarding total student financial obligation and options that they will incur by participating in the program, regarding 11.1a-c (e.g., additional costs related to applicant screening, commuting to experiential locations, class supplies and associated costs).

- 11.2 The organization establishes qualifications that the applicants possess to ensure that they are reasonably likely to be able to achieve the educational goals and objectives of the program.

Provide documentation of the qualifications that the applicants must possess.

- 11.3 The organization determines with reasonable certainty, prior to acceptance of the applicant, that the applicant has proper qualifications to enroll. At a minimum, the student:
- (a) attends high school, possesses a high school equivalency certificate, or is a high school graduate;
 - (b) has demonstrated English language proficiency (including reading, writing, and speaking), except in cases where the native language of the country or territory in which the program is taking place is different (e.g., Puerto Rico);

- (c) has demonstrated math proficiency sufficient to fulfill the requirements of pharmacy technician job responsibilities;
- (d) meets the minimum age requirements that are based on states requirements for employment of pharmacy technicians; and
- (e) obtained a certificate to illustrate that the student has obtained training in an ASHP/ACPE accredited program (for Advanced-level admissions).

Provide documentation of admission criteria for the program for items 11.3a-e, including methods of informing applicants and gathering this consent.

- 11.4 The program has a documented process to assess applicants' background pertaining to any illicit drug use and criminal background. This information is used to make appropriate decisions regarding continuation in a program.

Provide documentation of written policies.

- 11.5 Reasonable accommodations are made for students and applicants with disabilities who request accommodation.

Provide documentation of written ADA policies.

- 11.6 The organization provides applicants, prior to enrollment, with information about:

- (a) qualifications to enroll;
- (b) the purpose of the training program;
- (c) requirements for state registration or licensure as a pharmacy technician;
- (d) requirements for obtaining and maintaining national pharmacy technician certification;
- (e) programmatic and institutional accreditation status;
- (f) prospects for employment;
- (g) realistic salary expectations or referral to local, state, or national statistics for salary expectations;
- (h) total program cost;
- (i) the program's dismissal policy including academic and non-academic criteria, including, but not limited to the organizations Student Code of Conduct; and
- (j) graduate performance on national exams posted on public-facing materials and websites.

Provide documentation provided to the student related to 11.6 (a)-11.6(j) with signed validation. Include the public facing marketing materials and/or websites that include all above information to applicants.

- 11.7 The program director ensures that a process for determining requirements and conditions for graduation is documented and implemented.
- 11.8 The following applies to distance programs:
- (a) the program provides information regarding applicants' technology requirements for the program.

Standard 12: Faculty/Instructors

- 12.1 Faculty/instructors have demonstrated expertise with at least three years of experience, and current knowledge in the areas in which they are instructing.
- 12.2 Faculty members/instructors adhere to state regulations for licensure or registration to practice as a pharmacist or pharmacy technician.

Provide copies of licensure or registration certificates, as applicable for a pharmacist and/or pharmacy technician.

- 12.3 Faculty/instructors that are pharmacy technicians maintain national certification.

Provide copy of certificates for each faculty/instructors national certification, if applicable.

- 12.4 Faculty members, including the program director, instructors, and preceptors are evaluated regularly:
- (a) using a process that is defined and implemented;
 - (b) incorporate feedback from students and graduates; and
 - (c) information gained from evaluations for continuous improvement is analyzed, defined, and implemented.

Provide completed evaluations for all faculty members by students for a three year period (including evaluations for program directors, instructors, and preceptors). In addition, provide the process for which the evaluation survey is implemented to include feedback from students and graduates and what is done with the submitted information for continuous improvement.

Standard 13: Documentation

Records related to the following are maintained and stored for three years (if the program has been in existence for at least three years) or the time period specified in institutional policy.

- 13.1 Qualifications of the program director and instructors.
- 13.2 Training activities that delineate the scope and period of training.
- 13.3 Activities performed in the didactic, simulated, and experiential segments of the program.
- 13.4 Reviews experiential training sites within the 12-month period prior to students being assigned/active in a site, experiential training site pharmacy services, and the onsite preceptor of record.
- 13.5 Programs recognize only those pharmacy technicians who have successfully completed the pharmacy technician training program by awarding an appropriate certificate or diploma.
- 13.6 The certificate is signed by the program director and a superior of the program director of the institution.

Provide a copy of the certificate that includes items in 13.6-13.7, provided to successful graduates of the program. At the time of this publication, current certificate ASHP/ACPE Accreditation logo may be found on the website by clicking on the following link: <https://www.ashp.org/professional-development/technician-program-accreditation/ashp-acpe-pharmacy-technician-program-accreditation-logos>

- 13.7 The certificate contains the name of the organization, program name and location, student name, completion date, and confirmation that the program is ASHP/ACPE-accredited or in ASHP/ACPE candidate status, and if the program is an “Entry-level” or “Advanced-Level”.
- 13.8 The organization shall maintain a list of all graduates from their program (beyond the minimum of the three year period).

Provide a list of the graduates for a three year period.

SECTION III: ASSESSMENTS OF STANDARDS AND KEY ELEMENTS

Standard 14: Assessment of Competency Expectations

The program's staff conducts regular, ongoing, formative, and summative assessments of student competencies and program effectiveness that are used in the continuous quality improvement process.

14.1 Student Learning Assessments:

- (a) Criteria-based assessment of students' competencies occurs in each component of the program (didactic, simulated, and experiential).
- (b) The final phase of the simulated component of the program includes observation, feedback, and evaluation by an instructor/faculty member.
- (c) The program director ensures that student evaluation is ongoing, systematic, and assesses students' progress toward meeting the requirements for graduation.
- (d) Students receive frequent criteria-based feedback on their performance that enables them to identify strengths and weaknesses and gives them direction on how to improve.
- (e) Evaluations are documented and kept on file.
- (f) Assessment data used in the continuous quality improvement process is actively maintained.

Provide sample of tests from didactic experiences of the program. Provide samples of assessment sheets from simulation activities with criteria-based feedback based on 14.1(d). Evaluations must be based on the Key Elements of the Standard, that include written feedback, which enables students to identify their strengths and weaknesses, giving students direction for growth and improvement.

14.2 Program assessments include, but are not limited to:

- (a) program completion;
- (b) performance on national certification examinations or performance on a psychometrically valid evaluation;
- (c) program satisfaction, including student, graduate, and employer satisfaction;
- (d) job placement; and
- (e) assessment data used in the continuous quality improvement process is actively maintained.

Contact the testing agency to ensure that the program graduates are accurately reflected in the annual exam statistics reported. 14.2(b) must be an official report from the testing agency.

Standard 15: Assessments of Structure and Process

- 15.1 The program develops resources and implements a plan to assess attainment of Standards 6-13.
- 15.2 Documentation of use of assessment data in the continuous quality improvement process is maintained.
- 15.3 If permitted by the program, policies and procedures are developed and implemented for transfer credit and course waivers.

If applicable, provide policy for transfer credit and course waivers.

Approved by the ASHP Board of Directors on June 2, 2018 and the Accreditation Council for Pharmacy Education Board of Directors on June 23, 2018. Developed by the Pharmacy Technician Accreditation Commission. This version supersedes the ASHP/ACPE Accreditation Standards for Pharmacy Technician Education and Training Programs, approved November 7, 2015 and will be effective January 1, 2019.

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Guidance revised and published Sept. 2023.